

# Primary Care Strategy 19/20 – 22/23

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January 2020

- Maintain and improve delivery of safe and high quality services which are patient focussed.
- Engage, communicate and educate our population to ensure they can appropriately use services to meet their health and care needs.
- Develop and deliver services which are integrated in partnership with our community, mental health, social, voluntary sector and hospitals as well as other primary care providers
- Not only sustain primary care but ensure primary care is modern and thriving for the future
- Ambition is for Staffordshire and Stoke-on-Trent to be an attractive and enjoyable environment with a focus on clinical leadership and developing our workforce

# Characteristics

- STP population of 1.1m with approximately 871,000 Staffordshire residents and around 255,000 Stoke-on-Trent residents
- Population growing and older population is higher than national average
- Deprivation varies across Staffordshire (relatively affluent with pockets of deprivation) and Stoke-on-Trent (ranked 14<sup>th</sup> most deprived local authority area out of 326 in England)

CCG	Stafford & Surrounds	Cannock Chase	South East Staffordshire & Seisdon Peninsula	East Staffordshire	North Staffordshire	Stoke On Trent
Population Size*	149,010	133,907	218,923	143,907	213,705	287,952
Number of GP Practices*	14	23	26	18	30	41

- 26 Primary Care Networks (PCNs) in place

# Some of the challenges:

- Primary Care workforce

*STP vision - “To develop a sustainable general practice workforce for today and the future, which will form the foundation to enable the delivery of the future new models of integrated, collaborative care”.*

Challenges include significant numbers of local GP vacancies, recruitment challenges, recruitment to nursing vacancies, limited investment into nurse development, traditional GP centric model, patient expectations to see a GP, lack of culture to embrace new workforce models, underutilisation of skill mis, leadership capacity and capability, lack of sharing best practice

- Primary care estates

*Primary care estates strategy – to support future ways of working, identify priorities for investment, promote integrated working, create high quality working environments*

Challenges include right locations, building not fit for purpose, long term leases, funding for development is limited

# Fulfilling the long term plan



*1. We will boost 'out-of-hospital' care, and finally dissolve the historic divide between primary and community health services*

- PCNs – 100% population coverage. Organisational development support to develop and grow
- Commissioning and investment – Patients having ability to access same services, reduce variability, 7 new national service specifications
- Integrated Care Teams (ICTs) – Key to supporting patients to remain at home, proactive approach, seamless working across primary, community, social and voluntary sector
- Estates and infrastructure - Integrated care hubs, Integrated Care Record (ICR)
- Workforce – Understanding the data, enhancing workforce models, utilising skill mix, communication with the public, active signposting, additional roles through PCNs, General Practice Nursing (GPN) 10 point plan
- Workload – Practice resilience, active signposting, redirecting workflow, online consultations,

# Fulfilling the long term plan



## *2. The NHS will reduce pressure on emergency hospital services*

- *Extended access – 100% population coverage for Staffordshire and Stoke-on-Trent, 7 core requirements, 3 year contract*
- Integrated urgent care specification:
  - Urgent Treatment Centres
  - Integrated Care Record (ICR)

## *3. People will get more control over their own health and more personalised care when they need it*

- QOF – Review achievement, quality improvement modules, understanding exception reporting
- Local Improvement Schemes (LIS) – Quality Improvement Framework (QIF), membership and engagement agreements, target priorities and other data intelligence such as Right Care, commissioning framework, Protected Learning Time (PLT) and quality learning and development opportunities
- Care navigation / active signposting – Build on current approx 933 trained, develop and embed processes, directory of service
- Social prescribing – PCN link workers, understanding services available
- Digital and technology enabled care (TECs) – Develop GP online services to drive integrated care programme, NHS App, TECs including SKYPE

# Fulfilling the long term plan



## *4. Digitally-enabled primary and outpatient care will go mainstream across the NHS*

- Digital technology – Future proof state of the art infrastructure, Health and Social Care Network, Cyber security
- Population health management – Establish an approach, supporting PCN development
- TECs
- GP online services

## *5. Local NHS organisations will increasingly focus on population health – moving to Integrated Care Systems everywhere*

- Progress Integrated Care System (ICS)
- Primary care leaders and general practice will be at the heart of the PCN's and Integrated Care Providers (ICPs)
- Joined up services for populations



- GP patient survey – Annually monitored, action plans with practices to improve satisfaction levels
- Primary Care Commissioning Committee
- Quality
  - Quality quarterly dashboard
  - proactive support
  - quality visits
  - sharing good practice

# Next steps



- Further engagement with members to refresh and further develop the strategy
- Ownership of strategy across the system
- Further work with Communications Team on educating the public, new workforce roles, PCNs, navigating service
- Drive the workforce agenda

# Primary Care Workforce briefing

Sarah Jeffery – Head of Primary Care Development

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# Primary Care Workforce - Strategy



The STP vision:

*“To develop a sustainable general practice workforce for today and the future, which will form the foundation to enable the delivery of the future new models of integrated, collaborative care”.*

Staffordshire and Shropshire Primary care workforce group - targets recruitment and retention of health professionals within the primary care workforce.

Challenges include significant numbers of local GP vacancies, recruitment challenges, recruitment to nursing vacancies, limited investment into nurse development, traditional GP centric model, patient expectations to see a GP, lack of culture to embrace new workforce models, underutilisation of skill mix, leadership capacity and capability, lack of sharing best practice

# Workforce Planning



- High level Long Term Plan workforce trajectories submitted.
- Plans had been compiled with the input of all provider organisations, Staffs Training Hub, NHSE, the CCG primary care team with support from the STP workforce team.
- Workforce narrative in LTP and has a number of caveats and assumptions, including the left shift and financial considerations.
- The numbers and plans are iterative as development and clarity emerges on PCNs and STP service models.
- Meeting held 9<sup>th</sup> December 2019 with CCG, STP Workforce Programme lead and HEE Workforce Planning Specialist to discuss ongoing workforce planning and future support.
- STP Workforce Programme hosted their Second Think Tank event in November, joined by colleagues from across the system. An opportunity for collaboration and joining forces to address shared issues.

- HEE support with knowledge of future workforce and hold cleansed database – indication of trainees and expected data of completion
- Opportunity to revise one year trajectories (including additional roles)
- Current plan is what we know now and numbers are as expected.
- Workforce data available:
  - National Workforce Reporting System (practice based data) – all practices registered
  - NHS Futures (additional analysis tools and reports are available) and
  - NHS Digital - provides view of practice and CCG data
- HEE have reported overall numbers of GPs in the STP is generally steady and showing a small increase in FTE (See CCG breakdowns at end)

# Workforce Planning - future



- Understand baseline, changes, recruitment and retention schemes impact, take into account population growth
- Plans to increase workforce, reduce attrition and increase recruitment into a more diversified workforce to ensure primary care can be sustained
- PCN DES from July 2019 additional roles reimbursement scheme – increase clinical pharmacists and social prescribing link workers. Future years - Paramedics, Physiotherapists and Physicians Associates.
- Roles selected as evidence of them being able to reduce GP workload, available and confidence in ability to fill

- Number of GPs (headcount) number not reduced but FTE has reduced as GP's taking on less hours when they join.
- HEE modelling tool – supply and demand by year 5. Scenario modelling such as . % of GPs aged >55s expected to retire, improvement in supply e.g.. Newly qualified from HEE training data.
- Currently c. 70% that qualify go onto work in primary care. Assumption from headcount of trainees, the participation rate is 0.7 (not full time). Therefore 2 headcount trainee = 1 FTE GP. Approximately 0.2 developing portfolio careers, positive to support GP retention in the area.
- Consideration by STP of further retention initiatives, build relationships with trainees, promote to stay local
- Training hubs - different levels of maturity and different levels of funding. From 1st April there will be a joint approach with HEE and NHSE/I.



# HEE – trainee update & recommendations



- HEE live data - trainee data regularly reviewed and updated.
- National target met, difficult to maintain e.g. Capacity / rooms in primary care
- HEE report Staffordshire positive as have more trainees – larger output expected in 3 years. Increases to Staffordshire over last 4 years. FTE (125.2 Sep-19) divided by headcount (135) = 0.927 (participation rate), higher than average for midlands (0.91).
- For Trainees working in general practice the participation rate is lower (0.7) as working a day elsewhere eg. portfolio work or in A&E.
- HEE recommend offer of portfolio work and good links with LMC, to understand what happening with workforce and supporting trainees/new GPs.
- Forecasted 30 FTE per annum trainees taking into account average over 3 years

**Key message – number of GPs and GP Registrars has increased in Staffordshire.**

# Workforce – next steps



- HEE producing baseline data and modelling tool to support STP with revised trajectories.
- No CCG report available via workforce tool on vacancies and retirements apart from national experimental figures. Practice encouraged to provide absences and vacancies in workforce tool but completion rate historically low. Practices continue to be encouraged to do.
- CCG communicating with public raising awareness of new and developing primary care roles. Links to effective signposting
- CCG developing leaders in primary care
- Learning and education - important elements of the development of the workforce with Protected Learning Time (PLT) sessions provided for GP practices and other quality L&D activities.
- The General Practice Nursing (GPN) 10 point nursing plan - integrated into the STP Primary Care workforce plans

# North Staffs CCG - Comparison



## General Practice Workforce

Selected CCG Information

September 2019

## NHS North Staffordshire CCG



### How to use this page

Firstly, select the Clinical Commissioning Group (CCG) you are interested in to view selected statistics, including comparisons against all-England figures, and percentile rankings compared against other CCGs.

Then, to view further practice information, right click on the GP practice you are interested in on the map and select drillthrough option.

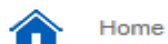
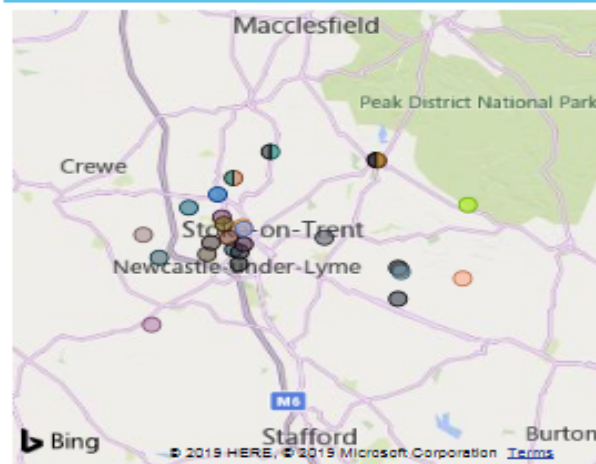
Number of patients

217,731

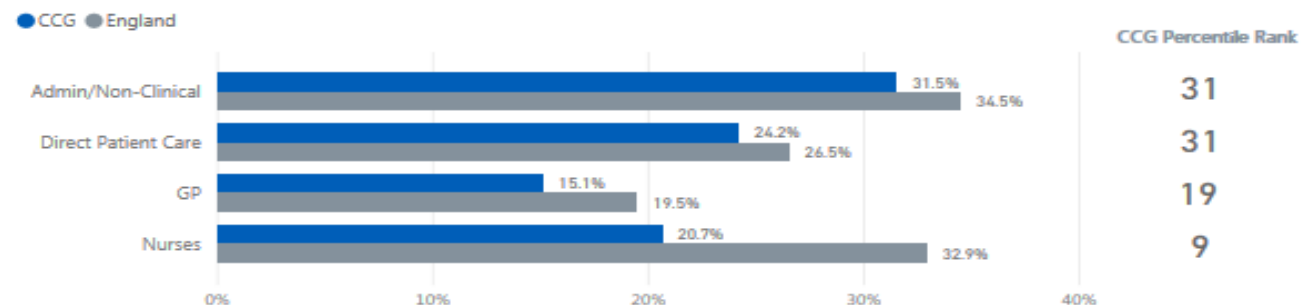
### CCG

- NHS North Lincolnshire CCG
- NHS North Norfolk CCG
- NHS North Staffordshire CCG**
- NHS North Tyneside CCG

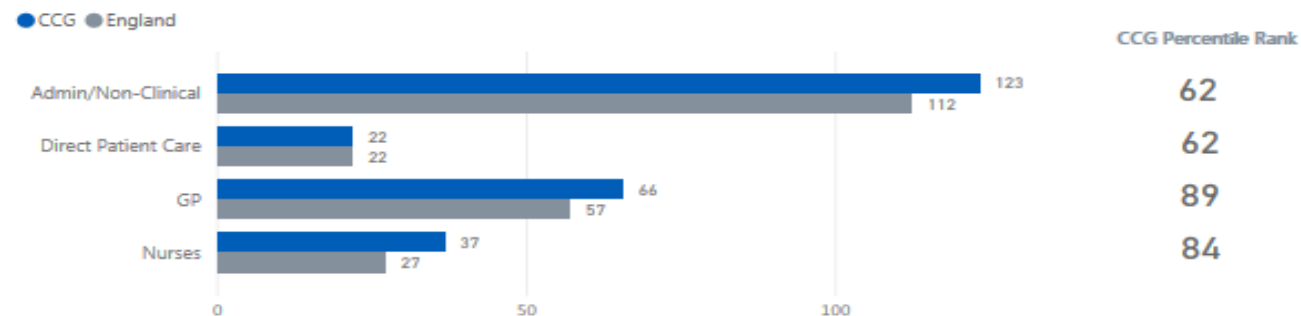
### GP Practices



### Percentage of Staff aged 55 or over, by FTE, CCG and England



### Staff FTE per 100,000 patients, CCG and England



Records extracted from Electronic Staff Record system are excluded from these figures to allow for fair comparison.

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# North Staffs CCG Trend – GPs (Excl Registrars)

## General Practice Workforce

Headcount and Full-Time Equivalent (FTE) Time Series  
All Staff Groups by Job Role and Gender

September 2015 to September 2019



Staff Group

GP

Job Role

All Fully Qualified GPs (excludes Registrars)

Gender

Female

Male

Other/Unknown

NHS England Region (Local Office)

All

Health Education England Region

All

Sustainability and Transformation Partnership

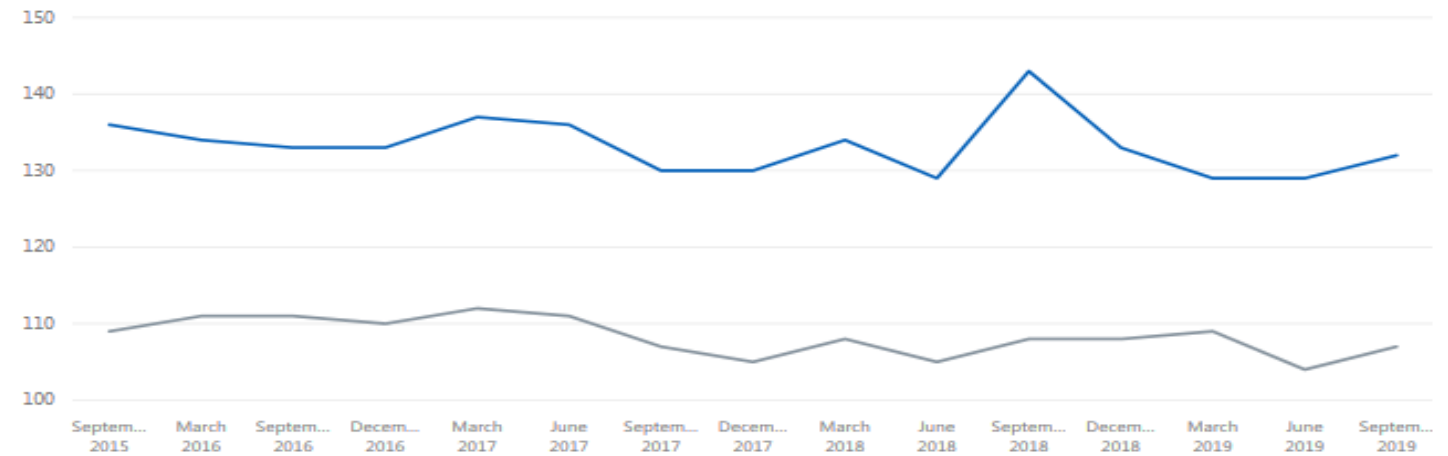
All

Clinical Commissioning Group

NHS North Staffordshire CCG

Headcount and FTE by Census Date

● Headcount ● FTE



For December 2016 and June 2017, only GP figures are available.

# SOT CCG - Comparison



## General Practice Workforce Selected CCG Information

September 2019



## NHS Stoke on Trent CCG

### How to use this page

**Firstly**, select the Clinical Commissioning Group (CCG) you are interested in to view selected statistics, including comparisons against all-England figures, and percentile rankings compared against other CCGs.

**Then**, to view further practice information, **right click on the GP practice you are interested in** on the map and **select drillthrough** option.

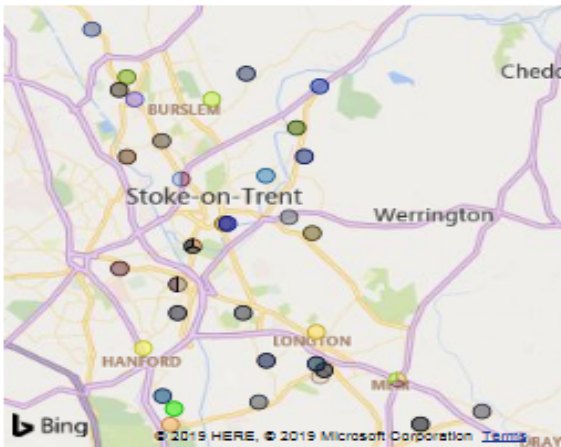
Number of patients

294,845

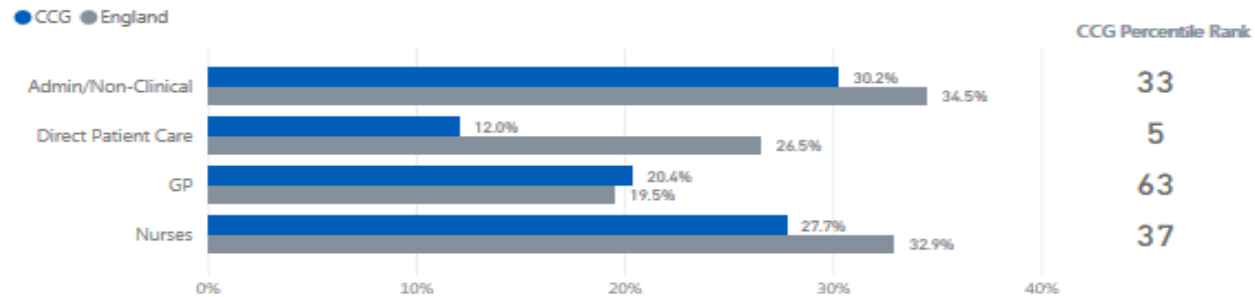
### CCG

- NHS Stafford and Surrounds CCG
- NHS Stockport CCG
- NHS Stoke on Trent CCG
- NHS Sunderland CCG

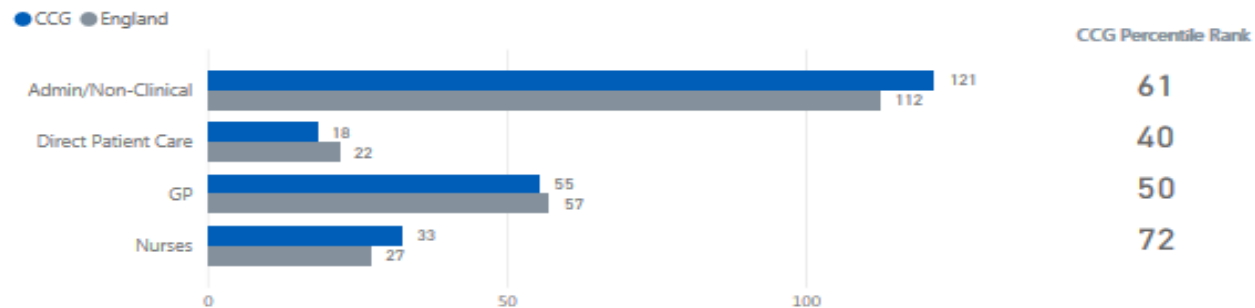
### GP Practices



### Percentage of Staff aged 55 or over, by FTE, CCG and England

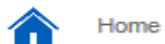


### Staff FTE per 100,000 patients, CCG and England



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# SOT CCG – GP Trend (excl Registrars)



## General Practice Workforce

Headcount and Full-Time Equivalent (FTE) Time Series  
All Staff Groups by Job Role and Gender

September 2015 to September 2019



Staff Group

GP

Job Role

All Fully Qualified GPs (excludes Registrars)

Gender

Female Male Other/Unknown

NHS England Region (Local Office)

All

Health Education England Region

All

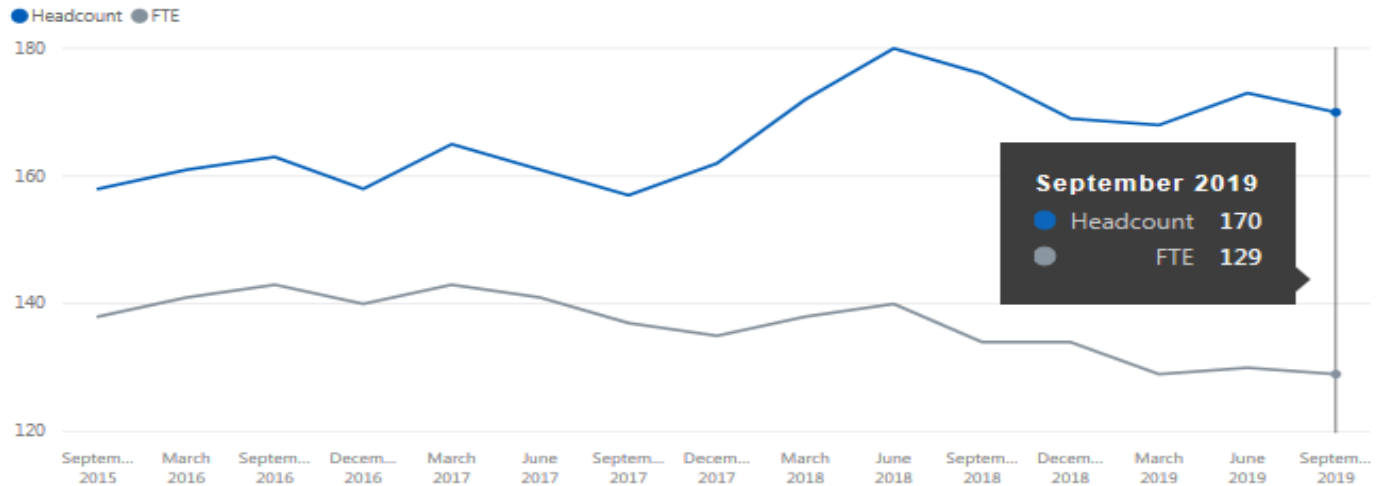
Sustainability and Transformation Partnership

All

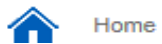
Clinical Commissioning Group

NHS Stoke on Trent CCG

Headcount and FTE by Census Date



For December 2016 and June 2017, only GP figures are available.



Home

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- **Developing New to Practice Programme** for GPs and GPNs.
- **GP Supervision** course held and further dates available (excellent feedback received).
- **Practice Based Small Group Learning (PBSGL)** - received a very good response with 63 having registered to join. Opportunity for all Health professionals within Practices to work together to develop their knowledge.
- **PA programme** being run by the North Staffs GP Federation to date has recruited 6 intakes of PAs, totalling 24 PAs across Staffordshire, with a further intake of 2 PAs to commence.
- **Training Courses advertised**  
eg. GP Trainer Courses, Fundamentals of General Practice Nursing, Prescribing Lifestyle Medicine Course, Contraceptive Updates, Leadership Development programme for Managers in General Practice, LTC updates for GPNs and AHPs, Mental Health and Hypertension updates for HCSWs

## Successes to date:

- RCGP endorsement
- HSJ Value Awards 2019 Finalist
- HEE Webinar platform for sharing good practice
- BBC Midlands Today & the Politics Show
- National and local visits from organisations across the country
- Our internship is informing national politics
- Presented research at WONCA 24th annual conference in Bratislava, Slovakia
- The First Physician Associate in Primary Care Conference 2019
- The PA Evaluation report commissioned by NIHR

Academic General Practitioners associated with the Keele University Academic Practice

- North Staffordshire GP Federation project team to expand and develop an internship model in Shropshire and Birmingham and the Black Country