

Committee:	Health and Adult Social Care Select Committee	
Date of Meeting:	1 <sup>st</sup> March 2021	
Report Title:	Integrated Primary Care Access Service update	
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# 1. Purpose

This paper provides an update on the development of the Integrated Primary Care Access Service (IPCAS) provided by the Southern Hampshire Primary Care Alliance across Fareham, Gosport and south east Hampshire.

The IPCAS service was developed to bring together two services: the GP Extended Access Service, which was a pilot, and the GP Out-Of-Hours service. These were delivered by two separate providers with differing access points for local people.

The contract originally ran until 2021 when Primary Care Networks (PCNs) were expected to become responsible for providing extended access to their patients.

This position has now changed nationally and the purpose of this paper is to provide an update to the Committee on the CCGs' response to the latest national guidance.

Sections 2-4 of this paper describe the situation at the time of the previous update in September. Section 5 provides information about how we now expect this to evolve.

# 2. Background

During the summer of 2019 the CCGs and Primary Care Alliances worked together to seek views of local people about the services, hubs, travel, and their preference for accessing the service. Following feedback the service model was determined as summarised in the table:

	Site	Opening times
Patients ring their practice to book an appointment (both routine and urgent) or NHS111 when their practice is closed for an urgent appointment	Fareham Community Hospital	Mon to Fri 6.30pm to 10.30pm
	Forton Medical Centre, Gosport	<ul> <li>Tues and Thurs 6.30pm to 10.30pm (for urgent appointments)</li> <li>Sat and Sun 8am to 10.30pm</li> </ul>
	Portchester Health Centre	Sat and Sun 8am to 10.30pm
	Chase Community Hospital	• Fri 6.30pm to 10.30pm
	Swan Surgery, Petersfield	Tues and Thurs 6.30pm to 10.30pm
		Sat and Sun 8am to 10.30pm
	Waterlooville Health Centre	Mon, Wed and Fri 6.30pm to 10.30pm
		Sat and Sun 8am to 10.30pm

# 3. Impact of COVID-19

The impact of the COVID-19 pandemic, although challenging, has accelerated the pace of change and transformed the way in which primary care services are delivered. This includes the way the IPCAS service operates. There has been a further breakdown of traditional roles and boundaries, with strong collaborative working with NHS 111, community and mental health services, secondary care and the voluntary sector to deliver the best outcomes for our population during the pandemic.

Primary care services have remained open throughout the pandemic but the way in which services are delivered has fundamentally changed to ensure patient safety, implement infection, prevention and control measures effectively, and that patients continue to be cared for in the most appropriate setting for their needs. This reflects <u>national guidance</u> on how primary care services should be delivered during the pandemic:

This accelerated pace of change has led to new models of delivery supported through strong clinical leadership, greater partnership working and digital technology:

- 100% of general practices open are operating a total triage model to support the
  management of patients remotely where possible. This means operating a model
  where all patients requiring GP care are assessed either on the phone or via an
  electronic system (eConsult) to determine the best option for their care. All practices
  operate telephone and online consultations.
- Strengthened working with **NHS 111**, with NHS 111 able to directly "book" patients into a practice
- Continued provision of essential face-to-face services (including home visits)
  through designation of "hot" and "cold" sites and teams to minimise the spread of
  infection. Hot and cold is essentially the separation of care for those with suspected
  COVID-19 and those not
- Greater use of Electronic Repeat Dispensing (ERD) to reduce footfall within practices

This has meant a significant change for patients in how some services are accessed and used, but has also ensured that primary care and general practice can continue to operate and provide essential services during this very challenging time.

### 4. Changes to local delivery

Several "hot" sites were set up across our two CCG areas to ensure safe separation in the way services were delivered for patients, with these hot hub sites providing care for patients with suspected COVID-19. "Cold" sites were then identified within the remaining general practice facilities to provide services to those who also needed care but were not suspecting as having COVID-19.

It was extremely important to ensure all primary care services were operated in this way and therefore the IPCAS service was also aligned to this model.

As a result, the sites of delivery were identified to align to the "hot" service hubs set up across the patch so that the IPCAS service could focus on service provision that was absolutely critical and needed at this time (in-line with national guidance). The sites identified were:

Patients ring their	Site	Opening times
practice to book an	Forton Medical Centre,	<ul> <li>Mon to Fri 6.30pm to 10.30pm</li> </ul>
appointment (both	Gosport	<ul> <li>Sat and Sun 8am to 10.30pm</li> </ul>
routine and urgent) or	Waterlooville Health Centre	<ul> <li>Mon to Fri 6.30pm to 10.30pm</li> </ul>
NHS111 when their		Sat and Sun 8am to 10.30pm
practice is closed for		·
an urgent		
appointment		

NHS England determined nationally which services were vital to continue throughout the pandemic phase and therefore "cold" sites were also aligned in the IPCAS service to day time delivery to ensure safety for patients, these were as follows:

Patients ring their	Site	Opening times
practice to book an	Portchester Health Centre	<ul> <li>Mon to Fri 6.30pm to 10.30pm</li> </ul>
appointment (both		Sat and Sun 8am to 10.30pm
routine and urgent) or NHS111 when their practice is closed for an urgent appointment	Swan Surgery, Petersfield	<ul> <li>Mon to Fri 6.30pm to 9pm (from mid- September to increase to 10.30pm)</li> <li>Sat and Sun 8am to 2pm</li> </ul>

During the first wave of the pandemic the service model was adjusted to also allow patients to be booked in to a video consultation, reducing the need for patients to travel and in turn reducing the risk of infection.

Given the ongoing critical nature of the pandemic, it is not expected that this will change in the near future and the committee will be kept appraised of any plans to change this.

# 5. Longer-term service provision and next steps

In a recent <u>letter NHS</u> England and NHS Improvement outlines that the responsibility for the delivery of extended access service will not be going to PCNs from April 2021, and that this will be delayed for a further year. This is in response to the additional pressure GP practices are currently experiencing in delivering the COVID-19 vaccination programme.

The CCG is therefore required to ensure a service runs until 31<sup>st</sup> March 2022. The option of going out to procurement on this contract is ruled out on account of the timeframes. A procurement process would take six months, and mobilisation a further three to six months which would be near to the end of the contractual term. The CCG will therefore extend the existing service for a further year and publish a contract award notice to this effect in order to update the market.

Throughout the next year, further work will be undertaken with PCNs to establish next steps. Engagement with patients and reviewing the service that has been in place will form a large part of ensuring that future provision is fit for purpose.

At this point it remains unknown what the PCN contract detail will look like. For example financial details and specific requirements in terms of operating hours and locations has not be published. This detail is expected in autumn 2021 when more plans can be made.

NHS England and NHS Improvement has, however, confirmed that PCNs will become responsible for providing extended access to their patients and therefore this currently integrated service may be split again as follows:

- the GP Extended Access Service provided by Primary Care Networks
- the GP Out of Hours Service provided by a Primary Care Provider Organisation

Primary Care Alliance and CCGs are working together to develop the longer term model, further taking into account the views of local people, the lessons from running the service to date and aligning the service to the wider vision for urgent care services in Portsmouth and South East Hampshire.

All service providers will need to take into account how we can effectively develop these services but also robustly ensure we recognise the vast feedback we have collectively received to date. This will include:

- Consolidating the number of sites to ensure GP cover is in place in order to reduce the number of cancelled clinics and enable the service to increase its use of Advanced Nurse Practitioners (ANP) and Practice Nurses (PNs) under the supervision and support of GPs
- Introducing a new employment model to ensure that clinicians are available to work the least popular shifts
- Providing a transport service for patients who need to be seen urgently but are unable to travel to a hub
- Introducing telephone/online consultations for patients who are happy to receive the support they need in this way meaning they do not need to travel to a hub.

#### 6. Recommendation

It is recommended that the Committee notes the changes as a result of the ongoing COVID-19 pandemic, and recognises the proposed next steps to engage local people on the intended service changes as a result of the NHS England and NHS Improvement mandate for Primary Care Networks to deliver elements of this service from 2022 rather than 2021 as previously planned.