**ELR GP Federation Ltd**

**Chief Operating Officer Report – December 2017**

**The Work plan update is included in the pack as Paper C.**

1. **Joint strategy with the CCG and funding for FY18/19**

The joint strategy document has been drafted – attached at **Paper D** – including the finance and resource requirements for FY18/19.

Rysz and James met with Tim Sacks on 8th December 2017 and determined a way to fund the Federation during FY18/19, including the CCG honouring their commitment to pay the full £350K originally committed to the Federation and utilizing the transformation fund. Key elements of this approach are outlined in table 1 below;

**Table 1 – Income and expenditure forecast for FY2018/19**



The Federation has made significant progress over the last 15 months securing income streams on behalf of its member practices @ >£800K across FY17/18 and FY18/19 and identified savings @ >£200K for the same two year period through its purchasing scheme **(see Table 2)**.

**Table 2 -** **ELR GP Federation income and costs saving scheme for FY17/18 to FY19/20**



1. **Localities & transformation fund update**
* The emerging six localities are at different stages of development but are all starting to develop plans for joint working between the practices and integrating more effectively with community, mental health and social care services in their respective areas and have asked the Federation to support this work.
* Guidance from the CCG relating to the transformation fund and Locality Plan templates will be released shortly. The Federation will review this guidance and develop a proposal for supporting the locality groups.
* Additional funding (5YGPFV monies) will also be made available to support the development of acute on the day ‘in hours’ provision for patients. This will be delivered through practices working together, where practical.
* All six Localities will improve the joint working arrangements with LPT, social services, local councils and third sector, as appropriate – effectively fulfilling the work of the Integrated Locality Teams.
* The localities and the areas that the Federation are supporting are outlined below.

**Oadby & Wigston** (Wigston Central, Bushloe, South Wigston, Central, Croft, Severn, Rosemead)

* Acute on the day access; reviewing the best options for joint working.
* Continuing to facilitate joint working between the Oadby Central and South Wigston practices as they work towards a new partnership.

**North Blaby** (Kingsway, Glenfield, Limes. Forest House, Enderby)

* MSK, mental health practitioners – identify the best mechanism to employ staff on behalf of the hub and associated NHS pension implications
* Urgent care service

**South Blaby & Lutterworth** (Northfield, Wycliffe, Masharani, Hazelmere, Countesthorpe)

* Utilise social media to improve communications with patients. JM/JW facilitating a workshop to determine the best way forward.

**SLAM** (Melton, County, Jubilee, Long Clawson)

* Joint buildings maintenance service
* Intranet for information / policy sharing
* Dementia MDT
* Inter-practice referrals for coils / lumps and bumps **Action JW**

**Rutland** (Uppingham, Oakham, Market Overton & Somerby, Empingham)

* Primary care home
* **Vitrucare app to enable holistic consultation. Rutland CC funding. Federation to hold the contract (attached at paper E) –** **Board to approve.** JW to project manage.

**Harborough** (Billesdon, Kibworth, Two Shires, Husbands Bosworth, Market Harborough)

* In development.
1. **LLR STP GP Five Year Forward View Programme Board & tool kit**

The draft guidance / tool kit document to assist practices who wish to work at scale was well received by the Programme Board and has been circulated for comment. The plan is to ‘road test’ the guidance with a few practices prior to a wider launch.

In ELR this guidance will support the development of joint working in the emerging six locality areas. This work will also identify where there are gaps in the guidance and we will update the tool kit accordingly.

1. **Urgent Care / extended primary care**
* The timetable for the procurement process is likely to be deferred for the new contract to start in April 2019.
* Vocare (recently been acquired by Totally Plc) remain keen to work with the Federation on the forthcoming tender process.
* GC/JW met with DHU on 17th November 2017, who remain keen to work with the Federation on an ‘exclusive basis’
1. **Winter Access scheme –** no further update.
2. **NHS England; Clinical pharmacists in general practice Project**
* NHS E have advised that they intend to support the application. No detail yet.
* Application for 11 practices (93,000)
* NHS E asked us to adjust the application to 3 pharmacists. We did this on the basis that the senior support would be provided from Soar Beyond and/or a neighbouring scheme but this will have a cost.
* The plan is to dovetail the 3 NHS E pharmacists with the approx. 3 that are funded by the ELR CCG scheme.
* Soar Beyond are not on the CCG accredited list – which will make the melding of the two schemes more challenging. The Soar Beyond cost will increase if they do not employ all 6 pharmacists.
* The implications are being worked through and alternative options considered.
1. **Community Based Services and inter-practice referral process**.

Following up the points raised in the November contract meeting, including;

* General reduction in IUD/S fittings and asked if we knew why?
* Encourage the use of the Quest browser (TCR software), which will become mandatory

The inter-practice referrals process for IUD/IUS/SDI services has been adapted has been circulated for comment.

1. **Correspondence management -** the Federation successfully applied on behalf of seven practices. The funding is being hosted by West Leicestershire CCG and equates to £33K for the Federation scheme. This project is being implemented with a likely start in February. Draft contract attached at **Paper F** for information. **The Board is asked to approve that we proceed with this project.**
2. **Active signposting –** opportunity for the Federation to support this. JW is following up with NHS England.
3. **Demand Management**

The CCG has confirmed that it would like the Federation to support demand management in ELR.

This project will be led by Rysz. Start-up costs will be met within existing resources. The CCG will pay 10p per patient (£33K) in FY18/19.

1. **Buildings management offer**

We are working with the Estates Strategy Group to support practices with building management. Latham House piloted the Beacon assessment tool in October 2017 – which proved helpful. We are now developing a full buildings management offer for them to consider. Once we have tested this with LH, we will determine the best approach to offering this wider.

The idea remains that a Federation wide buildings management service should be more effective in both cost and quality terms than practices all having separate arrangements.

1. **Primary Care Exchange –** JW to follow up.
2. **Service contracts –** JW/GC to follow up H Pylori, ECG contract options.
3. **Dispensing practices procurement –** No update. RB/JW to progress.
4. **Flu vaccines** – Meeting held with Sanofi Pasteur.
5. **HR -** JW to follow up.
6. **GP TeamNet -** A demonstration of this system has been held. This is an option for sharing of information / policies between practices. The PM Forum has asked if the Federation could support the development of a system to share information.
7. **Cleaning** – JW to follow this up.
8. **Nurse training** – Ann Scott (CCG) has asked the Federation to consider how it could support nurse training. JW attended the Practice Nurse conference in November and met with the DMU nurse training team. Discussion with Gill Beardmore who has developed an effective nurse mentoring and training approach in Rushcliffe. Possible link with the LLR Joint Training Hub Collaborative.
9. **Diabetes nurse specialists –** We applied with Latham House to host the LLR 1.8WTE Diabetes Nurse specialists and have been offered the contract. This is NHS E funding that West Leics CCG are hosting. We are working with Latham House and WL CCG to agree the details. Start will be asap and the funding (approx. £80K) will run to March 2019. **The Board is asked to support this initiatve.**