

Governing Body
 27th January 2017

Chief Officer's Report

Agenda Item xx Paper xx	
Author:	Ralph McCormack, Interim Chief Officer
Relevant Committees or forums that have already reviewed this paper:	None
Action required:	To note
Attached:	None
CCG Strategic objectives relevant to this paper:	Core business: relevant to all / most objectives
Risk	There are no risks on the assurance framework and / or risk register relating to items in this report.
Compliance observations:	Finance: Not applicable
	Engagement : Areas of specific engagement are covered within this report
	Quality impact: Not applicable
	Equality impact: Not applicable
	Privacy impact: Not applicable
	Legal: Not applicable

Executive summary

This report provides an update on recent developments and areas which may be of interest, that do not form part of the wider Governing Body meeting agenda. This paper includes an update on delegated primary care commissioning and extended GP services, work happening through Surrey Heartlands, social prescribing and discussions that took place at the last Surrey Health and Well-being Board.

1. Delegated primary care commissioning

In my last Chief Officer report I explained that we were asking our member GP practices to vote on whether they wanted the CCG to take on delegated commissioning arrangements. This change has happened in some other areas and has seen responsibility for the commissioning of core primary care services transfer from NHS England to local CCGs.

Under our current governance framework, decisions of this nature need to be made by our member practices, through a voting process. This vote took place in November 2016.

All thirty-two of our practices voted and of these, twenty-one voted to move to delegated commissioning and eleven practices voted to retain the current arrangements. We have always said we would only take this forward with the support of our member practices and this is also a requirement of our Constitution, which requires that we get the support of at least 75% of all practices. On this basis, as a CCG we have not applied to take on delegated commissioning at this time.

We are already doing a great deal of work with our member practices to improve care locally and we remain committed to working in partnership with primary care. As an organisation we will continue to support our practice colleagues in any way we can, even where commissioning responsibilities sit with NHS England.

2. GP extended hours services

Following recent national coverage, and the recent pressures we have seen across the health system, both nationally and locally, it feels timely to provide an update on the work already in Surrey Downs to increase access to primary care services.

Currently, 85% (28 out of our 32 GP practices) offer extended opening times as part of a national Directed Enhanced Service (DES) contract with NHS England. Under this contract, practices who provide this service offer additional pre-bookable appointments outside of core practice opening times. The timing of these additional appointments will vary to reflect the needs identified by the practice through a survey of their patients. Therefore, depending on local need, some practices may offer these as early morning (before 8am), later evenings (after 6.30pm) or on a Saturday morning.

Following a successful bid for funding through the Prime Minister's Challenge Fund (now known as the GP Access Fund), in addition to the extended hours service, practices in the Epsom locality also offer extra pre-bookable appointments for their patients. All patients registered with a practice in the Epsom locality can access these extra appointments, which are offered through a hub service, which operates between 6pm and 9pm, Monday to Friday, and 9am - 1pm on a Saturday. GP practices in the Epsom locality (which includes Epsom, Ewell, Leatherhead, Ashted, Fetcham, Banstead and Cobham) promote this additional service, and details of how to access the hub, to patients through their usual communication

channels (eg. patient newsletters, noticeboards, websites and through the practice's reception).

These additional services have increased capacity in primary care, making it easier for patients to make an appointment to visit their GP.

I would like to thank GP colleagues and their staff for the sheer hard work and effort they make to support the population of Surrey Downs.

Further improvements are planned through the work we are doing locally to deliver [NHS England's GP Forward View](#).

3. Surrey Heartlands Sustainability and Transformation Plan

Following publication of our Sustainability and Transformation Plan, work continues to progress both the six clinical workstreams (cancer, musculoskeletal, cardiovascular, mental health, women and children's services and urgent care) and the operational workstreams that will support delivery of the plan. Public engagement work is now underway, through the delivery of a citizen-led engagement programme that is helping us seek the views of local people in a meaningful way. Feedback from this work will be shared with the Surrey Heartlands Stakeholder Reference Group, which meets next month, and also shared with workstream leads to help inform the next stages of planning. A large scale system wide stakeholder event is also planned for March to will help ensure key stakeholders are engaged in planning the next steps.

4. Outcome of inspection into special educational needs and disability services in Surrey

A joint inspection by Ofsted and the Care Quality Commission into the support available for children with special educational needs and disabilities in Surrey, published in December 2016, highlighted a number of areas for improvement.

For us as a clinical commissioning group, this includes the need to re-look at the services available for children and young people with Attention Deficit Hyperactivity Disorder, Autistic Spectrum Disorder and other neuro-developmental conditions - and also the support available to their families.

Currently, young people in the Surrey Downs area access support from a developmental paediatric service at Epsom Hospital. However, we are re-looking into whether this service meets local needs or whether we need to commission a more specialist pathway.

A new Behavioural, Emotional and Neurodevelopmental pathway has operated in other parts of Surrey since April 2016, under the new Child and Adolescent Mental Health Services (CAMHS) contract, and over the next couple of months we will be reviewing data from this service to understand how this pathway is operating. This will help us understand the type of support we need to commission to meet local needs, and any gaps in current services, so we can ensure the right services, and the right support, are in place for children and young people in Surrey Downs. We expect to be able to make a recommendation on the proposed future pathway in April 2017.

5. GP Online services

The CCG has recently launched an awareness campaign to encourage local people to sign up for GP online services. This is part of a national NHS England initiative to offer more convenience, choice and control in how people access GP services. By signing up for GP Online services, anyone who is registered with a GP can have access to their practice's online services (which includes the ability to book appointments online and request repeat prescriptions) via a computer, tablet or smartphone.

Anyone registered with a GP practice in the Surrey Downs area can sign up for GP online services. Patients who wish to register can request to do so at their practice. They will be asked to complete a short form, and return it to the practice, and they will also need to take one form of photo ID and a proof of address. Once an individual has signed up they will receive a letter with their unique username and password, and also a link to where they can log in to access the service.

For more information about GP online services see [our website](#).

6. Social prescribing

On 12 January 2017 the Clinical Cabinet discussed a proposal that supported greater use of social prescribing in the CCG area.

Social prescribing is a way of linking patients in primary care with sources of support within the community. It provides GPs with a non-medical referral option that can operate alongside existing treatments to improve health and well-being. Outcomes can include improved fitness and mobility and reduced social isolation and loneliness. While there is no widely agreed definition of social prescribing, it generally involves partnership working between health and social care and includes interventions and activities such as education and self-help groups, exercise classes, sporting activities, volunteering and adult learning amongst others.

Social prescribing already operates in some parts of Surrey and the committee heard that where these services exist, feedback from service users has been positive. The committee also heard that in some areas, social prescribing had led to a reported reduction in the use of healthcare services, particularly in relation to GP services.

The Clinical Cabinet discussed the benefits of social prescribing and agreed the direction of travel is the right one. We will now be working with our local authorities and our three localities to develop more detailed proposals to address local needs.

7. Surrey Health and Wellbeing Board update

At a meeting on 8 December 2016, attended by Dr Claire Fuller as our Surrey Downs CCG representative, the Surrey Health and Wellbeing Board:

- Discussed the Board's forward work plan
- Received an update on the Surrey Sustainability and Transformation Plans to ensure commissioning intentions are aligned with the Surrey Joint Health and Wellbeing Strategy
- Received the Surrey Safeguarding Adults and Children's Annual Reports

The Board next meets on 9 March 2017. For details see the [Surrey County Council website](#).

Date of paper	27 January 2017
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