

Paper: 8a

Date	Tuesday, 20 November 2018
-------------	---------------------------

Title of paper	GP at Hand Update
-----------------------	--------------------------

Presenter	Julie Sands, Head of Primary Care, North West London				
Author	Julie Sands, Head of Primary Care, North West London				
Responsible Director	Janet Cree, Managing Director				
	Approved report Yes <input type="checkbox"/>				
Clinical Lead	Vanessa Andreae, Vice Chair				
Confidential	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	Items are only confidential if it is in the public interest for them to be so
Assurance Level Agreed by Responsible Director	Good <input checked="" type="checkbox"/>	Adequate <input type="checkbox"/>	Limited <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>	

The Committee is asked to:
Note the below update.

Summary of purpose and scope of report
<p>This paper is to provide information to the Committee on</p> <ul style="list-style-type: none"> - the current status of the GP at Hand Practice - update the Committee on previously discussed variation applications - provide assurance information - independent evaluation <p>Current Status of the GP at Hand practice</p> <ul style="list-style-type: none"> - The current list size for GP at Hand is 36,555 (SystemOne, 5/11/2018). This compares to a list size of 4,700 at a similar point the previous year.

- The numbers joining the practice have varied to some degree reflecting marketing activities, but have averaged around 2,500 a month over the six months. New registrations have been offset by a number of patients leaving the practice.
- Three quarters of patients (73%) joining the practice since this time last year are aged 20-34; 18% are aged 35-64. The number of children and older people joining is small.
- Slightly over half of new registrations have been male (53%)
- 5% of new patients joining GP at Hand and 11% of the current list (3,959 in mid Oct 18) live in Hammersmith & Fulham. 26% of the current list live in NW London (incl. H&F), 68% live in other parts of London and 5% live outside London
- The practice has recently commenced an updated marketing initiative comprising of both social media and physical adverts – and registration rates have increased over the last few weeks accordingly. Our expectation is that this rise will continue for the duration of the initiative. The practice informed the CCG before the commencement of the planned marketing and shared details of the advertising.

Variation to sub-contracting arrangements – Kings Cross site

At the last Primary Care Commissioning Committee (PCCC) the variation to change the one of the practice's branch sites from the South Camden Centre to the Kings Cross Clinic was approved. The move of site has been completed and services are operating from the new clinic site. No patient complaints or enquiries have been received by the commissioners in relation to the move and the practice reports a positive response from patients to the new site.

Application to vary sub-contracting arrangements - Birmingham

It was also reported at the last PCCC, that the August Committee decision to issue an objection to GP at Hand practice's notice to vary their sub-contracting arrangement to add a site in Birmingham had been ratified by the London Regional Director.

The London Regional Team asked national team colleagues to assist in exploring solutions to resolve the areas of risk identified in ensuring patients could access screening services and any follow up required in services local to their homes. The National Team is continuing to work through the possible solutions and will refer back to the PCCC once progress is made. Meanwhile, the objection notice stays in place and no expansion beyond the London region can take place.

Advertising Standards Agency (ASA) Ruling

The Committee were made aware of the recent ASA ruling regarding some of the information within GP at Hand practice's advertising. This related to clarity for patients on re-registration processes, time period for registration to be completed and directed GP at

Hand practice to make changes to their advertising and information to make this clearer. Following this the CCG requested confirmation from the practice of the actions they had taken to address the ASA directions. The practice have provided what actions they had taken and copies of the revised advertising and information provided to patients via their website, the app and physical adverts.

Clinical Assurance Meeting

Following discussion at the last Clinical Assurance Meeting with the practice in September an amendment is being made to the information on their website for patients looking to register with them. The list of conditions where it may not be clinically appropriate for patients with them to register will be removed. Patients will still be advised that sometimes it may not be clinically appropriate for patients to register with a practice that is not local to their home.

Independent evaluation

Work is progressing on the independent evaluation being undertaken by Ipsos Mori. It is planned to bring an interim report to the meeting in December.

Quality & Safety/ Patient Engagement/ Impact on patient services:

The ways in which patients can access services have been expanded to include digital access, physical access at additional sites across London but those registering through this model are not eligible for home visits and some people with complex needs may not be appropriate to be registered under this model. Some patient engagement has been undertaken by the practice about this evolving model and expansion to the services, list size and practice sites. The clinical review has explored the potential patient safety risks of the proposed model and the risk to the service provision; this will be under continual review and will be included as part of the independent evaluation process.

Finance, resources and QIPP

NHS England have continued to provide assurance that the financial impact of the GP at Hand practice on the CCG will be fully mitigated, yielding no financial pressure to the CCG.

Equality/ Human Rights / Privacy impact analysis

The Equality Impact Assessment conducted by the practice has been considered previously in the public committee.

Paper: 8a

Risk	Mitigating actions
This will be included within the scope of the Independent Evaluation.	This will be included within the scope of the Independent Evaluation.

Supporting documents
•

Governance and reporting		
(list committees, groups, other bodies in your CCG or other CCGs that have discussed the paper)		
Committee name	Date discussed	Outcome