HEALTH AND SOCIAL CARE SELECT COMMITTEE - UPDATE ON THE IMPLEMENTATION OF RECOMMENDATIONS FROM PAST REVIEWS OF THE COMMITTEE

Committee name	Health and Social Care Select Committee
Officer reporting	Gary Collier
Papers with report	Appendix A - Updates on the 2018/19 GP Pressures review
Ward	All

HEADLINES

The attached paper provides a brief summary of progress with regard to the implementation of recommendations agreed by Cabinet on the following review:

• GP Pressures

RECOMMENDATIONS

That the Health and Social Care Select Committee:

• Notes the updates provided in Appendix A and provides comment, as appropriate.

SUPPORTING INFORMATION

1. Hillingdon's Select Committees have a vital responsibility in monitoring Council and other public services in the Borough, influencing policy and engaging residents and local organisations in this important work. Over the years, Committees have undertaken successful in-depth reviews of local services and issues. This has resulted in a number of positive changes locally, with some also affecting policy at a national level. Such committees engage Councillors in a wide range of Council activity and make recommendations to the decision-making Cabinet. This report provides Members with an update on the progress made in implementing scrutiny recommendations that have previously been accepted by the Executive.

2. The Committee is invited to review the action (detailed in Appendix A) taken to implement recommendations previously accepted by the Executive in relation to the following completed scrutiny activities:

• <u>GP Pressures</u> – this review was considered by Cabinet on <u>23 January 2020</u>. Updates on the review were considered by the External Services Select Committee on 9 February 2021. The Health and Social Care Select Committee has asked for a further update.

Future Updates

3. The review that resulted in the recommendations shown in Appendix A was undertaken in 2018/19. Since that time the country has experienced the Covid-19 pandemic and new legislation has resulted in the reorganisation of the health service.

4. It is suggested that any further developments within Primary Care are reported as part of general updates to the Committee on progress with the implementation of new ways of working within Hillingdon's health and care system. This reflects the changes to the local health and care landscape that have occurred since the review took place, i.e., creation of Integrated Care Boards, and that it is also undergoing a further period of change whilst a new operating model is implemented.

5. This approach will enable the Committee to see developments in Primary Care within the broader context of how the future health and wellbeing needs of Hillingdon's needs will be addressed.

Appendix A

2018/19 GP Pressures Review Recommendations Update

Recommendations	January 2022 Updates	September 2023 Update
RECOMMENDATION 1 That Hillingdon Health and Care partners (HHCP) explore the establishment of a single online directory of health, care and wellbeing services (delivered and maintained / updated by Hillingdon Health and Care Partners) to be utilised across the partnership, particularly by GPs, and to link into emerging NHS digital applications being promoted nationally for patients.	local service which is used in neighbourhood teams and shared with the Council to complement the directory of care and support services (see: <u>Home</u> <u> Hillingdon Directory</u>).	Roll out of the NWL ICB Digital First programmes to maximise the use of digital technology to support patients to understand their condition and access services and maximise operational efficiency.
RECOMMENDATION 2 That Hillingdon Health and Care Partners work with the Citizens Advice Bureau (CAB) to explore the simplification of processes in relation to GP referrals to CAB services.	GP practices are still responding to the changing phases of the pandemic. Face to face consultations have resumed but digital consultations have enabled a greater volume of patients to have contact with their GPs. The H4AII Wellbeing Service, through its key workers within neighbourhood teams,	H4All key workers within Neighbourhood Teams, continue to sign-post to partner organisations, including CAB. A third sector offer to support integrated neighbourhood working is in development and progress will be reported to the Committee as part of the update on the

GP Pressures

	continues to sign-post to partner organisations including CAB.	implementation of a new health and care system operating model
RECOMMENDATION 3 That Hillingdon Health and Care Partners improve signposting for patients to CAB services and to emerging digital applications via information screens in GP surgeries.	As previously reported, whilst GP practices do have information screens in their surgeries, the reduction in face-to-face appointments, in favour of greater volume afforded by digital approaches, means that their importance is now less.	The Standard General Medical Services Contract continues to require general practices to have a practice website, or an online practice profile.
RECOMMENDATION 4 That Cabinet requests Adult Social Care officers make available information sessions to the emerging Neighbourhood Teams on the scope of the Council's Adult Social Care duties.	Completed.	Completed.
RECOMMENDATION 5 That Hillingdon Health and Care partners explore affordable options to enable homecare to be triaged and deployed more flexibly by the Neighbourhood Teams to support the independence of residents and prevent GP visits and hospital admissions that are avoidable.	Applying the facility within the new specialist homecare contract is going to require a combination of funding and a new way of working which is being considered as part of the Neighbourhood Team development programme. A process for identifying need and accessing care for people attending Hillingdon Hospital has been agreed to avoid unnecessary admissions.	This continues to be under consideration as part of the Neighbourhood Team development programme.

RECOMMENDATION 6 That Cabinet welcomes the pilot work by Council officers to streamline GP administrative procedures in relation to patient requests for medical information to support their housing assessments, and requests that this be rolled out across the Borough.	Officers from the Council met with Dr Suri & Dr Sira and provisionally agreed a process for requests for information that will significantly reduce the administration required by GP's and will enable the administrative staff within the surgeries to process the requests. Unfortunately, since the initial meeting progress has not been made in putting this into operation. The Housing Team have made contact with Dr Suri & Dr Sira to request a meeting to resolve any outstanding concerns with the process and to put this into practice as soon as possible.	
RECOMMENDATION 7 That planning officers be asked to notify Hillingdon CCG when processing any planning applications relating to accommodation for the elderly that are subject to CIL.	Officers have confirmed that the CCG are being consulted on major planning applications relating to accommodation for elderly care. Updates are given below on the two planning applications mentioned in the last update. SEYMOUR HOUSE 30-38, CHESTER	on the planning database of consultees, and the planning application validation guidance identifies that the NHS should be consulted on C2 older persons' housing applications.
	ROAD NORTHWOOD- This planning application was refused planning permission on 2nd February 2021 by Hillingdon planning department.The NHS were consulted on this planning application on 16th December 2020. No comments were received from the NHS	

on this application prior to its determination in February 2021. The applicant appealed against the Councils decision to the Planning Inspectorate. On 3rd September 2021, the Planning Inspectorate allowed this development proposal and it is therefore likely to be implemented over the next 3 years.	
LAND OFF HAREFIELD ROAD (Halfords/Wickes site adjacent to Uxbridge Police Station), UXBRIDGE - This planning application has been recommended for Approval by the Planning Department and the Major Applications planning committee in June 2021. The application is a strategic application which is referrable to the Mayor of London and is now with the Mayor for his consideration. Once a response is received from the Mayor of London and the legal agreement on the site is completed, a final Decision Notice can be released which will formally grant planning permission for the development on this site.	
During this planning application, the NHS were consulted and did engage with the Planning department. The NHS assisted	

	the Council to secure £900,229 in S106 planning obligations towards the provision of health facilities within Hillingdon.	
RECOMMENDATION 8 That Cabinet note that the External Services Select Committee will continue to closely monitor any implementation of the above recommendations, along with GP training programmes and the recruitment of new GPs, particularly in the South of the Borough.	 The pandemic continued to have a significant impact on all planned training programmes during 2021. <i>Training Hub</i> - The Training Hub is now established and, in addition to activities previously reported, it is now leading on all Neighbourhood Team learning. <i>Hillingdon Young Practitioner's Group</i> – Due to a lack of funding, this group closed on 31st July 2021. In order to continue a support package for trainee GPs, NWL CCG are utilising the SPIN Fellowship programme. The CCG now have two GP Fellows working within the Training Hub with a medical education portfolio. The fellows will take on and continue the support for GP trainees in Hillingdon <i>Mentor and Buddy schemes</i> – Due to pandemic pressures, redeployment and staff capacity, uptake for the mentor and buddy schemes was not as high as had been hoped. At 	A NWL Primary Care workforce plan is embedded within the wider ICB Workforce Strategy reflecting the specific needs of the Primary Care workforce. A Hillingdon Health and Care Partners Workforce Strategy is also in development that includes a <i>'Hillingdon Passport'</i> to support the integrated working of teams and individuals to enable cross organisational working.

present, for the mentor scheme, 10 spaces were allocated of which 4 taken up. For the buddy scheme, 10 spaces were allocated of which 3 were taken up.
 SPIN Fellowship Programmes – At present, there are 4 SPIN Fellowships taking place (3 first year Fellows and 1 second year Fellow). Two of the SPIN Fellows are working with the Confederation Training Hub Team offering Medical Education portfolios, one is working with the Hillingdon Hospital doing a Frailty Portfolio and one is returning for a second year working with the Confederation as a Fellow offering a young people portfolio. There has been interest from 2 other GPs who are currently being liaised with to identify practices for them to work in.

<u>Key</u>

Neighbourhood Teams Neighbourhood Teams (NTs) are multidisciplinary teams but with a core team of GPs, community staff, social care staff and health and wellbeing officers and wider third sector staff, mental health professionals, practice staff and acute consultants. There are 6 NTs in Hillingdon aligned to the PCNs. Each team is supporting a population of between 30,000 and 50,000. The NTs identify and manage 15% of people within their population at greatest risk of future hospital admission or attendance. At risk people are identified through:

• Use of risk stratification tools.

• Intelligence gathering from health and care providers.

Frequent user information from the ambulance service and acute hospital

Primary Care Network PCNs are collaborations of GP practices serving a total population of between 30 and 50,000 people. (PCN)

Each PCN has a clinical director and must agree a collective system of governance, including identification of the lead practice for accepting funding.

Practices within a PCN must collectively decide which one will lead on enhanced services, such as extended opening or support for care homes.

The PCN workforce will include a pharmacist and social prescribing link workers in addition to a clinical director.