

NHS Rotherham Clinical Commissioning Group

Primary Care Sub Group – 7th March 2018

Primary Care Sub Committee – 21st March 2018

Primary Care Dashboard Narrative – March 2018

Lead Executive:	Chris Edwards, Chief Officer
Lead Officer:	Rachel Garrison, Senior Contract Manager for Primary Care
Lead GP:	Dr Avanthi Gunasekera, SCE

Purpose:

To update the Committee on the overall performance of General Practice in Rotherham.

Background:

The Primary Care Dashboard Monitors the Performance of the NHS Rotherham CCG Practices, pulling information from numerous sources. The practices are compared to their cluster average and scored as an outlier for any area where they perform worse than that average.

Analysis of key issues and of risks

The table below shows the outlier totals over the previous versions of the Dashboard. NB: there were 6 fewer fields in the December 2016 Dashboard.

Outliers per month by cluster							
Outliers per month by cluster							
Cluster	Practice	Dec-16	Apr-17	Aug-17	Nov-17	Feb-17	Difference from previous month
2	St Anns	16	18	19	19	21	2
2	Greasb	15	12	16	20	21	1
6	Wickersley	11	12	17	17	20	3
1	Shakes	16	23	23	22	18	-4
1	York Rd	14	20	18	19	18	-1
3	Parkgate	10	15	18	17	16	-1
5	High St	3	10	15	15	15	0
1	Gateway	9	17	14	12	14	2
3	Rawmarsh	8	13	14	16	13	-3
2	Woodstock	10	14	14	10	12	2
3	Greenside	6	9	12	13	12	-1
4	Shriv	10	13	13	15	12	-3
4	Broom L	7	13	11	13	12	-1
4	Blyth	9	12	10	10	12	2
1	Brookfield	14	12	11	10	11	1
4	Market	4	6	8	10	11	1

5	Thorpe	5	11	10	9	11	2
5	Dinnington	11	12	12	10	11	1
5	Treeton	17	15	16	12	11	-1
5	Brinsworth	9	11	11	9	10	1
6	Swallowne st	1	8	8	10	9	-1
4	Crown St	3	5	9	8	8	0
1	Broom V	8	8	8	9	7	-2
2	Queens	10	16	8	9	7	-2
3	Manor F	8	11	6	8	7	-1
6	Morthen	4	8	6	7	7	0
6	Kiveton	6	8	6	5	7	2
3	Village	3	7	7	9	6	-3
2	Magna	4	6	4	5	5	0
2	Clifton	5	5	5	9	5	-4
6	Stag	5	11	2	2	3	1

Practices of note:

Greasbrough

On the last dashboard it was noted that practice performance had been deteriorating throughout 2017, and it has fallen again in this review. They are outliers in first OPD referrals and discharges on first attendance, in addition to patient experience and clinical workforce. Jacqui Tuffnell remains in regular contact with the practice over some workforce difficulties they are currently experiencing and is monitoring the situation closely. This practice has received NHS England Resilience Funding in the last year.

Wickersley

Improvements have been made at the practice since the appointment of a new Practice Manager, so it is disappointing to see that Wickersley have climbed from sixth place to third in this dashboard, with an increase of 3 outliers. The practice continues to be regularly reviewed by the Team and underwent a practice visit in December 2017, where we were assured they were making progress in addressing past issues. This practice has received NHS England Resilience Funding in the last year.

Shakespeare Road

Shakespeare Road have improved in this dashboard, resulting in 4 fewer outliers. They are acknowledged to have a difficult practice population which is reflected in their performance across the board. They received a Quality & Contract visit in October 2017.

Thorpe Hesley

Despite their recent CQC rating of 'requires improvement' the practice remains fairly consistent in terms of dashboard performance, fluctuating a couple of outliers at any one time. In this review they have improved on emergency admissions and OPD referrals. The practice was visited in September 2017. This practice has received NHS England Resilience Funding in the last year.

Stag

Stag has been extremely effective at reducing their outliers in the last year. David Clitherow, SCE GP, was asked to explain how:

I think this has come about due to the practice working as a team – and everybody working towards a common goal – we try to put the patient at the centre and work from there to provide holistic care. We have been incredibly fortunate in that we have managed to recruit staff, which probably dates back over the past 5-6 years since I joined the practice. On a GP point we have managed to recruit partners on a one in, one out basis which has meant we have not had GP gaps in rotas. Nursing wise we have been more challenged in that one or specialist nurses had been off sick for 6 months – however we have managed to cover the workload with the workforce flexing and the up skilling of staff already working in the practice to bring in new HCAs.

The one thing that all the partners will agree with is that having Jean Toner as our manager has been the real driver behind a lot of the clinical improvement – she has brought in specialist nursing work force to work in areas such as diabetes and dementia. She constantly wants all areas of the practice to improve whether long term condition care, acute access and brings in quality improvements and challenges clinicians to improve care. We have also improved our coding and use of templates so that the work we have done can be easily searched.

Patient, Public and Stakeholder Involvement:

Not applicable.

Equality Impact:

Not applicable.

Financial Implications:

Not applicable.

Human Resource Implications:

Not applicable.

Procurement:

Not applicable.

Approval history:

None.

Recommendations:

To note the report.