## Governing Body: 1 November 2018 A review of the meeting by its GP members





## Dr Nigel Wells, Clinical Chair of the Governing Body

This is the second GP update from the Governing Body. This meeting had a different feel to it and this was mostly because we needed to talk about the system money again!

It is difficult to convey how talking about the financial pressures affected the meeting, but I was heartened by feedback from members of the public that there was still a strong clinical discussion and intent to our meeting. At the meeting on the 1 November we heard that:

- The aligned incentive contract with the trust was working for some areas but for others it had invoked cost pressures and a deficit that will presently sit with the CCG.
- The system overall needs to look at a four-year recovery plan that will bring York Teaching Hospital NHS Foundation Trust (YTHFT) and the CCG into balance. This is in advanced discussions with YTHFT but we need a shared will across all providers to make this happen. The Governing Body endorsed this position and view.

- There is a need for clear transparent data across sectors to allow decisions to be made in an informed way for the system.
- There was a radiology recovery plan about to be published; this will look at how to mitigate the pressure in the radiology capacity and the pressure for primary care.
- There is support from the Local Medical Council and the Governing Body for a 'First 10' scheme that will look to support primary care clinicians in their first 10 years in practice.
- To maintain the emphasis on quality for patients and clinicians, the Medicines Management Team will report regularly to the Quality and Patient Experience Committee.
- There is training available for sepsis awareness and demand management and this may form some workshops at the protected learning event.
- The protected learning events will run every 3 months for 2 years from January 2019. More information will come out in the next few weeks but the first date is secured as the afternoon of 31<sup>st</sup> January.
- The STP arrangements are here to stay and we need to look at integrated systems as a way of transformation and investment.
- Members welcomed news about the creation of a post that will work across the Tees, Esk and Wear Valleys NHS Trust, the CCG and primary care that will focus on helping to develop work and strengthen links and relationships.

Overleaf are observations of the meeting from Dr Helena Ebbs and Dr Ruth Walker. "The continued financial pressures were discussed in great detail and I welcomed the plan to cease year on year financial negotiations in favour of a medium to long term financial plan. I hope that this will allow primary and secondary care in the Vale of York to work together more productively without short term pressures effecting larger scale transformation.

"It was noted that primary care is reporting more concerns via the YorInsight system. This means that the pressures and problems are being brought to the awareness of the people who can drive forward change and I would encourage my colleagues in primary care to continue to raise their concerns in this way.

"Radiology access and reporting delays, Children's and Adolescent's Mental Health Service waiting lists and the huge pressures on primary care were discussed in significant detail, with actions highlighted to immediately try to address all of these areas."



Dr Helena Ebbs, North Locality GP representative

"Following discussions at the recent Council of Representatives meeting, it was good to see that concerns about general practice workforce and capacity had been added to the CCGs risk register. This was broadly welcomed, particularly as primary care risks have been difficult to measure and were under reported in the past. It stimulated important discussion about how the CCG can understand and try to measure these pressures in a more effective way, including the use of data.

"The CCG continues to have a good working relationship with TEWV. Significant concerns raised by general practice about standards of communication across all of the mental health teams have been heard and we have been assured that improvements will be made. I will continue to follow this up.

"Financial discussions understandably focussed on the Aligned Incentive Contract with the acute trust. There is a very clear message coming from this Governing Body that it does not want to focus its time and attention on providers. "Instead, it wants to drive change and improvement where the local community said the priority work should be - GP services, mental health, cancer care, prevention and wellbeing.



Dr Ruth Walker, South locality GP representative