

Integrated Primary Care Access Service - update

1. Purpose

This paper provides an update on the development of the Integrated Primary Care Access Service (IPCAS) provided by the Southern Hampshire Primary Care Alliance across Fareham, Gosport and south east Hampshire.

The IPCAS service was developed to bring together two services: the GP Extended Access Service, which was a pilot, and the GP Out of Hours Service. These were delivered by two separate providers with differing access points for local people.

The contract originally ran until 2021 when Primary Care Networks (PCNs) were expected to become responsible for providing extended access to their patients.

This position has now changed nationally and the purpose of this paper is to provide an update to the Committee on the CCG's response to the latest national guidance.

Within this paper sections 2-4 provide a recap of the situation. Section 5 provides information about how we now expect this to evolve from here.

2. Background

During the summer in 2019 the CCGs and Primary Care Alliance worked together to seek the views of local people about the services, hubs, travel, and their preference for accessing the service.

Following feedback the service model was determined as summarised in the table:

	Site	Opening times
Patients ring their practice to book an appointment (both routine and urgent) or NHS111 when their practice is closed for an urgent appointment	Fareham Community Hospital	<ul style="list-style-type: none"> Mon to Fri 6.30pm to 10.30pm
	Forton Medical Centre, Gosport	<ul style="list-style-type: none"> Tues and Thurs 6.30pm to 10.30pm (for urgent appointments) Sat and Sun 8am to 10.30pm
	Portchester Health Centre	<ul style="list-style-type: none"> Sat and Sun 8am to 10.30pm
	Chase Community Hospital	<ul style="list-style-type: none"> Fri 6.30pm to 10.30pm
	Swan Surgery, Petersfield	<ul style="list-style-type: none"> Tues and Thurs 6.30pm to 10.30pm Sat and Sun 8am to 10.30pm
	Waterlooville Health Centre	<ul style="list-style-type: none"> Mon, Wed and Fri 6.30pm to 10.30pm Sat and Sun 8am to 10.30pm

3. Impact of COVID-19

The impact of the COVID-19 pandemic, although challenging, has accelerated the pace of change and transformed the way in which primary care services are delivered. This includes the way the IPCAS service operates. There has been a further breakdown of traditional roles and boundaries, with continued strong collaborative working with NHS 111, community and mental health services, secondary care and the voluntary sector to deliver the best outcomes for the communities we serve.

Primary care services have remained open throughout the pandemic but the way in which services are delivered fundamentally changed to ensure patient safety, the effective implementation of infection, prevention and control measures and ensure patients were cared for in the most appropriate setting for

their needs. At all times we have followed [national guidance](#) on how primary care services should be delivered during the pandemic and continue to do so.

This accelerated pace of change has led to new models of delivery supported through strong clinical leadership, greater partnership working and digital technology:

- ❑ 100% of general practices open are operating a **total triage model** to support the management of patients remotely where possible. This means operating a model where all patients requiring GP care are assessed either on the phone or via an electronic system (eConsult) to determine the best option for their care. All practices operate telephone and online consultations.
- ❑ Strengthened working with **NHS 111**, with NHS 111 able to directly 'book' patients into a practice.
- ❑ Continued provision of **essential face-to-face** services (including home visits) through designation of 'hot' and 'cold' sites and teams to minimise the spread of infection. Hot and cold is essentially the separation of care for those with suspected COVID-19 and those not.
- ❑ Greater use of **Electronic Repeat Dispensing (ERD)** to reduce footfall within practices.

This has meant a significant change for patients in how services are accessed and used, but has meant that primary care and general practice could continue to operate and provide essential services during this very challenging time.

4. Changes to local delivery

Several 'hot' sites were set up across our two CCG areas to ensure there was safe separation in the way services were delivered for patients, with these hub sites providing care for those patients with suspected COVID-19. Additional 'cold' sites were then identified within the remaining general practice facilities to provide services to those who also needed care but did not have suspected COVID-19.

It was extremely important to ensure all primary care services operated in this way to minimise the spread of infection wherever possible and ensure the continued safety of patients and staff. Therefore the IPCAS service was also aligned to this model.

As a result the sites of delivery were identified to align to the 'hot' service hubs set up across the patch so that the IPCAS service could focus on service provision that was absolutely critical and needed at this time (in line with national guidance). The sites identified were therefore:

	Site	Opening times
Patients ring their practice to book an appointment (both routine and urgent) or NHS111 when their practice is closed for an urgent appointment	Forton Medical Centre, Gosport	<ul style="list-style-type: none"> • Mon to Fri 6.30pm to 10.30pm • Sat and Sun 8am to 10.30pm
	Waterlooville Health Centre	<ul style="list-style-type: none"> • Mon to Fri 6.30pm to 10.30pm • Sat and Sun 8am to 10.30pm

NHS England and Improvement determined nationally which services were vital to continue throughout the pandemic phase and therefore 'cold' sites were also aligned in the IPCAS service to day time delivery to ensure safety for patients, these were as follows:

	Site	Opening times
Patients ring their practice to book an appointment (both	Portchester Health Centre	<ul style="list-style-type: none"> • Mon to Fri 6.30pm to 10.30pm • Sat and Sun 8am to 10.30pm

routine and urgent) or NHS111 when their practice is closed for an urgent appointment	Swan Surgery, Petersfield	<ul style="list-style-type: none"> • Mon to Fri 6.30pm to 9pm (from mid-September to increase to 10.30pm) • Sat and Sun 8am to 2pm
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During the first wave of the pandemic the service model was adjusted to also allow patients to be booked into a video consultation, reducing the need for patients to travel and reduce the risk of infection.

Given the ongoing critical nature of the pandemic, it is not expected that this will change in the near future and the committee will be kept apprised of any plans to change this.

5. Longer term service provision and next steps

A [Plan for Improving access for Patients and Supporting General Practice](#) published by NHS England and Improvement in October 2021. This document stated that “**to support core general practice capacity and avoid disruption to existing service provision over the winter period, the planned transfer of current CCG-commissioned extended access services to PCNs will now be postponed until October 2022.**” This was in response to the additional pressure GP practices were experiencing in continuing to support delivery of the COVID-19 vaccination programme.

NHS England and Improvement then [published a letter](#) last month which outlined that the responsibility for the delivery of extended access service would not go to PCNs in April 2021, and that this would be delayed for a further year.

The CCG is therefore required to ensure a service runs until end of September 2022. The option of going out to procurement on this contract is ruled out on account of the timeframes. A procurement process would take six months, and mobilisation a further three to six months which would be near to the end of the contractual term. The CCG will therefore be extending the existing service until end of September 2022.

Throughout the next period further work will be undertaken with PCNs to establish what the plan will be, however this is subject to NHS England publishing the requirements from October onwards. Engagement with patients and reviewing the service that has been in place will form a large part of ensuring that future provision is fit for purpose.

At this point it remains unknown what the PCN contract detail will look like. For example financial details and specific requirements in terms of operating hours and locations has not be published.

NHS England and Improvement has, however, confirmed that Primary Care Networks will become responsible for providing extended access to their patients and therefore this currently integrated service may be split again as follows:

- the GP Extended Access Service provided by Primary Care Networks
- the GP Out of Hours Service provided by a Primary Care Provider Organisation

The Primary Care Alliance and CCGs are working together to develop the longer term model further taking into account the views of local people, the lessons from running the service to date and aligning the service to the wider vision for urgent care services in Portsmouth and South East Hampshire.