

**Health Scrutiny Committee
11 February 2021**

Transition, Engagement and Mobilisation Approach for the Registered Population of the Platform One Practice

Report of the Head of Legal and Governance

1 Purpose

1.1 To consider communication and engagement with service users and the mobilisation plans for the registered population of the Platform One Practice.

2 Action required

2.1 The Committee is asked to:

- a) consider Nottingham and Nottinghamshire Clinical Commissioning Group's mobilisation plans for the Platform One Practice; and
- b) decide on next steps.

3 Background information

3.1 Following notification that the Nottingham and Nottinghamshire Clinical Commissioning Group's (CCG) contract with the current provider at the Platform One Practice will reach its natural end on 31 March 2021 and that, to secure a new provider, it has decided to reduce the practice boundary, the Committee has considered the changes to services on two occasions.

3.2 The Committee invited the CCG to attend a meeting on 19 November 2020 to provide information about the changes taking place, in particular the decisions to

- a) reduce the practice boundary to retain a focus on an inner city population, which will result in approximately 3,000 patients being allocated to a practice closer to their home address; and
- b) identify a new provider to provide services to the remaining 7,800 patients from a City Centre location.

3.3 At this meeting the Committee also considered written and verbal submissions from a range of individuals and organisations. Details of the evidence provided to the Committee and its deliberations can be found in the written submissions to, and minutes of the Committee's meeting held on 19 November.

3.4 Based on the information available to it, the Committee concluded that it had concerns about the decision and made a number of recommendations and requests to the CCG.

3.5 The CCG returned to the Committee meeting of 17 December 2020 to respond to

the Committee's requests and recommendations. The CCG's response can be summarised as follows:

- a) the Equality Impact Assessment, Strategic Needs Assessment documents and other requested information have now been shared with the Committee;
- b) the CCG did not accept the Committee's recommendation that it should pause its procurement process and review the approach being taken, based on the issues raised at the Health Scrutiny Committee meeting on 19 November and other stakeholders, to ensure meaningful engagement and consultation with service users and all relevant stakeholders;
- c) the CCG is exploring improvements to communication methods and deliverables in relation to Platform One patients, and to do this is working with Healthwatch and the Integrated Care Partnership Severe Multiple Disadvantage Group, who have patient experts as part of the Group. The CCG will be working with other commissioners and providers to use every appropriate method and model to improve the information provided and ensure patients have a good understanding going forward.
- d) the CCG has considered in detail the extent to which current commissioning activities support patients with severe multiple disadvantage, currently registered with Platform One and other practices in the City and County. As commissioners, the CCG cannot access individual patient data but is mapping information about those who receive care and support in relation to one or more of four areas of severe and multiple disadvantage and where they live. The CCG intends to commission a new Primary Care Local Enhanced Service for Severe Multiple Disadvantage that this and all other practices can access. Additional funding has been identified for this. The investment will not be bound by budget but by the GP practices accessing it. The CCG will work with stakeholders, including City Integrated Care Partnership (ICP) partners, on designing the Local Enhanced Service that supports general practice in properly supporting patients;
- e) the CCG agreed to keep the Committee and key partners regularly updated on the progress of commissioning and mobilisation processes; including provision of the mobilisation plans at the earliest opportunity;
- f) the CCG has now appointed the new provider for the service.

3.6 In spite of the rejection of the recommendation to pause proceedings, and some major concerns about the new arrangement in terms of the practice boundary, the Committee agreed that it wants to work constructively with the CCG on the development of the new Practice and on providing the necessary support to patients affected by the changes.

3.7 The Committee agreed to undertake close scrutiny of the mobilisation plans and further into the future to assess the implications for both patients and wider services, for example the impact on Emergency Department attendance and drug and alcohol services.

3.8 The CCG will attend the 11 February meeting of the Committee, with representatives of the newly appointed provider (Nottingham City General Practice Alliance), to outline its mobilisation plans. The Committee will consider the involvement of all interested stakeholders, particularly those who work closely with people with severe multiple disadvantage, in the development of those plans and the way plans will be implemented.

3.9 The CCG will return to the 11 March meeting of the Committee to report on lessons learnt in relation to appropriate consultation and development of service change proposals.

4 List of attached information

4.1 Briefing from Nottingham and Nottinghamshire Clinical Commissioning Group.

5 Background papers, other than published works or those disclosing exempt or confidential information

5.1 None.

6 Published documents referred to in compiling this report

6.1 Reports to, and minutes of the meetings of the Health Scrutiny Committee meeting held on 19 November 2020 and 17 December 2020.

7 Wards affected

7.1 All.

8 Contact information

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