

Date:	1 October 2015
Classification:	General
Title:	Westminster Primary Care Project
Report of:	Councillor Rachael Robathan, Chairman of the Health & Wellbeing Board
Wards Involved:	All
Policy Context:	Health and Wellbeing
Financial Summary:	N/A
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1. Executive Summary

- 1.1 This report sets out the progress made by Westminster City Council, Central London Clinical Commissioning Group and West London Clinical Commissioning Group with progression of the Westminster Primary Care Project.

2. Key Matters for the Board's Consideration

- 2.1 It is recommended that the Westminster Health and Wellbeing Board:
- Reviews and agrees the proposed next two phases of work
 - Reviews the current governance and resourcing of the project and agrees that it is appropriate for delivering the next two phases of work

3. Background

- 3.1 In September 2014, the Westminster Health and Wellbeing Board received a report from NHS England on primary care commissioning. During this discussion, the Health and Wellbeing Board raised concerns that the strategy for primary care in Westminster was not forward looking enough and did not consider how

changes to the population in Westminster, in particular the demographic profile and the disease profile, could impact on the level of need for primary care. It was also considered that it might be helpful to develop a greater understanding of how long-term housing, regeneration and infrastructure plans concerning Westminster might impact on the need for primary care services.

- 3.2 Following this meeting, the Chairman of the Health and Wellbeing Board and the Chair of Central London Clinical Commissioning Group discussed undertaking a joint-project to develop a better joint understanding of some of these issues. At its meeting on the 20th November 2014 it was agreed that the Westminster Health and Wellbeing Board should undertake a project relating to the level of need for General Practice primary care services in Westminster.
- 3.3 In the first quarter of 2015 the local authority, Central London Clinical Commissioning Group and West London Clinical Commissioning Group have been working together to further refine what this project may look to achieve and what might be needed from partners around the Health and Wellbeing Board to achieve it.
- 3.4 A paper was then brought back to the members of the Health & Wellbeing Board in May 2015 where the scope of, and governance and resourcing for, the project was agreed.

4. Progress to date

- 4.1 The aim of the project is to deliver three things:
 1. An understanding of the likely population size and profile for Westminster by 2040. This includes consideration of the daytime population (particularly the working population)
 2. An understanding of the likely burden of disease of this population by 2040
 3. Consideration as to how the new models of care being developed within the local health economy may impact on the use of primary care by this population in 2040.
- 4.2 Since May a joint team of analysts (nominated by the Clinical Commissioning Groups and the Council) has completed the first phase of work to model a range of projections which estimate the demographic profile of Westminster and the subsequent disease burden. This includes estimates around the numbers of:
 - Mostly healthy adults (16 – 75 years) and mostly healthy elderly people over 75;

- Adults between 16 and 75 and elderly people over 75 who have one or more long-term conditions;
- People over the age of 16 who have cancer; a severe or enduring mental illness. with advanced organic brain disorders;
- People over 16 years of age with learning disabilities;
- People over the age of 16 with a FACS eligible physical disability;
- People over the age of 16 who are “socially excluded”;
- Mostly healthy young people in Westminster;
- Children and young people with one or more long-term condition or cancer;
- Children with intensive continuing care needs; and
- Young people with intensive continuing care needs.

4.3 This first phase of modelling provides a strong foundation for two further phases of work designed to fulfil the brief originally agreed by the Health & Wellbeing Board. These are:

- Phase 2: To overlay the impacts of regeneration, housing and infrastructure plans on the estimates modelled and build a tool that enables the manipulation of these impacts according to a number of variables. This will include the mapping of the existing provision of GP services both in terms of numbers of clinicians and also physical estate.
- Phase 3: To undertake a joint analysis of how the needs of the Westminster population will impact on the demand for frontline services (including primary care) with a view to this informing the analysis that will be used by NHS England, CLCCG and NWLCCG to plan for future primary care provision. This analysis completed by the project will include the identification of local authority and voluntary sector levers (such as estates and planning policy) that could be used to support the provision of primary care to match population needs.

4.4 **The Health & Wellbeing Board is asked to agree the next two phases of work**

5. Project governance and resource

Governance

- 5.1 The Health and Wellbeing Board oversees the delivery of this project and will be updated on progress, risk and issues at their meetings as required.
- 5.2 Stuart Lines, Deputy Director of Public Health, acts as the senior responsible member this project, driving its delivery between Health and Wellbeing Board meetings and being accountable to the Health and Wellbeing Board on progress.
- 5.3 The Project Steering Group– made up of officers nominated by the Council and CCGs –undertakes the following roles:
- Steers the development and delivery of the project;
 - Decides the methodology and framework which will be used to undertake the modelling;
 - Identifies the data and expertise that will be needed to deliver the project and ensure that this is fed into the steering group; and
 - Keeps a record of the approach taken to deliver the project with the aim of sharing and learning from this work with other local areas.
- 5.4 The membership of the steering group is:

Name	Organisation	Position
Stuart Lines (Chair)	WCC	Deputy Director of Public Health- PHI & Social Determinants
Helena Stokes (CCG Project Lead)	CLCCG	Delivery Manager for Primary Care
Jonathan Bettis	CLCCG	Performance Manager
Dr Andrew Rixom	WCC	Senior Public Health Analyst
Colin Brodie	WCC	Public Health Knowledge Manager
Gayana Perera	WCC	Senior Public Health Analyst
Thilina Jayatilleke	WCC	Public Health Analyst
Damian Highwood	WCC	Evaluation and Performance Manager
Mike Rogers	WCC	Adult Social Care, Head of Business Analysis, Planning and Workforce Development
Cecily Herdman	WCC	Principle Policy Officer (Housing Strategy)

James Hebblethwaite	WCC	Senior Public Health Analyst
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- 5.5 In addition to the commitment of officer time to the Steering Group, Westminster City Council has also allocated 0.4 x FTE project officer from within its Policy, Performance and Communications department who will be responsible on behalf of the local authority for the day-to-day management of the project. A Principal Policy Officer from the same department will provide strategic oversight of the project.
- 5.6 It is recommended that the Health and Wellbeing Board consider whether this resource could be complemented by some additional Clinical Commissioning Group analyst and project management resource. This may be helpful in ensuring that the project is considered within the light of the Primary Care Transformation agenda and that the CCG Governing Bodies remain sighted on the project as it develops
- 5.7 General Practitioners will be a key stakeholder for this work and the Clinical Commissioning Groups' Governing Bodies should have a role in shaping delivery of the project to ensure it aligns with their new role in Primary Care Co-Commissioning. With this in mind it is recommended that a GP champion is identified by Central London Clinical Commissioning Group and West London Clinical Commissioning Group. The GP champions would have a role on the project steering group and would also provide a crucial link back to the Clinical Commissioning Groups' Government Bodies.
- 5.8 The Health and Wellbeing Board is asked to review the current governance and resourcing of the project and agree that it is appropriate for delivering the next two phases of work.

6. Legal Implications

None at this time

7. Financial Implications

None at this time.

If you have any queries about this Report or wish to inspect any of the Background Papers please contact: Toby Howes, telephone 020 7641 8470, email thowes@westminster.gov.uk