

---

**Meeting of the Health and Adult Social Care Scrutiny Committee – 25<sup>th</sup> January 2022**

**Report of the Dudley Integrated Health and Care NHS Trust (DIHC)**

**Primary Care Strategy**

**Purpose**

1. This report summarises the Primary Care Strategy of DIHC attached in Appendix One.

**Recommendations**

2. It is recommended that Scrutiny;
  - receive the DIHC Primary Care Strategy for oversight and assurance.

**Background**

3. The Primary Care Strategy attached was approved by the DIHC Board at its public meeting on 1<sup>st</sup> November 2022.
4. The Primary Care Strategy has been through extensive consultation and engagement with General Practice, Primary Care Network (PCNs), the DIHC Place Executive Team and Dudley and Integrated Care Board (ICB) Primary Care Collaborative groups, alongside engagement events held with GPs, Practice Nurses, Practice Managers and other staff groups.



5. In developing this Primary Care Strategy, DIHC has been working with its key partners:
  - in Dudley - to develop the future strategy for primary care delivery as a key component of the Dudley integrated model of care, together with proposals for how DIHC can further support primary care practices and PCNs achieve their goals and,
  - across the Black Country - with Primary Care Network Clinical Directors (PCN CDs) and primary care collaborative members in response to a request from them to explore and determine the potential role for DIHC in supporting the development and sustainability of primary care across the Black Country ICS

### Vision

6. Our vision to support and enable General Practice and PCNs to offer a sustainable model of primary care that is multi-disciplinary and responsive to the specific needs of the population, focused on prevention, self-care and shared health outcomes.

### Aims

7.
  - To address the challenges of access, workforce and estates whilst embracing the opportunities afforded by the Fuller recommendations, best practice and national policy.
  - To support and enable general practice and PCNs to offer a sustainable model of primary care that is the first point of contact and principle point of continuing care for the population
  - To support and enable general practice and PCNs to provide a consistently high level of care, address unwarranted variation, and improve access, quality and population health outcomes as measured through the Dudley Quality Outcomes for Health Framework (DQOFH)
  - To develop a model of care that is multi-disciplinary and responsive to the specific needs of the population, focussed on prevention, self-care and shared health outcomes, supported by appropriate estate and facilities.
  - To support patients to take a more active role in improving and managing their own health and be better informed about which professional is best able to help them.
  - To deliver the national, regional and local requirements in partnership with the ICB and general practice.

- To represent and enable primary care to lead the development of the Transformation Strategy for primary care within the ICB.
- To provide an organisational model to support the resilience and sustainability of primary care with innovative workforce models and a range of support offers

## Themes

8. The strategy has been grouped into twelve key themes for delivery with a number of actions in each theme aligned with a joint work plan priorities agreed with the Dudley Primary Care Collaborative and Black Country ICB.
  - Access: Deliver extended access appointments over 7 days a week through the access hub, embed UTC within operating model of DIHC.
  - Additional Roles Reimbursement Scheme (ARRS): Develop a consistent operating model with the ability to flex, in partnership, to meet population needs of practices.
  - Clinical: A primary care operating model, for practices and ICTs, that defines how services operate in support of practices, PCNs and place.
  - Corporate: A business partnering support function to general practice and PCNs for CQC assessment, Quality Improvement, Human Resources, administrative and financial support.
  - Development: To develop our strategic approach and offer to directly provide primary medical services.
  - Digital and Business Intelligence: To develop a digital blueprint in support of the primary care operating model. To produce Business Intelligence and population health analytics that enable operational services to respond to the needs of the population
  - DQOFH: To lead the review of DQOFH indicators and the way in which services are organised to support the delivery of DQOFH indicators.
  - Estates: To develop and implement an estates strategy that supports the delivery of the primary care operating model.
  - Learning & Development: To co-produce and implement a strategy, with the Training Hub, to offer a broad range of professional and personal development to all roles across primary care.

- Quality: To provide a quality improvement support function, sharing policies and procedures to enable practices reach good or outstanding in every CQC domain.
- Stakeholder Engagement: To support primary care to be informed and DIHC to represent and reflect the “voice” of primary care across the system.
- Workforce: To create a strategy to recruit and retain staff, including the creation of a bank of clinical and non-clinical staff, to sustainably deliver primary care

### Implementation

9. An implementation plan to deliver the Primary Care Strategy has been drafted and is enclosed in Appendix 2.
10. The Primary Care Strategy covers a range of actions across all Directorates and Teams within DIHC. To deliver the strategy the Executive Team are supporting a “one team” approach with a series of principles defining joint working and a Primary Care Strategy steering group established across DIHC to manage the dependencies and continually align activity to maximise time and resource.
11. A communication and engagement plan is being developed to support the implementation of the Primary Care Strategy. We will be involving stakeholders and the public (including patients and carers) in the development and implementation of projects to deliver the Primary Care Strategy.

### Finance

12. There are no financial implications to the Council

### Law

13. No implications arising from this report

### Risk Management

14. DIHC and the ICB are considering the risks related to the delivery of the Primary Care Strategy. A risk register will be developed and available by the end of January 2023.

### Equality Impact

15. This initiative is specifically designed to address health and care inequalities across our communities including children and young people

and people with protected characteristics.

### **Human Resources/Organisational Development**

16. There are no HR implications to the Council

### **Commercial/Procurement**

17. No implications arising from this report

### **Environment/Climate Change**

18. There are no implications arising from this report

### **Council Priorities and Projects**

19. This development is consistent with the Borough Vision's intention to create healthy and resilient communities.



**Dr Lucy Martin - Joint Medical Director,  
DIHC**

Report Author: Daniel King – Head of Primary Care, DIHC  
NHS Trust Email: [Daniel.king@nhs.net](mailto:Daniel.king@nhs.net)

### **Appendices**

Appendix 1 - Primary Care Strategy

Appendix 2 - Implementation plan to deliver the Primary Care Strategy