

Concordia Health Ltd Primary Care Business plan 2018 – 2019



The Child & Family Centre Barking

1. Purpose of this Business Plan

The purpose of this business plan is to set out clear objectives in the following areas

- Patient experience
- Clinical Governance
- Clinical quality
- Staffing and recruitment
- Stakeholder engagement
- Financial

This document will be a “living document” which will be reviewed in the monthly Concordia Primary Care Performance reviews.

The business plan will also be reviewed and updated to respond to both internal initiatives and also external changes driven by the Clinical Commissioning groups and NHS England. The business plan has been approved and signed off by the Director of Primary Care and Joint Managing Director of Concordia Health Ltd.

2. Overview of the Concordia Primary Care Division

The Concordia Health Primary Care Division is currently made up of four GP practices.

Concordia Practice
Parkside Medical Centre – Southwark
Melbourne Grove Practice – Southwark
Child and Family Practice – Barking
Porters Avenue surgery – Dagenham

3. Mission statement

The Concordia Health mission statement for the Primary Care Division is attached. The main values and drivers for the business contained in the mission statement are –

- Champion of Patients
- Pride in our people
- Pride in our service
- Evolving to meet the requirements of the NHS

The mission statement is promoted in our practices to our team and also our patients and drives the quality of service that each practice will deliver to our patients.



Mission statement
Concordia Health Fi

4. Financial objectives for Primary Care

The financial objectives for the Primary Care Division in Concordia Health for 2018-2019 are to ensure performance in a number of areas that are business critical.

4.1 Achievement of revenue and margin targets

The Primary Care Division has been set revenue and margin targets by the Concordia Health Ltd board. As these figures are commercially confidential, they are not detailed in this document.

The financial performance of each practice and the Primary Care Division is reviewed monthly by the Primary Care Director, the Board and the finance team. Any improvement actions are raised to the Practice Manager.

4.2 List Size growth

It is forecast that due to demands for Primary Care services the list size will grow due to population growth and demands in the local areas served as demonstrated within the JSNA (Joint Strategic Needs Assessment)

Concordia Health does not support active growth of its practice population from other surrounding practices, however it does support patient choice and actively encourages those patients that do not have a registered practice to register.

In addition, the practice managers will ensure that we respond to patient feedback and improvements from our patients to ensure that we are providing a safe and caring service so that patients are satisfied with the practice and do not seek to deregister.

In addition the Practice team will review whether patients have left the practice to move to a new practice within the locality or outside the locality as this will provide a sign for the reason that patients are moving to a new practice.

4.3 Enhanced services

The GP practices in Concordia Health Ltd have all signed up for the Direct Enhanced services that are offered.

In addition the practices will also review and implement Local Enhanced Services that are offered and work alongside the local CCG and federations to support local initiatives to meet patient needs.

These enhanced services will lead to improved patient care for our patients and will also lead to increased revenue for the practices.

As part of our business plan, we will ensure that all Enhanced services will be managed effectively for our patients.

We will also ensure that every month the Practice Managers will also provide the enhanced services tracking template which details the number of patients have been reviewed / vaccinated and the number of patients that require review / vaccination.

In the financial budget for each practice, a forecast will be provided to each practice and performance against target will be monitored on a monthly basis to drive patient quality whilst ensuring practice sustainability.

4.4 Cost control

For the budget for each practice in the Primary Care Division, there are cost forecasts to be achieved. This ensures that each practice is sustainable. This will include control of the following areas.

- Premises costs
- Staffing costs
- Equipment costs
- Consumable costs
- Prescribing costs

The control of costs will be reviewed on a monthly basis in the Primary Care financial review and any areas of improvement will be implemented by the practice management team.

5 Patient experience

To ensure we continue to provide a sustainable patient centred service, we will ensure that we deliver on our mission statement aim “Champion of Patients”.

We will work actively with our practice teams, patient groups, clinical commissioning groups (CCGs), local federations and stakeholders to ensure that we provide a service to our patients that is –

- Safe
- Effective
- Caring
- Responsive
- Well led

5.1 Practice information

During 2018-19 we will ensure that we continue to communicate effectively with our patients by providing regular updates on the practice websites and through information displays at the practice.

During 2018-19, it is the aim to further expand the existing PPGs to cover Youth PPG, Care Home PPG and other local groups alongside the already well established PPG forums in addition the successful practice newsletters will be expanded to include seasonal health advice and updated twitter feeds. Patient access to information will also be opened up further following on from the successful launch of patient online to include e consulting across the practices.

5.2 Patient complaints

Each practice manager will ensure that patient complaints are acknowledged within 48 hours and a full response issued within 20 days. This will be reviewed at the monthly performance review.

NHS choices responses will be completed within 48 hours.

All patient complaints will continue to be reviewed in the monthly Primary Care performance reviews and the practice team meetings.

Practice Managers will analyse trends on complaints to drive improvement and provide an action plan for improvement.

5.3 Patient satisfaction results

The Primary Care division managers will be expected to ensure that 95% of feedback from our patients for the Friends and Family test is rated Good or Excellent.

Patient feedback will be reviewed in the monthly Primary Care performance reviews and the practice team meetings.

5.4 Patient Participation Group meetings (PPG)

The Concordia Health GP practices will ensure that a minimum of 4 PPG meetings will take place during the year 2018 -19 per practice.

The Concordia team will ensure that there is the widest participation through –

- Implementation of a Young Persons PPG or other deliverable focused PPG in line where possible with practice demographic demands.
- Implementation of education events for our patients covering chronic condition management.

The Practice management team will also deliver the agreed areas of improvement.

The Practice management team will use the PPG to drive patient satisfaction and improvement.

The practice management team will also complete and publish the year end PPG report.

6 Clinical Governance

Clinical Governance will drive our performance in the GP practices in the Concordia Primary Care Division. We will ensure that performance against our governance objectives in the year 2018-19 is continuously monitored and ensure that the appropriate lessons are learned and shared across the organisation.

6.1 Care Quality Commission

We will ensure that all of the practices in the Concordia Primary Care Division are working to provide a service that continue to be rated as GOOD as a minimum level by the CQC.

This will be achieved through our internal governance and performance reviews.

We will continue to carry out internal audits to measure each practice against the CQC Key Lines of Enquiry (KLOEs) and the 6 population groups.

Our governance and internal audit process will drive our performance during the year to drive each practice to achieve an outstanding level of performance to ensure that we are –

- Effective
- Caring
- Responsive
- Well led
- Safe

We will also ensure that we continue to share best practice across all of our practices during 2018-19.

6.2 Significant events

During 2018 – 19 we will continue to ensure the following -

- 1) That we continue to drive a culture that ensures significant events are recorded.
- 2) That all near misses are recorded.
- 3) That all significant events are fully investigated with 95% being completed within 40 days.
- 4) That the appropriate notifications are carried out
- 5) That the appropriate lessons are learned and shared across the organisation.

6.3 Complaints

- 1) That we continue to drive a culture that ensures all complaints are recorded.
- 2) That we aim to respond to complaints raised by patients attending the practice on the day to resolve.
- 3) That all complaints are fully investigated and a full response is provided within 20 days.
- 4) That the appropriate trends are analysed and lessons are learned and shared across the organisation.
- 5) That we engage and update the patients appropriately throughout the complaint process.

6.4 Risk assessments

The Primary Care Division of Concordia Health will ensure that Risk Assessments are completed during the year and all identified areas for actions and improvement are completed. The following risk assessments will be completed as a minimum, this list is not exhaustive and will be updated in line with legislative changes as appropriate.

- 1) Fire risk assessment
- 2) Health and Safety
- 3) Legionnaires testing
- 4) Infection control
- 5) Information Governance
- 6) Access including DDA

6.5 Weekly Practice manager checklist submissions

The Practice Managers in the Concordia Health Primary Care Division will continue to submit the weekly management checklist which will provide assurance that all mandatory pathways and actions have been completed to ensure a safe and effective environment for our patients and team.

6.6 Mandatory training

Mandatory training for all employees in the Primary Care Division will be **maintained** at the current 100% compliance level. This will be managed by the Practice Managers and reviewed on a monthly basis in the Primary Care performance reviews.

6.7 Safeguarding

In the year 2018-19 the following safeguarding controls will continue to be in place to ensure all safeguarding issues are effectively managed.

- 1) All team members will have completed their safeguarding mandatory training. This is currently 100% compliant and that level will be maintained.
- 2) The Practice will review safeguarding issues in their weekly team meetings.

- 3) The Practice will hold regular meetings with the locality safeguarding teams.
- 4) All safeguarding concerns will be managed and notified immediately to the relevant agencies.
- 5) Safeguarding training scenarios will be completed at practice team meetings during the year.
- 6) All staff to be Prevent/WRAP compliant

6.8 Meetings

The Primary Care division will ensure effective governance and communication through the following meetings,

- 1) Quarterly Clinical Governance meetings – Attended by Primary Care Managers and Clinical leads and Chaired by the Director of Medical Services to review all governance issues raised to ensure appropriate lessons are learned and shared.
- 2) Monthly Performance meetings – Chaired by the Primary Care Operations Manager to review the operational, clinical, governance and financial performance of each practice.
- 3) Weekly practice team meetings – To review and discuss practice performance and issues to ensure open communication to drive improvement.

6.9 Clinical Alerts

All clinical alerts during the year will be actioned and cascaded in each practice in the Primary Care division within 24 hours.

6.10 Business Continuity

The business continuity plan will be reviewed throughout the year. All practice employees will be briefed on the plan during the year to ensure that the plan is effectively communicated.

7 Clinical quality

7.1 Quality Outcome Framework (QOF)

The Concordia practices again delivered a high standard of QOF performance this year with the practices averaging over 99% achievement of available QOF points.

7.2 Key Performance Indicators

The Concordia practices all have Key Performance Indicators that they are measured against. It is expected that upper quarter percentile achievement will be delivered by all practices in the Concordia Primary Care division. Non achievement will be reviewed in order to action plan. We will actively engage with stakeholders to ensure high levels of KPI compliance are achieved.

7.3 Audit

The Concordia practices will continue to complete both clinical and non-clinical audits during 2018-19 to ensure that the service is safe and effective. Examples of the audits to be completed are –

- 1) Prescribing audits
- 2) Patient records audits
- 3) Clinical cohort audits such as Diabetes and Hypertension
- 4) Safeguarding audit
- 5) Safe haven faxing audit
- 6) IG audit (including GDPR compliance in line with the new legislation)
- 7) H&S audit
- 8) DDA audit
- 9) Fire safety audit

7.4 Training practice

Two of the Concordia practices are accredited GP training practices. The practices will continue to effectively train and support GP registrars in partnership with the London Deanery to prepare our GP registrars for a successful career in Primary Care. We will continue to support our clinicians to become accredited trainers and plan to achieve training status at our remaining practices.

8 Staffing

The Concordia Health Primary Care Division will ensure an effective and safe service is provided to our patients by ensuring a strong and supported team is in place at each practice.

- 1) We will ensure that we effectively work with the recruitment team to recruit any new vacancies.
- 2) We will effectively carry out a robust evidence based recruitment process.
- 3) We will effectively induct all new employees through the probationary process.
- 4) We will effectively manage any performance improvement issues identified.
- 5) The practice will set objectives and carry out annual appraisals for every team member.
- 6) All practice team members will complete mandatory training.
- 7) Team members will be supported to complete personal development during the year.
- 8) Effective and open communication will be delivered in the Primary Care and practice meetings.

9 Stakeholder engagement

9.1 Implementing the 2018-19 GP contract

The practices in the Concordia Primary Care division will implement all new initiatives in the 2018-19 NHS England contract including local CCG specific initiatives.

9.2 Clinical Commissioning Groups and NHS England

The practices will ensure that we successfully communicate with the local commissioning groups.

- 1) We will implement and local or national initiatives to improve our services.
- 2) We will respond quickly and effectively to any requests for information.
- 3) Each practice will provide detailed performance information for performance reviews.
- 4) We will carry out any notifications efficiently to Stakeholders.
- 5) We will achieve our contractual Key Performance Indicators.

9.3 Federations

The practice management team will communicate openly and effectively with the established federations in their locality.

- 1) We will be a positive contributor in meetings.
- 2) We will action any initiatives in a positive manner.
- 3) We will provide feedback on any areas that we believe can be improved.
- 4) We will implement agreed initiatives from the federation to improve patient care.

10 New Business opportunities

The Concordia Primary Care division will tender for new opportunities if the following criteria are met.

- 1) That the practice list size is at a required size to ensure that the practice is financially viable to ensure financial stability for ongoing continuity of patient care.
- 2) That the Primary Care division is able to provide support to the new practice.
- 3) That the location of the practice is able to be effectively managed by the Primary Care management team.
- 4) Local and national healthcare initiatives in line with CCG and federation requirements to support the GP five year forward view plan and in line with Sustainability and Transformation objectives.

11 Conclusion

This business plan has set out the objectives for the Primary Care division for 2018-19. This will ensure that we are able to drive the performance of our practices in the identified areas below.

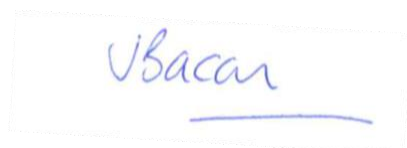
- Financial
- Patient experience
- Clinical Governance
- Clinical quality
- Staffing and recruitment
- Stakeholder engagement

This will ensure that we provide a service that achieves our objectives and allows us to respond to the changing demands of Primary Care in 2018-19.

Author

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Director of Primary Care and Companies Secretary



April 2018



Approver

Adam Hurd

Joint Managing Director

April 2018