

**NHS**  
Brighton and Hove  
Clinical Commissioning Group

# Improving Quality in General Practice Brighton and Hove

## The GP Scorecard




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## Improving Quality of Primary Care - part of CCG business?

- CCG responsibility to improve health care - secure the best outcomes within the resources available
- UK has a strong primary care based system with relatively high levels of patient satisfaction.
- International evidence suggests the strength of a primary care is linked to overall population health.
- Primary care accounts for 9 out of 10 patient contacts, but hospital care and specialist services is where most NHS expenditure is focussed.




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### Improving Quality of Primary Care - part of CCG business

- Most of CCG's service redesign focus:
  - shifting to primary care based models of care
  - avoiding the need to go to hospital
- Primary care – multiple small providers
  - **Wide variation** in effectiveness & delivery of primary care at an individual practice level
  - GP practices now plays an increasingly important role in co-ordinating the provision of patient care.




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### Changes to NHS Commissioning - April 2013

- The newly reformed NHS requires GPs to play a key role as commissioners, as well care providers.
- The **National Commissioning Board** will be responsible for commissioning primary care and managing each practice contract, but
- Under the Health Act **CCG's** have a duty to **“assist and support the National Commissioning Board to improve the quality of primary care:**
  - Promoting quality improvement
  - Reviewing and benchmarking practice performance
  - Enabling peer review and challenge




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### GP Scorecard Process

- Nationally one of the most used approaches to driving forward quality improvement in general practice - collection and analysis of a range of clinical, quality and performance data to form **GP scorecards.**
- Brighton and Hove introduced a Quality and Performance Framework for Primary Care in 2009/10;
  - Key element - GP Scorecard to driving quality improvement forwards
- Piloted with 25% of practices.




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### GP Scorecard Process

- In 2010/11 - learning from the pilot informed the full roll-out across the City:
  - **Practice Profiles** were produced to contextualise the data.
  - Individual practice visits took place to agree **Practice Development Plans**.
  - **Public facing scorecards** were included on the PCT website.
- In 2011/12 a CCG steering group - Public Health, Clinical Quality, Primary Care Commissioning and Business Intelligence - set up to ensure systems developed were in-line with the emerging CCG environment.
- The group concluded the process should be adapted for 2011/12, in particular to provide greater focus on **peer review** and support.




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### Peer Review Workshops

- February and March 2012 - all Practices in Brighton & Hove (GPs, Practice Managers and Practice Nurses) were invited to attend **scorecard workshops** made up of small groups of practices.
- Individual Practice Scorecards, Practice Profiles and Patient Surveys were provided in advance of the workshops to aid planning and discussion.
- The aim was to provide a non-judgemental, supportive environment to share good practice and to consider individual practice development needs.




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### GP Scorecard

- The data is broken down into key areas:
  - Contractual Requirements and Premises
  - Priority Standards and Services
  - Access
  - Patient Experience
  - Quality & Outcomes Framework (QOF)
  - Public Health Information
  - Prescribing
- 59 different indicators are included
- Practices are rated A, B or C for each area & given an overall rating.




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# Analysis

- No particular pattern in terms of Locality – although more West practices were higher scoring
- No particular pattern in terms of deprivation – although the lowest 2 scoring practices had the highest level of deprivation.
- The lowest 5 scoring practices were all small practices
- No identifiable patterns in terms of scores and Taxonomy of General Practice



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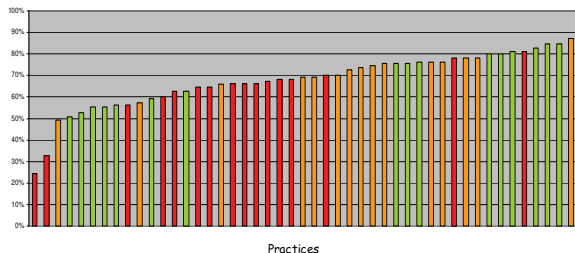
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# Score by Locality

Each practice has an overall percentage score: East, West, Central



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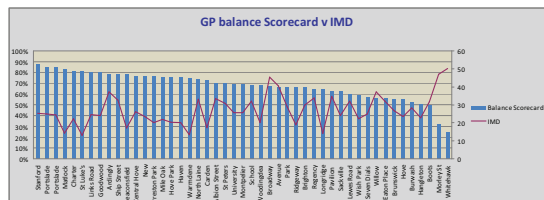
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# Score By Index of Deprivation

(High IMD = higher deprivation)



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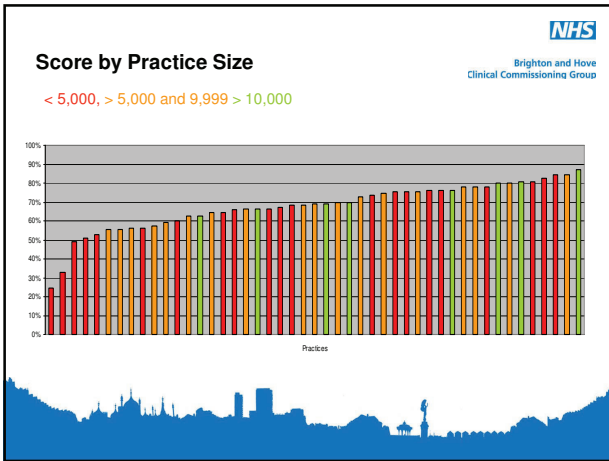
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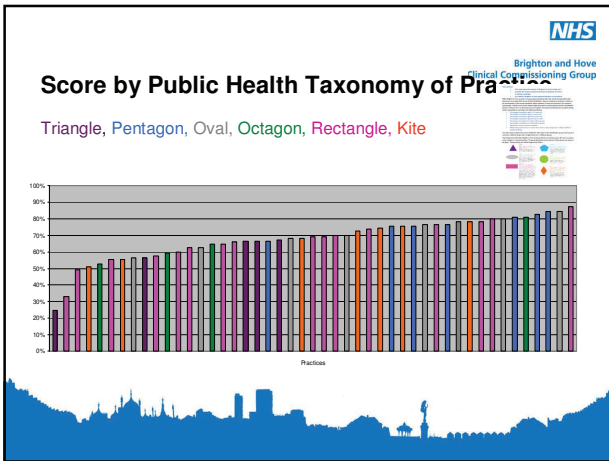
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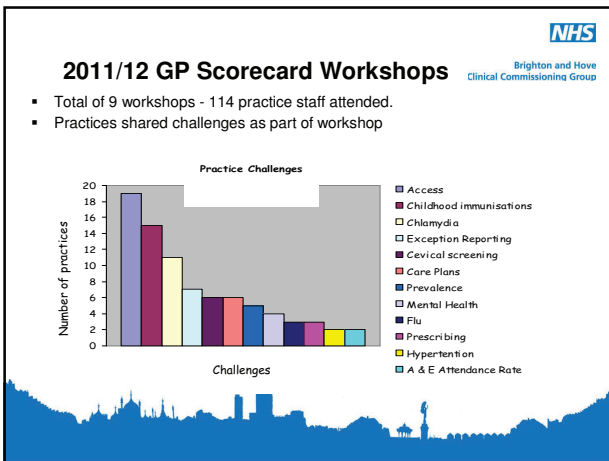
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## GP Scorecard Workshops

- Practices were required to submit Action Plans to address the practices challenges; common themes are shown below:

Action	Percentage of Practices
Access	~23%
Childhood Immunisations	~13%
Chlamydia	~11%
Exception / Coding / Reporting	~10%
Care Plans	~9%
Flu	~7%
Cervical screening	~6%
Prevalence	~5%
A & E Attendance Rate	~4%
Prescribing Benzos	~4%
Patient Experience	~3%
NHS Healthchecks	~3%

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## GP Scorecard Newsletter

- June 2012 - newsletter was sent to practices which summarised the key findings:
  - 'Top Tips' from the workshops.
  - The contact details of practices willing to offer additional peer support.
  - The evaluation summary.
  - Responses to organisational issues.
  - The next steps.

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## Summary

- From 2010/11 to 2011/12, **13 practices moved up at least one band, 31 stayed in the same band and 3 moved down.**
- The 2011/12 feedback was positive with all 47 practices commenting about the benefit of peer review and support.
- The latest - Practice Profiles and Public Scorecards will be added to the CCG website in September
- CCG - as apart of authorisation process – establishing a dedicated primary care team - GP clinical lead will be recruited.
- Further plans to improve quality will be developed in the Autumn – once new team established.

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## Further Information

- New National Guidance – Securing Excellence in Primary Care
  - Management & safe transfer of functions
  - Main components of the new primary care commissioning system - who will do what.
- <http://www.commissioningboard.nhs.uk/files/2012/06/ex-comm-pc.pdf>
- B&H Scorecards – Link to CCG Web-site
- <http://www.brightonandhove.nhs.uk/localservices/gp/NHSBrightonandHove-GPbalancedscorecard.asp>



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