

**APPENDIX 1**  
**ACTION PLAN: Review of Access to GPs and Primary Medical Care**

No.	Recommendation	Proposed Actions / Progress	Success Measures	Responsibility	Date	
<b>General</b>						
1	All relevant health bodies (NENC ICB, Cleveland LMC, H&SH, NHS Trusts, and general practices) engage regularly and constructively around the issues raised as part of this review to ensure that patients are approaching / receiving care from the most appropriate services based on need.	Update report to ICB place subcommittee (Stockton) and Health and Wellbeing Board (HWB).	Subcommittee/ HWB assured through report and discussion	Emma Joyeux / Sarah Bowman-Abouna	December 2024	
		Local Clinical Interface Group (LCIG) to continue discussing primary and secondary care interface issues that are impacting on primary care capacity.	Collaborative working between primary and secondary care to agree actions as outlined by Primary Care Access Recovery Plan (PCARP)	LCIG via ICB	March 2025	
		<i>NENC ICB - North East and North Cumbria Integrated Care Board</i>	Continue to support practices to move to a Modern General Practice Access (MGPA) model to improve access and patient experience (13 practices accessed funding in 23/24).	Improvements in GP Patient survey/local practice survey	Practices	August 2024
			<i>CLMC – Cleveland Local Medical Committee</i>		Number of practices accessing MGPA funding	Practices
		<i>H&amp;SH – Hartlepool &amp; Stockton Health GP Federation</i>		Continue to support Primary Care Networks (PCNs) to implement Capacity and Access Improvement Plans (CAIP).	Number of PCNs achieving maximum CAIP funding	PCNs
			NENC ICB to meet regularly with key stakeholders e.g. CLMC and H&SH.	Regular meetings established	ICB & CLMC/ H&SH	July 2024
			NENC ICB to be invited to regularly attend Stockton Practice Managers meeting to further develop collaborative working relationships.	Regular meetings established and attended by ICB	Practice Manager lead	September 2024
			Improved links between local Planning Services functions, Public Health and NENC ICB in terms of new housing developments and the potential impact of these in relation to health service demand / pressures.	Regular discussions established	SBC, Public Health and NENC ICB	March 2025

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<b>Communications</b>					
2	All relevant health bodies continue efforts to increase public / patient understanding about accessing the most appropriate services (including in the context of the Pharmacy First initiative), using all available communication mechanisms (both print and digital) and links through local community networks (e.g. community partnerships), to ensure key messages are reinforced.	Continued promotion of public messaging through websites and social media channels.	Visibility on websites and social media platforms	ICB/ Practices/ PCNs	March 2025
		HealthWatch Stockton to adopt and promote the resource developed by HealthWatch South Tees.	Communications disseminated through key services and VCSE	HealthWatch Stockton	July 2024
		Key information and messages disseminated through Catalyst, community wellbeing champions and community spaces.	Communications disseminated through key services and VCSE	ICB/ SBC public health	March 2025
		Increase the number of patients with online accounts enabled with full prospective access (target is 95%).	Remaining 5 practices to achieve 95% target	Practices	October 2024
		Promotion of enhanced access appointments on evenings and weekends.	Increased utilisation of appointments	Practices and H&SH	March 2025
		Promotion of at-scale services provided by H&SH that will reduce demand on practice appointments e.g. covid vaccinations, menopause clinics.	Increased utilisation of at-scale services	Practices and H&SH	March 2025
3	Councillors and local MPs be supported in helping with these communication messages as leaders in their communities (as well as their role in raising concerns expressed by the community) and encourage positive feedback as well as concerns (to help share and spread learning and best practice).	Help support messaging around wasted appointments from Did Not Attends (DNA).	Reduction in DNA rates	Councillors/ MPs	March 2025
		HealthWatch communication to be used by Councillors and local MPs, for dissemination in the community – including contact details to send feedback.	Communications disseminated in the community and feedback gathered	Councillors/ MPs	March 2025

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4	The value and importance of all general practice roles are highlighted and publicised by health bodies and practices themselves.	Continued promotion of public messaging through websites and social media channels.	Visibility on websites and social media platforms	ICB/ Practices/ PCNs	March 2025
		HealthWatch Stockton to adopt and promote the resource developed by HealthWatch South Tees.	Communications disseminated through key services and VCSE	HealthWatch Stockton	July 2024
5	Local practices be recognised for continuing to deliver primary medical care services safely in Stockton-on-Tees despite the ongoing challenges raised during this review.	Continued promotion of public messaging through websites and social media channels.	Visibility on websites and social media platforms.	ICB/ Practices/ PCNs	March 2025
		Continued support from CLMC specialist in CQC areas to ensure all practices remain focused on the key lines of enquiry for any future inspections.	CQC ratings of good or outstanding to be achieved	CLMC/ Practices	March 2025
<b>Operational</b>					
6	All general practices move towards providing the full use of digital telephony capabilities (including call-back functionality), with appropriate staff in place to support these arrangements.	Support practices to transition from analogue telephony to Cloud Based Telephony (CBT).	All practices to be on CBT	Practices	In line with end date of individual practice contracts
		Support practices to increase functionality of CBT, with particular emphasis on call-back function	All practices to have call-back functionality as part of CBT	ICB/ Practices	October 2024 [or in line with end date of individual practice contracts]
7	All general practices be encouraged to review and refresh care navigation processes, ensuring adequate training is in	ICB to support Protected Learning Time (PLT) to enable practices to access education and training.	Practice staff (admin and clinical) engagement with PLT	ICB/ Practices	March 2025

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	place to support implementation to ensure both staff and patients are comfortable with the approach.	ICB to promote national care navigation resources which are available for practices to access self-directed learning.	Practice feedback from accessing care navigation resources	ICB/ Practices	March 2025
		Primary Care Training Hub (PCTH) to support practices with a taught training offer in care navigation to further aide confidence for practice staff.	Practice staff have appropriate training in Care Navigation, Foundation and advanced courses offered during practice PLTs with the last training happening in October.	PCTH to arrange, practices responsibility to ensure that staff are accessing the funded courses.	October 2024
8	<p>To ensure appropriate workforce capacity is in place to maximise the local general practice offer:</p> <p>a) NENC ICB continue to support / encourage uptake of the ARRS scheme, particularly amongst those PCNs which had not accessed this initiative.</p>	Continue to support / encourage uptake of the ARRS scheme through regular dialogue with PCN Operational Managers to discuss workforce plans and available budget.	Increase in headcount (HC) and/or whole time equivalent (WTE) of ARRS roles (June 2023 data: 61 HC/58.04 WTE across Stockton-on-Tees)	ICB/ PCNs	March 2025
		Submission of PCN workforce plan to capture current and future PCN workforce intentions.	Increased utilisation of available budget for ARRS spent by PCNs	PCNs	October 2024 [workforce plan]
		Encourage PCNs to explore new roles, working in collaboration with system partners.	Increase in roles employed directly by PCNs and or by system partners	ICB/ PCNs	March 2025
		Continue to support PCNs to work with system partners to trial and embed new roles. PCNs to determine employment model, which may include a third-party employer e.g. H&SH Federation to employ and manage identified ARRS roles.	Number of ARRS roles employed by H&SH supporting PCNs	PCNs/ H&SH	March 2025

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	b) All relevant health bodies continue to explore further and develop options to increase GP recruitment and retention in the Borough.	ICB to support practices by providing free advert listing with the BMJ Careers, which may encourage GPs from outside of the area to move to Tees.	Number of practices using this resource to advertise recruitment opportunities	Practices/ CLMC	March 2025
CLMC continues to support the job advert service for practices.		Number of practices using this resource to advertise recruitment opportunities	Practices/ CLMC	March 2025	
CLMC continues to support practices with Skilled Worker Visas to retain GPs as they leave the Vocational Training Scheme (VTS).		Number of visas in place	Practices/ CLMC	March 2025	
CLMC (working with ICB, H&SH and a PCN) to hold a GP Trainees Conference to share the advantages of continuing to work in Tees with VTS graduates.		Feedback from the conference	CLMC	10/07/24	
	c) Options to increase nursing numbers (including strengthening training offers and uptake) be explored further.	Funded offer from the NHSE PCTH to create a PCN educational lead whose remit is to aide the PCN in increasing placements for all types of student learners. 1 PCN in Stockton signed up.	Increase in student placements numbers	PCN / PCTH	Funding end date – March 2025
PCTH training needs analysis undertaken annually to understand the current requirements within GP practices for workforce training (327 responders in 2024 for Tees compared to 305 in 2023). Training is then commissioned for nursing staff based on staff needs utilising NHSE Continuing Professional Development (CPD) funding. Training offers are distributed via weekly bulletins and bimonthly newsletters.		Increase in completion of Training Needs Analysis to strengthen training offers across the area.	Practices / PCTH	March 2025	

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		Ensure that National offers and suggestions are communicated to the workforce with options for local staff to join implementation and task and finish groups to support development of pre-programmes of work in area such as preceptorship programmes for newly qualified nursing staff.	Local nurse coverage on regional and national groups and implementation of new programmes of work to support the nursing agenda.	PCTH / PCNs	March 2025
9	The Borough's four PCNs be encouraged and supported to work together collaboratively to share and adopt good practice.	Continue to support shared learning between PCNs through the bi-monthly Hartlepool and Stockton (HaST) Clinical Directors (CD) Locality Meeting and the bi-monthly PCN CD Forum (all 14 PCNs in Tees).	Share learning	ICB	March 2025
		PCN 23/24 End of Year report to be published.	Report highlights ongoing development of PCNs, innovative ways of working and key successes achieved in 23/24	ICB	September 2024
		Continue to support collaborative working within PCNs as part of CAIP.	Number of PCNs achieving maximum CAIP funding	PCNs	March 2025
<b>Public / patient feedback</b>					
10	Relevant health stakeholders be proactive in encouraging involvement of patients in practice Patient Participation Groups (PPGs), aim to ensure these are representative of a practice's patient list demographic, and consider fostering links between the Borough's PPGs to assist in identifying / addressing any access issues.	Practices to continue efforts to encourage participation in PPGs.	Increased engagement from PPGs	Practices	March 2025
		Friends and Family Test (FFT) participation to be encouraged and results published on practice websites.	Increased FFT responses	Practices	March 2025
		Opportunistic information about PPGs disseminated through HealthWatch, Catalyst, community wellbeing champions and community spaces as part of ongoing	PPG messaging disseminated through key services and VCSE	ICB/ SBC public health	March 2025

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		discussions with service users. ICB to support development of a leaflet.			
11	NENC ICB consider its complaint / compliment reporting mechanisms so future data can be provided at a local general practice level.	ICB to review process to themes complaints/ compliments at a more granular level.	Data made available to local delivery team in Tees Valley	ICB	March 2025
		Themes from available data to be discussed as part of the Primary & Community Care Quality and Variation Group.	Feedback from the Primary & Community Care Quality and Variation Group	ICB	March 2025