

A partnership between:

East Leicestershire and Rutland CCG

West Leicestershire CCG

HEALTH OVERVIEW AND SCRUTINY COMMITTEE: 5 JUNE 2019**REPORT OF EAST LEICESTERSHIRE AND RUTLAND CCG AND WEST
LEICESTERSHIRE CCG****DEVELOPMENT OF PRIMARY CARE NETWORKS ACROSS
LEICESTER, LEICESTERSHIRE AND RUTLAND****Purpose of report**

1. The purpose of this report is to update the Health Overview and Scrutiny Committee with the progress of Primary Care Network (PCN) development across Leicester, Leicestershire and Rutland (LLR). The report will give a description of PCNs, their purpose and role and explain the progress that has been made towards forming PCNs across LLR.

Background**Description of Primary Care Networks**

2. A Primary Care Network is a group of GP practices that agree to work together with other practices in their local area to provide the care patients need, in better ways. By working together, it is expected they will be able to make resources go further and care for patients more creatively.
3. Each PCN will look after between 30,000 and 50,000 patients, but there may be some with more or less patients than that.
4. GP practices will remain independent. Patients will continue to be registered at their existing GP practice and it will still be the main point of contact for their care.
5. GP practices will work with other health, social care and voluntary sector professionals to plan and join up patients' care. These wider teams will include pharmacists, district nurses and specialists who care for certain types of conditions or groups of patients with particular needs.
6. PCNs will launch on 1 July 2019 and over time are expected to bring a number of benefits for patients:
 - Joined up services - everyone knows previous interactions;
 - Access to a wider range of professionals and diagnostics in the community - in a single appointment;

- Different ways of getting advice and treatment, including digital, telephone based and physical services, matched to their individual needs;
- Shorter waiting times and convenient appointments;
- Greater patient involvement in decisions about their care;
- Increased focus on prevention and personalised care.

7. Each primary care network will decide how it will provide care for its patients. For example, sometimes a health professional may work for a particular practice or will support patients in all practices in the PCN. There may also be times when a patient will receive their appointment at one of the other practices in the network – particularly if they have a non-urgent need or that practice specialises in an area of care they need.
8. A much wider team of health professionals is increasingly becoming involved in patients' care in GP practices. Through Primary Care Networks there will be more clinical pharmacists, physiotherapists, physician associates, community paramedics and social prescribing link workers.

Why Primary Care Networks are being created

9. Primary Care Networks are part of NHS England's Long Term Plan, published in January 2019. They have been put in place to improve and extend the range of care that is available in the community and join up the care that is provided from different organisations.

Role of PCNs in an Integrated Care System

10. In its Long Term Plan, NHS England made a commitment to deliver Integrated Care Systems (ICS) by April 2021. This means more collaborative system working between GP practices, health partners, social care, voluntary sector and local authorities. The purpose of an ICS is to build capability in the system and improve services at three levels:
 - System
 - Place
 - Neighbourhood (locality/network level)
11. PCNs will become the basis for neighbourhoods, defined populations and geographies, around which integrated care between local hospitals and local authorities, primary care, community health and the third sector, can be planned and delivered.
12. PCNs will be expected to play a significant role at all levels of the ICS:
 - Primary care networks will deliver integrated services to people in 'neighbourhoods', as the foundation of an effective health system;

- In 'places' (Local Authority boundaries), primary care will interact with hospitals and local authorities, working together to meet the population's needs (in some systems, federations could operate at the 'place' level to support primary care networks);
- At the system level (LLR), primary care as a provider will increasingly participate in system decision making. Networks create an opportunity for primary care to have a greater voice in both the design and delivery of 'place' based care with hospitals and local authorities, than may have been feasible historically in arrangement of individual separate practices.

13. The Clinical Directors of PCNs will play a critical role in shaping and supporting the ICS and ensuring GP practices are fully engaged in implementing the Long Term Plan. Through PCNs, practices will play an even greater part in the wider system than they have previously.

LLR PCN Development and Timetables

14. Primary Care Networks need to be established by 1 July 2019. The clinical commissioning groups have been supporting GP practices to form into PCNs and are in the final stages of agreeing them.
15. If they have been agreed before the Health Overview and Scrutiny Committee on 5 June, information will be provided either verbally or in writing on the day. If they have not been finalised, a separate briefing will be provided to the Committee at a later date.
16. PCN development has been supported by both CCGs and the Leicestershire and Rutland Local Medical Committee. GP Federations across both CCGs have also played a facilitative role, with particular focus on administration of some of the key PCN formation processes (e.g. election/appointment of PCN Accountable Clinical Director posts).

PCN funding

17. Much of the future of PCNs is yet undefined. By 2023/24, NHS England will make £891 million available to Primary Care. By 2023/24 this equates to a settlement of £726,000 new annual funding for a PCN with an average-weighted population of 50,000.
18. It is known that PCNs will receive new funding in three ways through a 'Network Contract':
- **Five new roles:** PCNs will each receive funding to put in place five roles: clinical pharmacist, social prescribing link worker, community paramedic, physiotherapist and physician associate. The scheme extends gradually. This reflects available supply and funding:

- in 2019 it starts with clinical pharmacists and social prescribing link workers only;
- in 2020 physician associates and first contact physiotherapists are added; and
- in 2021 it also includes first contact community paramedics.

- **Seven key priority areas:** Funding to carry out services in the seven key areas: structured medications review and optimisation, enhanced health in care homes, anticipatory care requirements for complex patients, personalised care, supporting early cancer diagnosis, CVD prevention and diagnosis, tackling neighbourhood inequalities.
- **New shared savings scheme:** PCNs are also expected to be able to benefit from a new 'shared savings' scheme resulting from system-wide efficiencies. For example, reducing avoidable A&E attendances, admissions and delayed discharge, streamlining patient pathways to reduce avoidable outpatient visits and preventing over-medication through pharmacist reviews.

19. In addition, two existing funding streams will transfer to PCNs in the future: extended access services and community-based services.

20. Full details relating to PCN funding is still to be published.

Patient engagement

21. During the summer of 2018, NHS England carried out a programme of engagement on the Long Term Plan, of which Primary Care Networks are a part.

22. The PCNs are being developed under very tight timescales. PCNs are expected to have engaged with their constituent Patient Participation Groups during their development to ensure patient views were taken into account.

23. The clinical commissioning groups in Leicester, Leicestershire and Rutland are embarking on a programme of engagement about the local primary care networks in June 2019, when they have been agreed. In February and April 2019 BBC Radio Leicester and BBC East Midlands featured Primary Care Networks and the range of health professionals that will be involved in patients' care.

24. Before making any changes to services, GP practices and primary care networks will be expected to engage with their patients. All GP practices should have a Patient Participation Group and they will continue to be involved in the running of the practice and the Primary Care Network going forward.

Next steps

25. The clinical commissioning groups are continuing to work with GP practices to finalise the development of the PCNs. Following this the CCGs will commence engagement and communication with local patients and stakeholders in June 2019 to

help them understand the changes and how they may be affected.

26. During 2019/20 the clinical commissioning groups will continue to support the PCNS as they develop and as more detail becomes available about what will be required in the future.

Background papers

NHS Long Term Plan – <https://www.longtermplan.nhs.uk/>

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