

Meeting: Primary Care Commissioning Committee			
Meeting Date	24 July 2019	Action	Receive
Item No.	7	Confidential	No
Title	Primary Care Networks- update		
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Executive Summary
This paper is to provide the Primary Care Commissioning Committee with a formal update on the progress of Primary Care Networks. It captures the actions taken since support for the submissions was granted in May 2019 and discusses the correspondence and challenge received from the Greater Manchester Health and Social Care Partnership.
Recommendations
It is recommended that the Primary Care Commissioning Committee: <ul style="list-style-type: none"> • Receive the report for information and note the next steps

Links to CCG Strategic Objectives	
To encourage people so that they want to, and do, take responsibility for their own health and well-being.	<input type="checkbox"/>
To drive and support system wide transformation.	<input checked="" type="checkbox"/>
To commission joined-up health and social care for people in Bury through a Single Commissioning Framework.	<input type="checkbox"/>
To achieve financial sustainability for the Bury health and social care economy.	<input type="checkbox"/>
To support the Locality Care Alliance to deliver high quality services in line with commissioner intentions.	<input type="checkbox"/>
To be a high-performing, well-run and respected organisation with an empowered workforce	<input type="checkbox"/>
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	
GBAF <i>[Insert Risk Number and Detail Here]</i>	

Implications						
Are there any quality, safeguarding or	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>

patient experience implications?						
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Has a Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is a Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

Governance and Reporting		
Meeting	Date	Outcome
N/A		

Primary Care Networks- Update

1. Introduction

- 1.1. This paper is to provide the Primary Care Commissioning Committee (the Committee) with a formal update on the progress of Primary Care Networks (PCNs). It captures the actions taken since support for the submissions was granted in May 2019 and highlights the next steps.

2. Background

- 2.1. The Committee considered and supported the creation of four PCNs on the 22 May 2019. The support was given after considering the requirements in the Network Contract Directed Enhanced Service- Contract Specification April 2019 (DES) and the strategic context within the locality.
- 2.2. The DES articulated a number of actions that needed to be undertaken. These are listed later in the paper, along with details on the current progress of these actions.
- 2.3. A number of correspondents have been exchanged between the commissioner and the GM Health and Social Care Partnership (GM H&SCP) with regards to the support given to the network footprints and the misalignment with the Bury neighbourhood model. The key themes of the correspondents and further actions are articulated later in the paper.
- 2.4. Bury has five neighbourhoods upon which the Locality Plan is based. The Prestwich and Whitefield and Unsworth Networks are co-terminus with their neighbourhoods. The Bury and Horizon Networks span the East, West and North neighbourhoods.

3. DES Requirements

- 3.1 The DES articulated the need for the following actions to take place prior 1 July 2019 (the contractual start date):
 - PCNs to complete their network agreement and ensure it is signed by all parties
 - PCNs to confirm their baseline workforce numbers
 - PCNs to have an appropriate data sharing agreement in place to support the delivery of the extended hours access services
 - PCNs to have in place a bank account held by a qualified provider
- 3.2 The Primary Care Team has received assurance that all of these actions have been completed.

4 GM H&SCP Requirements

- 4.1 Upon supporting the submissions for the PCNs the CCG was required to seek a pledge of support from the GM H&SCP. The GM H&SCP expressed concerns on how the PCNs would work with the emerging neighbourhood model of care. In particular the networks relationship with community services, the non-contiguous nature of the

footprints and the potential to disrupt integrated neighbourhoods.

- 4.2 A response was submitted based on the discussions that took place during the Committee meeting in May reflecting the technical aspects of the DES and the local context. The CCG was asked to further expand on the technical aspects, in particular around how contiguous boundaries are unachievable within Bury due to the practice boundaries of both Tower Family Practice and Rock Healthcare.
- 4.3 Following receipt of these insights the GM H&SCP has provided support to the decision made by the Committee but has challenged the CCG to demonstrate that the approved network footprints do not adversely impact on the neighbourhood model. This challenge involves articulating what success looks like, how it will be measured and demonstrating this during quarterly reviews. Failure to successfully respond to this challenge may result in the GM H&SCP withdrawing their support to the current network footprints and the instruction to realign the networks. The potential impact of this is significant as it has the potential to cause disengagement within general practice and destabilise the transformation programme.
- 4.4 In response to the challenge given an action plan is being developed between members of the OCO and the LCO recognising that success will only be achieved by whole system ownership. The action plan is currently in draft form but includes the following key components:
- Acceleration of the neighbourhood model including links into Public Sector Reform work
 - Clear operational processes in place between networks and neighbourhood models
 - A general practice engagement plan
 - Strengthening relationships between the CCG's Primary Care Team, the LCO neighbourhood management and project teams
 - Creating a memorandum of understanding between the OCO, LCO and the PCNs articulating how all parties will work together to ensure successful neighbourhood and network working including the alignment of resource and flexibility between national requirements and local approaches.

5 Actions Required

- 5.1 The Primary Care Commissioning Committee is required to:
- Receive the report and note the next steps

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