

Darlington Primary Care Network

Karen Hawkins – Director of Commissioning Strategy & Delivery – Primary Care

Dr Amanda Riley – Clinical Director Darlington Primary Care Network



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PRIMARY CARE NETWORKS (PCNs)

Investment & Evolution: 5yr Framework for GP Contract reform to implement the Long Term Plan

Investment and evolution:
A five-year framework for GP contract reform to implement *The NHS Long Term Plan*
31 January 2019

#NHSLongTermPlan
www.longtermplan.nhs.uk

Network Contract Direct Enhanced Service (DES)

Supporting enhanced service provision for care in the community.
Go live July 2019
All network contracts will be agreed at the same time to cover all practices with a signed network agreement (serving populations of 30-50 000) named Clinical Director for networks.
Funding to practices to participate in first year - weighted at £1.76/ patient. Significant additional funding will be available at network level in 2019 Primary Care tested programme will be launched from April 2020 - New Network Dashboard.
By April 2021 existing Extended Access Funds will join up to fund a single combined offer integral to the Network Contract DES.

Timelines to build the foundation - 2019/20



The Money

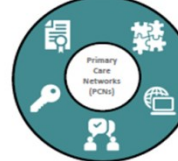
Phased increase in baseline GMS funding from 19/20 over 5 years
£1.30 / head transformation money for Network support from CCG general allocation
Additional funding GP PCN leadership support - c.23M/£20-50 000 for the accountable Clinical Director and additional funding towards new roles (see below)
From 21/22 the Extended Access DES and Improving Access to General Practice (£6 / head) will be combined to be part of the Network DES
Investment and Impact Fund (detail to follow) to help improve performance against metrics in the Network Dashboard. 'Shared savings' below (linked to reduction in activity)

- Avoidable A&E attendances
- Avoidable emergency admissions
- Timely hospital discharge
- Outpatient redesign
- Prescribing costs

Essencing mechanism linking investment & roles reimbursement from 20/21

Extending the offer - Addressing workload & delivering New Services (from 20/21)

Primary Care Networks as the building blocks for Integrated Care Systems by 2021.
New dashboard, New Investment & Impact Fund to cover structured medication review and optimisation, Enhanced care in Homes, Anticipatory care for high need patients (including MOT meetings), Personalised Care, Supporting early Cancer Diagnosis, CVD prevention and diagnosis, Tackling Neighbourhood inequalities Together "avoiding over-medicalising care".



Leadership

All Networks to have an Accountable Clinical Director / Strategic Leader
Time for Care National development programme
CCG support 'in kind' to develop and support emerging PCN teams

QOF changes from 04/19

28 indicators or 173 points (31%) going 100 points / 13 indicators covering:

- Reducing iatrogenic harm & improving outcomes in diabetes care
- Aligning BP control targets with NICE
- An age-appropriate cervical screening
- Pulmonary rehab for COPD
- Weight Mx for Serious Mental Illness health care
- Personalised care adjustment (74 points) to replace "exception reporting" and offer Quality Improvement modules in prescribing safety & End of Life Care (Review of medicines and immunisations in 2019 & Premises review in 2019)

Indemnity from 04/19

- New centrally funded Clinical Negligence Scheme for General Practice
- Covers all GPs and all other staff working in delivery of primary medical services and wider network services
- Includes Out of Hours provision
- No subscription
- Does not cover - complaints, disciplinary proceedings, GMC investigations, coroners inquests, private work.

Digital First

- By April 2019 Electronic ordering repeat Rx
- By July 2019 25% appointments booked online
- In 19/20 111 direct booking 1 appt/3000pt/day
- By April 2020 All patients will have online access to their full record and no fax machines in practices
- By April 2021 online & video consultations
- By April 2021 Extended Access DES & CCG commissioned Extended access service combined into Network Contract DES
- By 2021 Activity, capacity and waiting time data shared in the same way as hospital data currently

Workforce

- Voluntary 2 year fellowship programme for newly qualified nurses and doctors in primary care
- 70% cost reimbursement (recurrent):
 - 2019 - clinical pharmacists
 - 2020 - physician associates & first contact physios
 - 2021 - paramedics
- 100% cost reimbursement for one additional social prescribing link worker (from 2019)
- Primary Care Training hubs from 20/21
- Align mental health services with Primary Care Networks

What are Primary Care Networks

Core characteristics of a PCN:

- **Partnerships of Practices working together and with other local health and care providers – PCNs are not a legal entity or organisation**

PCNs are more than a collection of practices:

- Typically, a **defined patient population** of at least 30,000 to 50,000.
- Providing care in different ways to **match different people's needs**
- Focusing on **prevention of illness** and **personalised care**
- **Assess population health needs, making best use of collective resources**
- **Greater resilience, more sustainable workload**

Strategic View of our Area – PCNs

- **80 Practices**

- 11 Darlington
- 11 Hartlepool
- 21 Stockton
- 16 Redcar
- 21 Middlesbrough

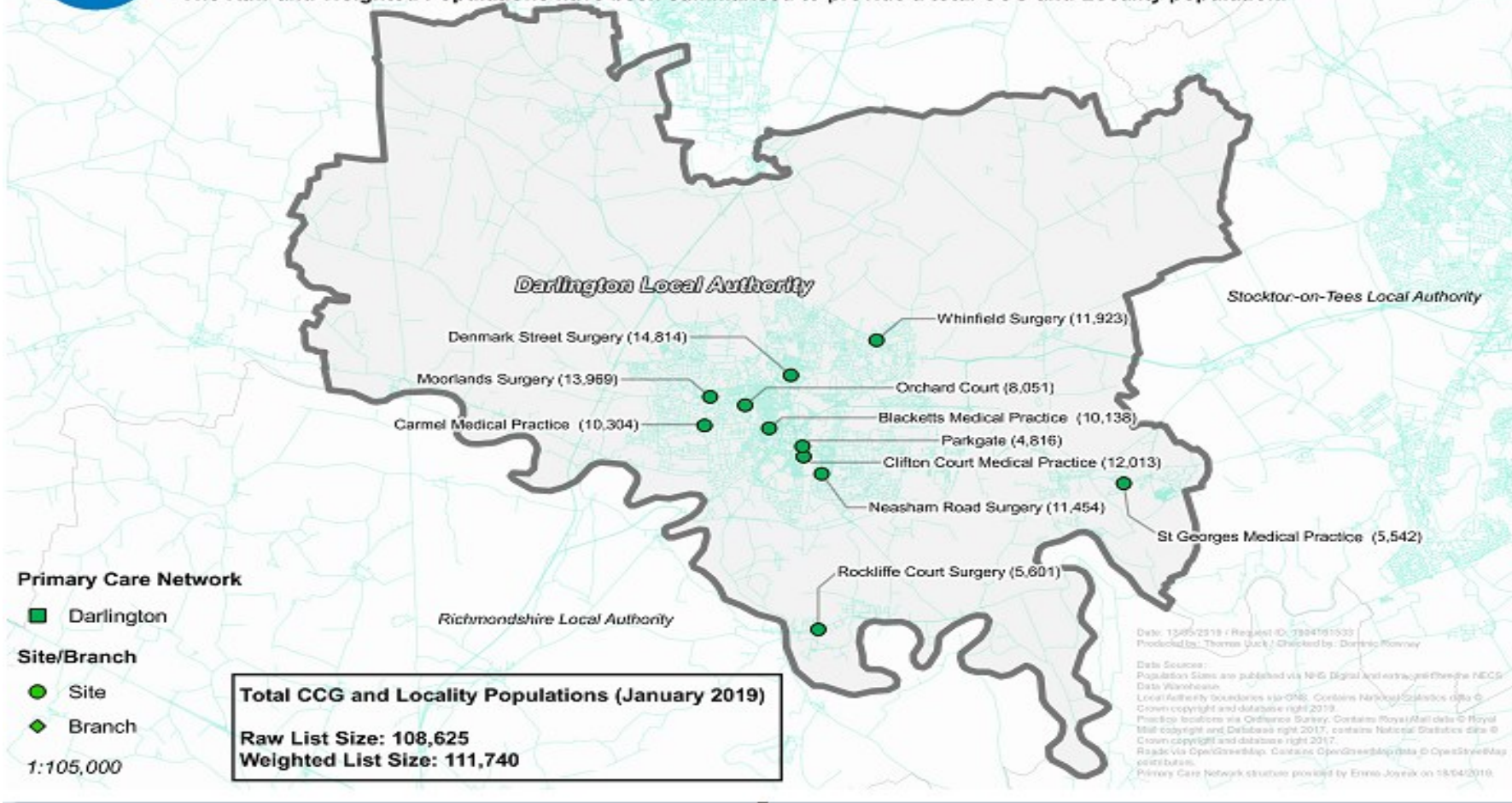
- **14 Networks – 15 Clinical Directors**

- 1 Darlington
- 3 Hartlepool
- 4 Stockton
- 3 Middlesbrough
- 3 Redcar



Darlington GP Practice Primary Care Network and Populations

The populations provided for each practice are the Raw List Size as of 1st January 2019 and are published via NHS Digital. The Raw and Weighted Populations have been summarised to provide a total CCG and Locality population.



Darlington PCN

Network [practice names]	Combined list size [as at 1st Jan 19']	Network Name	Named Clinical Director
Neasham Road Surgery	108,625	Darlington Primary Care Network	Dr Amanda Riley
Clifton Court Medical Practice			
Parkgate			
St Georges Medical Practice			
Denmark Street Surgery			
Whinfield Surgery			
Rockliffe Court Surgery			
Orchard Court			
Carmel Medical Practice			
Blacketts Medical Practice			
Moorlands Surgery			

Key Deliverables Primary Care Networks

Year	Service Specification	Requirement
2019/20	Extended Hours	From 1 st July – All networks to ensure improving access and deliver 100% population coverage of primary care outside of GP core practice hours (for a PCN with 50,000 registered patients this equates to a minimum of additional 25 hours per week)
2020/21	Structured Medications Review and Optimisation	Expansion of clinical pharmacists working in networks. Tackling over-medication of patients inappropriate use of antibiotics, withdrawing medicines no longer needed, as well as support medicines optimisation more widely
	Enhanced Health in Care Homes	All care homes will be supported by a consistent team of multi-disciplinary healthcare professionals delivering proactive and reactive care, led by named GPs and nurse practitioners, organised by the Primary Care Network
	Anticipatory Care	Introducing more proactive and intense care for patients assessed as being at high risk of unwarranted health outcomes including patients receiving palliative care. A structured programme of proactive care and support in which patients with multi-morbidities will have greater support– including longer GP consultations where appropriate - from the wider multidisciplinary team
	Personalised Care	Intended to avoid over-medicalising care, and ensure patients are asked by the primary care team “What matters to you?”, not just “What’s the matter with you?”
	Supporting Early Cancer Diagnosis	Working alongside the Cancer Alliances and other local partners, to have a key role in ensuring high and timely uptake of screening and case finding opportunities within their neighbourhoods

Key Deliverables Primary Care Networks (DES)

Year	Service Specification	Requirement
2021/22	CVD Prevention & Diagnosis	Better prevention, diagnosis and management of cardiovascular disease, role in realising NHS Long Term Plan ambition, principally through secondary prevention – further development of specification to be realised
	Tackling Neighbourhood Inequalities	To challenge tackling inequalities in health and healthcare. Testbed cluster being developed nationally seeking to work out what practical approaches have the greatest impact at the 30-50,000 neighbourhood level and can be implemented by Primary Care Networks - Further development of specification to be realised

Additional roles funded to support key deliverables

- 20,000 additional staff over next 3 years;
- Funding allocated on a capita basis;
- Funding is for new, not existing, posts

Year	Staffing	% Funding Available	Max Funding [£]
2019/20	Clinical Pharmacists	70%	£37,810
	Social Prescribing Link Workers	100%	£34,113
2020/21	Physician Associates	70%	TBC
	First Contact Physiotherapists	70%	TBC
	First Contact Community Paramedics	70%	TBC

The Wider Picture

- PCNs will be a partnership between
 - Primary Care
 - Community Services
 - Acute Care
 - Social Care
 - Public Health
 - Mental Health
 - The 3rd sector
 - Pharmacy/Dentistry/Optometrists
 - Healthwatch
 - Patient Groups



Next Steps

- Continue work and build upon New Models of Care work established under Healthy New Towns
- Governance in place through the NMoC meeting established now as a System Delivery and Design Group (SDDG) to ensure whole systems approach, although building on what was done
- Focus on population health priorities
- Focus on delivery of DES requirements

PCN Governance

- Executive committee
 - Every practice has a rep able to make decisions on behalf of the practice
 - Executive meets quarterly
- Elected Governing Board
 - Assists Clinical Director in development of PCN
 - Membership - Dr Helen McLeish, Prof Ahmet Fuat, Lucy Smith (practice manager), Mark Rose (Clinical practitioner- paramedic) and Chris McEwan (Lay member)
 - Important for PCN to move away from doctor only model to involve the wider team and patients

PCN Update

- Staff survey completed
- Stakeholder engagement taking place
- Patient engagement plan being developed with the practice PPGs at the centre
- Working with community and current providers in the field to develop a social prescriber service for those with chaotic lives who use multiple services regularly
- Planning to develop a pharmacist led care home prescription service with 1:1 medication reviews
- Joint up plan for attracting clinical staff to Darlington and Recruitment
- New HENE roles for the PCN 1 for cardiology and research and the other for frailty and leadership
- Working groups being set up to jointly tackle some longstanding issues with secondary/primary care communication/processes
- Working with public health to clearly define the population needs

Any Questions?