

**Primary Care Network Approval Process**

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**Primary Care Commissioning Committee meeting**

**18 April 2019**

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<b>Purpose of Paper</b>	
The purpose of this paper is to provide Primary Care Commissioning Committee (PCCC) with the proposed process and timescales to meet the requirements for the implementation of the Primary Care Network Directed Enhanced Service (DES)	
<b>Key Issues</b>	
<ul style="list-style-type: none"> <li>• Guidance published expects practices to come together in agreed PCNs that meet a number of stipulated requirements.</li> <li>• The CCG is required to confirm and approve PCNs in accordance with this guidance by 30 May 2019</li> <li>• The CCG with the Local Medical Committee and Primary Care Sheffield are taking proactive steps to support network development in time for this deadline</li> <li>• A process is proposed to review and confirm PCN applications</li> <li>• Arrangements are in place and ongoing to ensure 100% population coverage</li> </ul>	
<b>Is your report for Approval / Consideration / Noting</b>	
Approval	
<b>Recommendations / Action Required by the Primary Care Commissioning Committee</b>	
The Primary Care Commissioning Committee is asked to approve the proposals put forward in this paper to approve PCNs in Sheffield and to ensure 100% coverage is achieved by 30 May 2019.	
<b>Governing Body Assurance Framework</b>	
<b><i>Which of the CCG's objectives does this paper support?</i></b>	
<ol style="list-style-type: none"> <li>1. To improve patient experience and access to care</li> <li>2. To improve the quality and equality of healthcare in Sheffield</li> <li>4. To ensure there is a sustainable, affordable healthcare system in Sheffield</li> </ol>	
<b>Are there any Resource Implications (including Financial, Staffing etc)?</b>	
Resource will be allocated through DES and locally commissioned services contracts to PCNs, PCNS will be required to select a practice or other body to receive funding on their behalf, new staff will be employed through PCNs	

**Have you carried out an Equality Impact Assessment and is it attached?**

*Please attach if completed. Please explain if not, why not*  
Not required for this paper

***Have you involved patients, carers and the public in the preparation of the report?***

Not required for this paper

## **Primary Care Network Approval Process**

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#### **1. Introduction**

The purpose of this paper is to provide Primary Care Commissioning Committee (PCCC) with the proposed process and timescales to meet the requirements for the implementation of the Primary Care Network Directed Enhanced Service (DES), set out in the new GP Contract Framework and to provide assurance to PCCC on the progress made to date to support practices to develop networks.

#### **2. Background**

*'Investment and Evolution: A five-year framework for GP contract reform to implement the NHS long term plan'* was published in February 2019, this described changes to contracting and commissioning of primary medical services to support the objectives of the NHS Long Term Plan through new service models and the establishment of primary care networks (PCN) as the foundation for integrated care systems.

In March 2019, PCCC received information about the role of the PCN in supporting delivery of the NHS Long term plan and the anticipated requirements. Further supporting information together with the PCN DES have now been published.

#### **3. PCN Features and Strategic Fit in Sheffield**

The PCN seeks to enable the provision of integrated care outside of hospital by practices working together and with other local health and care providers, around natural local communities that geographically make sense, to provide coordinated care through integrated teams.

Sheffield has already embraced a neighbourhood approach to primary care, with practices as the core of primary and community service provision arranged around defined neighbourhood populations and geographies. This clearly aligns with the strategic direction of the Long Term Plan and the objectives of GP Contract Framework. In order to understand how PCNs will fit into the Sheffield strategy it is helpful to consider them as the collaborative framework for primary medical care which is overlain by an integrated and extended neighbourhood including community and voluntary sector services.

#### **4. Process for Establishing Networks in Sheffield**

The proposed process for establishing PCNs in Sheffield is set out below:

##### **4.1. Network Requirements**

The guidance expects practices to come together in agreed PCNs that meet a number of stipulated requirements. In Sheffield, these have been expressed as the following 'red lines' agreed with the Local Medical Committee:

- Population size - minimum 30,000 and max 100,000
- Geographically contiguous - no 'islands'
- 100% coverage for patients even if a practice chooses not to join a network

On the guidance currently available, it is considered highly unlikely that any PCN in Sheffield will be an exception to the minimum population requirement. The CCG and LMC have agreed arrangements to work jointly with practices and emerging PCNs to advise and mediate any emerging issues.

#### **4.2. PCN Registration Requirements by 15 May 2019**

The following registration requirements must be completed and submitted to the CCG Primary Care Team electronically by 15 May 2019, templates will be made available:

- Completed Registration Form
- Names & ODS codes of PCN member practices,
- PCN list size
- Name of Clinical Director
- Map showing the geographical area of the PCN
- Practice or provider that will receive/host PCN funding (must hold a GMS, PMS or APMS contract)
- Name of the PCN Clinical Director
- Outline mandated Network Agreement

#### **4.3. CCG Confirmation of Network Coverage by 30 May 2018**

The CCG will review the registration information for all PCNs together to ensure it meets the requirements set out at 4.2 and that full network coverage is achieved.

PCCC will receive a report on PCN agreement status and coverage at their meeting on 21 May 2019 and will be asked to approve variations to GMS, PMS and APMS contracts.

In the event that any PCNS do not meet the requirements or populations are not covered, the CCG and LMC will continue to work together with practices and networks to seek to reach resolution.

#### **4.4. Mandated Network Agreement Completed by 30 June 2019**

This sets out the structure and administration of the Network and how this will be managed and includes a set of schedules to be locally populated. Schedule 1 must be completed by 1 July 2019. The Agreement covers:

- data sharing agreement that must be in place to ensure payment and compliance with DES contractual requirements
- conflicts of interest
- intellectual property
- joining, leaving and expulsion from the PCN
- general obligations

PCS will offer support to PCNs to complete this documentation, if required as part of commissioned support from the CCG.

## **5. Actions Required by Each PCN Before 1 July 2019**

These actions have been identified and shared with neighbourhoods, PCS are visiting all localities to provide further information, advice and support:

- Recruit a Clinical Director
- Agree your named provider/practice nominated payee
- Complete the Network DES Registration form and submit by 15 May
- Commence work in your PCN on the completion of your full Network Agreement and Schedule 1
- Start to think about your additional roles
- Agree who will deliver Extended Hours and what this means for your PCN

## **6. Current Position and Actions to Date**

The CCG Primary Care Team are engaging with neighbourhoods to support discussions about PCN formation and maintain and understanding of progress and any emerging challenges.

The CCG is working jointly with the LMC and Primary Care Sheffield to provide support to general practices in this process, funding has been allocated to PCS to enable them to provide an ongoing offer of support to PCNs throughout this process. The three organisations have agreed and distributed clear communication to primary care to describe respective roles and responsibilities.

At present there are 16 neighbourhoods within the City, it is anticipated that 15 PCNs will be confirmed and that networks will change to reflect this. Neighbourhoods are working proactively to form PCNs and select clinical leadership by the 15 May. A small number of challenges have been identified – one neighbourhood at present is too small and there are four practices currently not aligned to a PCN. Actions to secure a positive resolution are being progressed.

In addition the CCG is working with NHS England to resolve a number of anomalies identified in the guidance specifically, the minimum size of a PCN, the approach for practices with branch sites in other PCNs, and the approach to commissioning social prescribing.

## **7. Action for Primary Care Commissioning Committee**

The Primary Care Commissioning Committee is asked to approve the proposals put forward in this paper to approve PCNs in Sheffield and to ensure 100% coverage is achieved by 30 May 2019

Paper prepared by: Abby Tebbs, Deputy Director of Strategic Commissioning and Planning

On behalf of: Nicki Doherty, Director of Care Outside of Hospital

Date: 11 April 2019