



Primary Care Networks

The first 4 months, the next 4 years

GP Partnership Review



- Workforce
- Workload
- Premises
- “High quality, stable and sustainable general practice”
- Partnership model



Purpose of PCNs

- Following the establishment of their structure of governance and administration, networks will be expected to begin service delivery.
- As the workforce expands and services reconfigure, networks may find a need for additional or restructured premises and infrastructure.
- Any additional work should be linked to additional funding. (BMA PCN Handbook)

A sustainable new way of working?



- Employing staff
- Human Resources
- Management support
- Administrative support
- Premises

Network Staff Funding



- Practices may choose to use the Network payment to cover the 30% salary cost. While in the first year this pot of funding should be more than enough to cover the 30% required, as the network workforce grows in future years, practices will need to consider additional funding options as the network payment may no longer cover its whole workforce contribution.
- Practices may each contribute an appropriate amount to the network to cover the 30% salary cost.

Year 1 example



- Social prescriber 100% reimbursable £34,113 (incl. on costs), £27,536 salary
- Actual costs for 8 sessions.
 - Salary £24,110
 - Travel/mobile phone/project cost **£1319**
 - Insurance/admin **£1571**
 - Management fee **£3000**
- Clinical Pharmacist 70% reimbursable £37,810 (Max salary £43,046)
- First Contact Physiotherapist
- Paramedics

Value Added Tax



- While the provision of healthcare services is exempt from VAT, the provision of healthcare and back-office staff is not and it is possible that under some structures this interpretation could apply.
- Seek expert legal and VAT advice on every employment arrangement.



Demands on £1.50 per head

- 30% salary contribution for staff
- HR function for each employable staff member
- Travel/mobile phone/project cost
- Insurance/admin
- Management fees
- Accountancy
- Legal fees
- VAT advice
- PCN admin support

Workload- Establishing PCN



- GPs
- Clinical Directors
- Practice Managers
 - Meetings
 - Organising PCN Board meetings
 - Supervision
 - HR functions
 - Staff contracts
 - Bank accounts and accounting
 - Lawyers

Service Delivery 2019/20



- Extended Hours (No ½ day closing)
- End of life care and prescribing audits (QoF)
- Employing Pharmacist
- Employing Social Prescriber
- “Further, faster” CCG offer
- PCN Matrix
- Other PCN initiatives

Workload 2020



- Extended hours
- From 2020 there will be the potential for additional funding for new services in line with the aims set out in the NHS Long Term Plan
- 1. Medications Review and Optimisation
- 2. An Enhanced Health in Care Homes Service
- 3. Anticipatory Care
- 4. Personalised Care
- 5. Supporting Early Cancer Diagnosis

Workload 2020 Part 2



- Network Dashboard
- Investment and Impact Fund
 - The purpose of the Investment and Impact Fund is to help PCNs plan and achieve better performance against metrics in the network dashboard.
 - avoidable A&E attendances
 - avoidable emergency admissions
 - timely hospital discharge
 - outpatient redesign
 - prescribing costs

Workload 2021



- By April 2021 we intend that the funding for the existing *Extended Hours Access DES* and for the wider CCG commissioned *extended access service* will fund a single, combined access offer as an integral part of the Network Contract DES, delivered to 100% of patients including through digital services like the NHS App.
- Transferring the £6 per patient funding under the GPFV Improving Access scheme to Networks.
- The CVD and inequalities requirements will start in 2021/22.

Premises



- Different models of current estate
 - GP ownership Cost Rent/ Notional Rent
 - Burden of maintenance backlog on GP
 - NHSPS
 - Burden of maintenance on company
 - CHP
 - Burden of maintenance on company
 - Joint Venture

The Wider System



- The PCN DES is a voluntary National contract for practices. It is mandatory for CCGs to get 100% coverage
- It is a GP contract for delivery of services
- Neighbourhoods are not PCNs
- Clinical Directors are employed to act on behalf of PCNs
- Role of CCG
- Role of Accountable Care Partnership (ACP/ICP)
- Role of Integrated Care System (ICS)

Some of the ACP and ICS Aims



- Left shift of services
- Prevention and health inequalities
- Creating facilitator posts to co-ordinate and work across Networks
- Research active in every PCN
- MCP/ICP/ICT

Some other bits



- Quality and Outcomes Framework
- 111 booking
- Training the new workforce
- More Training practices required

Support for individual practices



- GPFV money Resilience/ GP retention
- PMS/GMS equalisation

South Yorkshire and Bassetlaw		
	19/20	20/21
	allocation	ring-fenced allocation
Practice Resilience	£211,302	£223,280
GP Retention	£335,400	£334,920
Reception and Clerical	£262,904	£262,432
Online Consultation	£428,890	£417,000
Practice Nursing	-	£111,640
Total	£1,238,496	£1,349,272