

**Report to the Somerset Primary Care Commissioning Committee Meeting on 29
September 2021**

Title: Primary Care Networks Update	Enclosure E
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Version Number / Status:	V1.1
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Summary and Purpose of Paper

An update on the development of Primary Care Networks and changes to the PCN Directed Enhanced Service.

Recommendations and next steps

The Primary Care Commissioning Committee is asked to note the update.

Impact Assessments – key issues identified

Equality	No impact identified			
Quality	No impact identified			
Privacy	No impact identified			
Engagement	No impact identified			
Financial / Resource	No impact identified			
Governance or Legal	No governance or legal risks			
Risk Description	Not applicable			
Risk Rating	Consequence	Likelihood	RAG Rating	GBAF Ref

PRIMARY CARE NETWORKS UPDATE

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1 Introduction

1.1 Primary Care Networks (PCNs) have been in existence since 2019, forming a new type of primary care collaborative structure and delivering many of the primary care elements of the NHS Long Term Plan

1.2 The Committee is asked to note the progress of Primary Care Networks in Somerset and recent changes to the contractual framework.

2 Current Participation

2.1 63 of our 64 practices are now participating in the PCN Directed Enhanced Service, a participation rate of 98.4%. Only West Coker surgery remains a non-participant in the voluntary PCN DES; Yeovil PCN provides Network services to the patients of West Coker Surgery.

3 PCN development through the Covid Pandemic

3.1 The initial priorities for PCNs as set out in the PCN DES were:

1. Structured Medication Reviews
2. Enhanced Health in Care Homes
3. Early Cancer Diagnosis
4. Anticipatory Care
5. Personalised Care
6. Cardiovascular Disease (CVD) Prevention and Treatment
7. Health Inequalities

The Somerset system has embraced PCNs as a key part of the Neighbourhood approach to integrated care. There are 12 Neighbourhoods which are coterminous with PCNs with the exception of East Mendip Neighbourhood which contains 2 PCNs- Frome and Mendip.

3.2 The pandemic brought significant challenges to PCNs, including the need to support collaborative responses and mutual aid. Several PCNs set up distinct Covid Hot Hubs while other PCNs supported practices to segregate patients safely. The mass vaccination programme also drew heavily on PCNs, particularly in terms of local clinical leadership. Although the vaccination programme is, and remains, a significant local challenge, PCNs helped primary care to deliver the majority of the 827,328 vaccinations given in Somerset up to 29 August.

3.3 The CCG has developed an assurance framework for the PCN DES contract and has already undertaken an assurance visit to one PCN. It

is expected that a rolling programme of assurance visits will be undertaken in a similar way to the existing assurance framework for General Practice.

4 Changes to the PCN specification and expected timescales

4.1 The CCG has been supporting PCNs to develop and deliver both core requirements of the PCN DES but also additional primary care resilience and sustainability benefits as well as the wider integrated care agenda. We have also developed an assurance framework to ensure that each PCN is delivering the core requirements of the DES.

4.2 National guidance was produced on 24 August, which confirmed that:

- An additional £43m will be made available nationally for Clinical Director leadership capacity
- The remaining PCN DES specifications deferred or revised:
 - CVD - now focus on hypertension only for 21/22
 - Health inequalities - deferred until April 22
 - Anticipatory care - deferred until September 22
 - Personalised care - deferred until April 22
- Instead there will be five new 'areas of focus' covering the next 18 months:
 1. Improving prevention and reducing health inequalities
 2. Improving proactive primary care
 3. Improving access to GP services
 4. Improving medicines management
 5. Supporting a more sustainable NHS
- Investment and Impact Funding (IIF) and business rules are confirmed up to the end of 2022/23 – The IIF will now primarily support the five areas of focus. IIF is an incentive scheme for PCNs similar to the QOF incentive scheme for individual practices. IIF Incentive funding received by PCNs is used to invest in clinical services priorities determined by each PCN.

5 Conclusion

5.1 PCNs in Somerset continue to develop and will have an important role to play in the Integrated care System. The CCG will continue to provide support, contract management and assurance. We welcome the certainty provided by the new national guidance on priorities to the end of 2022/3.

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