

Primary Care Commissioning Committee

Date: 25th June, 2019

Time: 9:00am-11.05am

Location: Vassall Centre, Gill Avenue, Bristol, BS16 2QQ

Agenda number: 6

Report title: Primary Care Networks (PCN) in BNSSG

Report Author: Nick Goff, Assistant Contract Manager, Primary Care, BNSSG CCG and Jenny Bowker, Head of Primary Care Development, BNSSG CCG

Report Sponsor: Martin Jones, Medical Director, Commissioning & Primary Care

1. Purpose

To provide an update to the Primary Care Commissioning Committee (PCCC) on the application, assurance and registration process for Primary Care Networks within BNSSG and to make recommendations about the authorisation of each Primary Care Network.

2. Recommendations

The Committee is asked to support the recommendations proposed for the PCN applications and support delegated decision making as proposed for Weston and Worle, Gordano Mendip and Affinity PCNs. The Committee is asked to note the next steps.

3. Executive Summary

The paper gives an overview of the application and assurance process to establish Primary Care Networks for BNSSG. The paper makes recommendations for the authorisation of the PCNs and identifies next steps to support PCN commencement from 1st July and to support the development of PCNs beyond this.

4. Financial resource implications

Provision has been made in budget setting for this year to support the costs of the Primary Care Networks. Each Primary Care Network has received an indicative financial statement based on its application and list size. The cost of the Primary Care Networks will feature in finance reports to the Committee.



5. Legal implications

The CCG has followed national guidance on the establishment of PCNs for BNSSG.

6. Risk implications

A Governing Body and Commissioning Executive joint seminar considered the opportunities for PCNs in our system and some of the key risks. These are set out more fully in the main report.

7. Implications for health inequalities

There are no specific implications for health inequalities highlighted in this paper. It is anticipated that there will be full coverage of the population within Primary Care Networks. The aim of PCNs is to provide localised population health planning and this should therefore help to address health inequalities.

8. Implications for equalities (Black and Other Minority Ethnic/Disability/Age Issues)

There are no specific implications for equalities highlighted within this paper.

9. Implications for Public Involvement

A patient and public involvement plan is in place to support the refresh of the primary care strategy and this includes the development of PCNs within its scope.

Agenda item: 6

Report title: Primary Care Networks (PCN) in BNSSG

1. Purpose

To provide an update to the Primary Care Commissioning Committee (PCCC) on the application, assurance and registration process for Primary Care Networks within BNSSG and to make recommendations about the authorisation of each Primary Care Network.

2. Background

In the NHS long Term Plan, Primary Care Networks (PCNs) are outlined as an essential building block of every Integrated Care System. A PCN consists of groups of general practices working together with a range of local providers, including across primary care, community services, social care and the voluntary sector, to offer personalised, coordinated health and social care to their local populations.

Over the coming years PCNs will be supported in developing an expanded primary care team, with member practices also working alongside other organisations such as community providers and the voluntary sector, in order to help alleviate workload pressures on practices and allow GPs to concentrate on the most complex patients. The national guidance recommended population sizes of between 30,000 to 50,000. However, it was clear that whilst the 30,000 was a minimum threshold, 50,000 as a maximum was a guide and larger PCNs could be supported where this makes sense for local populations. Locally the CCG and LMC agreed some key principles to reflect the need to ensure PCN configurations best meet the needs of our population and best support system-wide working. These are set out below:

- Serving the local population in a way that makes sense for that population
- Be contiguous, with no practice being left behind
- No smaller than 30,000 but bigger than 50,000 where locally agreed
- Participate fully as a core part of the wider locality

These principles were shared with practices in a series of road shows held in April and as part of FAQs shared with all practices.

General practice takes the leading role in every Primary Care Network under the Network Contract Directed Enhanced Service (DES). The DES specification sets out the requirements on GP practices signing up to the Network Contract DES. The DES contract commences in July 2019 and practices will receive 9 months reimbursement in 2019/20.

BNSSG Commissioners and Avon LMC have worked in partnership to support GP practice PCN formations and to ensure there is 100 per cent geographical coverage across the BNSSG

area. The deadline for registration was 15th May. 18 PCN applications were received. All practices were covered within these applications and no PCN application is below the nationally set 30,000 population minimum threshold.

3. Application and Assurance Process

The Investment and Evolution: A five-year framework for GP (January, 2019), commits to 100% geographical coverage of the Network Contract DES by 1st July 2019. To fulfil this commitment BNSSG CCG and Avon LMC have adhered to the following timeline:

Month	Process
April 2019	GP Contract workshops held, co-led by BNSSG and Avon LMC, to outline the application process.
May 2019	<p>15th May - PCN submit registration information to CCG .</p> <p>20th May – A review of registrations at an assurance meeting between CCG Area Directors and LMC representatives.</p> <p>23rd May – Executive Team review of applications</p> <p>28th May – PCCC Closed session discussion of PCN application progress</p> <p>31st May – Confirmation provided to PCNs on whether the registration requirements have been met. CCG Contracts team prepare variations to GMS, PMS and APMS contracts for practice signature.</p>
June 2019	<p>12th June – CCG deadline to work with individual PCNs to address and resolve any implementation concerns.</p> <p>25th June – PCCC Open session meeting to approve PCN applications</p> <p>30th June – All PCNs complete the schedule to the Network Agreement and confirm to BNSSG CCG that the completed Network Agreement has been signed by all GP practices in the PCN.</p>
July 2019 – March 2020	<p>National Entitlement under the 2019/20 Network Contract start:</p> <ul style="list-style-type: none"> - Year 1 of the additional workforce reimbursement

	scheme - Extended Access provision from PCNs
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As part of the assurance meeting, held on 20th May, the following questions were considered:

- Does the PCN serve the local population in a way that makes sense?
- Are the PCNs contiguous and ensure no practice is left behind?
- Is the PCN size suitable for the population and in line with Network DES guidance?
- Does the formation of the PCNs allow for full participation in the locality model of working?
- Does each PCN have a named Clinical Director?
- Is there a financial agreement in place to ensure a single practice or provider will receive funding on behalf of the PCN?

• PCN Applications and Implementation Considerations

As highlighted in the timeline above, on 20th May, the LMC and CCG Area Colleagues met to review the PCN applications as part of an assurance process. Appendix 1 is a map of the proposals as prepared by the South, Central and West Commissioning Support Unit Mapping Team. Letters were sent to all PCN Clinical Directors on 31st May confirming the status of their authorisation. Fourteen of the PCNs met the criteria in full at this time. Four PCNs were authorised in principle and asked to submit further assurance by 14th June. These were:

- Orchard, Downend, Green Valleys, Three Shires – required nomination of a PCN Clinical Director
- Gordano Mendip PCN and Weston and Worle PCNs – required a Memorandum of Understanding (MOU) documenting how the two PCNs will work together to ensure the patient populations of St George's and Riverside GP practices benefit from access to common PCN services and integrated working with other providers
- Affinity PCN – required further assurance with regards to the PCN Clinical Director role and confirmation of the resilience of the PCN Clinical Director arrangements which it was proposed was fulfilled by a job share between single handed contractor GP partners.

As a consequence of this Orchard, Downend, Green Valleys, Three Shires PCN submitted the named PCN Clinical Director for their PCN. It is now recommended that this PCN is fully authorised, subject to confirmation of a signed network agreement and data sharing agreement.

The working arrangements between Gordano Mendip PCN and West and Worle PCNs are still under review and we seek delegation from the Committee to Julia Ross, Chief Executive and Colin Bradbury, Area Director to confirm full authorisation.

Further work is required to seek full assurance in relation to PCN Clinical Director arrangements for the Affinity PCN and delegation to Justine Rawlings, Area Director or Martin Jones, Medical Director, and Julia Ross is sought from the Committee.

We seek to conclude these discussions by Thursday 27th June in order that these PCNs can be authorised from 1st July 2019.

Table 1 overleaf sets out the proposed authorisation recommendation for each of the PCNs.

Table 1

PCN	List size	Locality	Practice Code	Practice Name	PCN Lead	Nominated Financial Practice	PCN Principles Contiguous Boundary	PCN Principles 30-50,000 or greater if approved locally	PCN Principles Makes sense to a) its constituent practices b) to other community providers c) to its local community	Recommendation
FABB - Beechwood, Air Balloon, Fishponds	37,608	Inner City and East	L81013	Fishponds Family Practice	Dr David Porteous	Beechwood Medical Practice	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81038	Air Balloon Surgery						
			L81087	Beechwood Medical Practice						
FOSS - Fireclay and Old School PCN	43,173	Inner City and East	L81062	Fireclay Health	Dr Katrina Boutin	Old School Surgery	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81075	The Old School Surgery						
Bristol Inner City PCN	81,009	Inner City and East	L81012	Montpelier Health Centre	Dr Wil Klinkenberg	The Wellspring Surgery	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81023	Eastville Medical Practice						
			L81061	The Wellspring Surgery						
			Y02578	Broadmead Medical Centre						
			L81089	Lawrence Hill Health Centre						
			Y02873	Compass Health						
			L81015	Charlotte Keel Medical Practice						
			L81648	Maytrees Medical Practice						

Bridge View PCN	37,234	South Bristol	L81007	Bridge View Medical	Dr Dolores Weil	Bridge View Medical	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
Connexus PCN	53,238	South Bristol	L81084	Priory Surgery	Dr Caroline Perkins and Dr Claire Rowell	Stockwood Medical Practice	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81120	Birchwood Medical Practice						
			L81125	Wells Road Surgery						
			L81009	Stockwood Medical Centre						
			L81033	Nightingale Valley Practice						
Swift PCN	75,867	South Bristol	L81031	The Armada Family Practice	Dr Sheila Pieterston	Crest Family Practice	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81041	Hillview Family Practice						
			L81053	The Lennard Surgery						
			L81054	Grange Road Surgery						
			L81082	Bedminster Family Practice						
			L81083	Hartwood Healthcare						
			L81094	The Merrywood Practice						
			L81095	The Crest Family Practice						
Affinity PCN	45,759	North & West	L81017	Westbury On Trym Primary Care Centre	TBC	Westbury On Trym Primary Care Centre	Yes	Yes	a) Yes b) Yes c) Yes	Approved in principle The leadership proposal has now changed putting this PCN's authorisation at higher risk. The CCG is working with the PCN to resolve this by 27 th June
			L81077	Sea Mills Surgery						
			L81098	Greenway Community Practice						
			L81131	Falldon Way Medical Centre						
			L81622	Helios Medical Centre						
			L81669	Monks Park Surgery						
HealthWest PCN	69,568	North & West	L81081	Pembroke Road Surgery	Dr Lee Salkeld	Pembroke Road Surgery	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81090	The Family Practice						
			L81091	Whiteladies Medical Group						



			L81133	Student Health Service						network agreement
Northern Arc	42,681	North & West	L81008	Shirehampton Group Practice	Dr Daniel Hirsch	Shirehampton Group Practice	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81037	Pioneer Medical Group						
			L81067	Southmead & Henbury Family Practice						
Phoenix PCN	45,782	North & West & South Glos	L81078	Gloucester Road Medical Centre	Dr Michelle Jones and Dr Tom Pelly	Gloucester Road Medical Centre	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81112	Bishopston Medical Practice						
			L81022	Horfield Hc						
			L81028	Northville Family Practice						
4PCC	52,720	South Gloucestershire	L81050	Close Farm Surgery	Dr Neil Kerfoot	Kingswood Health Centre	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81063	Kingswood Health Centre						
			L81079	Hanham Health						
			L81130	Cadbury Heath Healthcare						
Severnvale PCN	31,407	South Gloucestershire	L81018	Thornbury Health Centre - Burney	Dr Gregory Clarke	Severn View Family Practice	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81103	St Mary Street Surgery						
			L81106	Streamside Surgery						
			L81117	Pilning Surgery						
			L81127	Almondsbury Surgery						
Stokes PCN	56,672	South Gloucestershire	L81019	Concord Medical Centre	Dr Peter Young	Stokes PCN	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81036	Coniston Medical Practice						
			L81118	Stoke Gifford Medical Centre						
			L81649	Bradley Stoke Surgery						
Yate and Frampton PCN	57,115	South Gloucestershire	L81014	Frome Valley Medical Centre	Dr Sam Davies	West Walk Surgery	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81024	Courtside Surgery						
			L81042	Kennedy Way Surgery						
			L81047	West Walk Surgery						



Orchard, Downend, Green Valleys, Three Shires	68,810	South Gloucestershire	L81642	Wellington Road Surgery	Dr Richard Berkley	Orchard Medical Centre	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
			L81026	The Downend Health Group						
			L81029	Three Shires Medical Practice						
			L81046	Leap Valley Medical Centre						
			L81055	Orchard Medical Centre						
			L81632	Emersons Green Medical Centre						
Gordano Mendip PCN	95,408	Woodspring	L81085	Heywood Family Practice	Dr Shruti Patel	Mendip Vale Medical Group	Yes	Yes	a) Yes b) Yes c) Yes	Approved in principle, subject to CCG assurance of working arrangements between Gordano and Mendip PCN and West and Worle PCNs. The CCG is working with the PCNs to resolve this by 27 th June
			L81086	Mendip Vale Medical Practice						
			L81600	Harbourside Family Practice						
			L81040	Clevedon Medical Centre						
			L81004	Portishead Medical Group						
Tyntesfield Medical Group	32,376	Woodspring	L81034	Tyntesfield Medical Group	Dr Sarah Pepper	Tyntesfield Medical Group	Yes	Yes	a) Yes b) Yes c) Yes	Approved, subject to 30 th June confirmation of signed data sharing agreement and signed network agreement
Pier Health PCN	101,534	Weston & Worle	L81016	Graham Road Surgery	Dr John Heather	New Court Surgery	Yes	Yes	a) Yes b) Yes c) Yes	Approved in principle, subject to CCG assurance of working arrangements between Gordano and Mendip PCN and West and Worle PCNs. The CCG is working with the PCNs to resolve this by 27 th June
			L81021	Winscombe Surgery						
			L81043	Longton Grove Surgery						
			L81044	Tudor Lodge Surgery						
			L81051	New Court Surgery						

			L81058	The Milton Surgery						
			L81066	Stafford Medical Group						
			L81643	The Cedars Surgery						
			L81670	Horizon Health						
			L81119	Clarence Park Surgery						



4. Next Steps

Practices have been asked to ensure the following steps are undertaken by 30th June:

- Confirmation to the CCG that a signed network agreement is in place by 30th June
- Data sharing arrangements are in place to support the delivery of Extended Hours access

These will be confirmed by the primary care contracting team and reminders have been sent to all PCNs. Failure to provide these could lead to a PCN not being fully authorised and having to wait until quarter 2 to be authorised for commencement. An optional national data sharing agreement is being developed by NHSE but has yet to be published.

The Committee is also asked to note the following next steps to support continued PCN development:

- The CCG is currently completing a workforce baseline assessment following guidance from NHSE and verifying practice workforce baselines
- The CCG has issued the updated DES specification guidance to PCNs
- A launch meeting has been set up with PCN clinical directors on June 25th to discuss and agree how we develop and support the PCNs, and how we can make the most of connections with partners to support system-wide working. This will discuss approaches to social prescribing and making the most of the workforce within our system.
- The primary care development team working with the Area Team and system partners will develop a PCN development plan - this will also form a key part of the primary care strategy refresh to be completed by September. A key component of this will be organisational development support. A national prospectus to support organisational development of PCNs is due to be published in July together with a national self-assessment matrix for PCNs.

5. Recommendation

The Committee is asked to support the recommendations proposed for the PCN applications and support delegated decision making as proposed for Weston and Worle, Gordano Mendip and Affinity PCNs. The Committee is asked to note the next steps.

6. Financial resource implications

Provision has been made in budget setting for this year to support the costs of the Primary Care Networks. Each Primary Care Network has received an indicative financial statement based on its application and list size. The cost of the Primary Care Networks will feature in finance reports to the Committee.

7. Legal implications

The CCG has followed national guidance on the establishment of PCNs for BNSSG.

8. Risk implications

A Governing Body and Commissioning Executive joint seminar considered the opportunities for PCNs in our system and some of the key risks. Key risks include recruitment of workforce and ensuring that recruitment to support PCNs is enabled in a way that doesn't risk workforce resilience in other parts of the system. Mitigations to this include working with other providers, sharing roles and considering rotational posts.

Other key risks that were identified included time and resource to deliver in a context of our system's ambitions for developing new models of care, relationship breakdown and inconsistency in provision across 18 PCNs. Mitigations to these include building on the strengths of our localities, supporting provider alliances and facilitating open communication between PCNs, localities and the CCG. The risks and mitigations will be incorporated into our PCN development plan.

10. Implications for health inequalities

There are no specific implications for health inequalities highlighted in this paper. It is anticipated that there will be full coverage of the population within Primary Care Networks. The aim of PCNs is to provide localised population health planning and this should therefore help to address health inequalities.

11. Implications for equalities (Black and Other Minority Ethnic/Disability/Age Issues)

There are no specific implications for equalities highlighted within this paper.

12. Consultation and Communication including Public Involvement

A patient and public involvement plan is in place to support the refresh of the primary care strategy and this includes the development of PCNs within its scope.

Report Author: Nick Goff, Assistant Contract Manager, Primary Care, BNSSG CCG and Jenny Bowker, Head of Primary Care Development, BNSSG CCG

Report Sponsor: Martin Jones, Medical Director – Commissioning and Primary Care

Appendices

Appendix 1 - Emerging Primary Care Networks Maps.

Glossary of terms and abbreviations

BNSSG	Bristol, North Somerset and South Gloucestershire
CCG	Clinical Commissioning Group
DES	Directed Enhanced Service
LMC	Local Medical Committee
PCCC	Primary Care Commissioning Committee
PCN	Primary Care Network

Appendix 1: Emerging Primary Care Networks Maps.

