



City of Westminster



THE ROYAL BOROUGH OF
KENSINGTON
AND CHELSEA

Westminster Health & Wellbeing Board

RBKC Health & Wellbeing Board

Date:	Thursday 10 th October
Classification:	General Release
Title:	West London CCG: Primary Care Network Development
Report of:	Health & Wellbeing Board
Wards Involved:	West London CCG area (Royal Borough of Kensington and Chelsea and Queens Park and Paddington area of Westminster).
Financial Summary:	N/A
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1. Executive Summary

- 1.1 This Report provides an update on Primary Care Network (PCN) Development in West London CCG.

2. Key Matters for the Board

- 2.1 The Health and Wellbeing Board are invited to note the update on PCN development.

3. Background

- 3.1 During 2018/19, West London CCG developed and monitored a bespoke local process in order to support the development of PCNs. This involved delivery of a PCN Development Plan which had the following main objectives;

- Establish PCN membership, leadership and collaborative working
- Engage effectively and support the development of the Integrated Community Team
- To achieve 100% PCN population coverage of Out of Hospital Services (OOHS)
- Identify and create plan for delivery of a PCN “local objective”

3.2 In March 2019 NHS England published guidance regarding a new national contract for PCNs - the Network Contract Directed Enhanced Service (DES) with a go-live date of 1st July 2019. The guidance included a service specification and detailed the process which any group of practices interested in participating would need to follow. This included a Registration Form and Network Agreement which sets out how practices and partners (e.g. NHS Providers, Local Authority, and Voluntary sector) agree to work together.

3.3 In order for PCNs to begin delivering the Network Contract D E S from 1st July an assurance process was undertaken by the CCG to confirm the configuration of practices within each Network. At June’s Primary Care Commissioning Committee, all 5 PCNs were recommended for approval to be submitted to NWL Health and Care Partnership for endorsement. The final confirmed configurations are included for reference as Appendix A.

3.4 Since July, the PCNs have begun delivery of the Network Contract DES. This includes a range of requirements including the provision of appointments outside of core hours (0800-1830 Monday to Friday) for patients across the Network. 2019/20 is predominantly viewed as a preparatory year in order to ensure readiness to deliver new service specifications from April 2020. The new service specifications to be implemented during 2020/21 and 2021/22 are as follows;

- Structured Medications Review and Optimisation;
- Enhanced Health in Care Homes, to implement the vanguard model;
- Anticipatory Care requirements for high need patients typically experiencing several long term conditions, joint with community services;
- Personalised Care, to implement the NHS Comprehensive Model;
- Supporting Early Cancer Diagnosis;
- CVD Prevention and Diagnosis; and
- Tackling Neighbourhood Inequalities.

3.5 Across NWL, local expectations have been established for PCNs which are based upon seven keystones for development;

- Developing relationships and leadership to create a strong ICP
- Understanding our population – and improving the way we care for them
- Continuous Quality Improvement and reducing variation
- Improving the health of NWL population in key priority areas
- Being financially sustainable and resilient
- Optimising our workforce’s skills and assets
- Maximising digital opportunities

3.6 Each PCN has been asked to undertake a self-assessment using the NHSE Maturity Matrix (Appendix B) which outlines expectations at both a PCN and System-level in order to establish its development needs for the year ahead.

3.7 Using the outputs from this self-assessment, PCN development plans have been formulated which set-out how transformation funds will be used to make the changes required.

3.8 Each PCN will be expected to identify a Health and Care Partnership priority for service improvement in order to build their development plans from the list below:

- Urgent Care
- Outpatient Care
- Supporting people with frailty
- Diabetes
- Last Phase of Life and Enhanced Health in Care Homes
- Cardio Vascular disease and Respiratory disease
- Personalisation
- Mental Health
- Cancer
- Children's Health
- Musculoskeletal Health

3.9 PCNs will increasingly need to work with other non-GP providers, as part of collaborative primary care networks, in order to offer their local populations more personalised, coordinated health and social care.

4. Options / Considerations

4.1 The Health and Wellbeing Board is asked to consider how effective service integration across primary and community services can most effectively be achieved across PCN footprints in the future.

4.2 The Health and Wellbeing Board is asked to consider how PCNs can be supported in their development.

5. Legal Implications

5.1 No legal implications as a result of this paper.

6. Financial Implications

6.1 No financial implications as a result of this paper.

If you have any queries about this Report or wish to inspect any of the Background Papers please contact:

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APPENDICES:

Appendix A: WLCCG PCN Configurations

Appendix B: PCN Maturity Matrix 2019-20

BACKGROUND PAPERS:

Investment and evolution: A five-year framework for GP contract reform to implement The NHS Long Term Plan (NHS England, 2019)

<https://www.england.nhs.uk/wp-content/uploads/2019/01/gp-contract-2019.pdf>