



Better care together

Leicester, Leicestershire & Rutland health and social care



*'It's about our life, our health,
our care, our family and
our community'*



Primary Care Network Development in LLR

Leicestershire Health and Wellbeing
Board

28th November 2019

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Agenda Item 5



The Leicester, Leicestershire and Rutland Integrated Care System

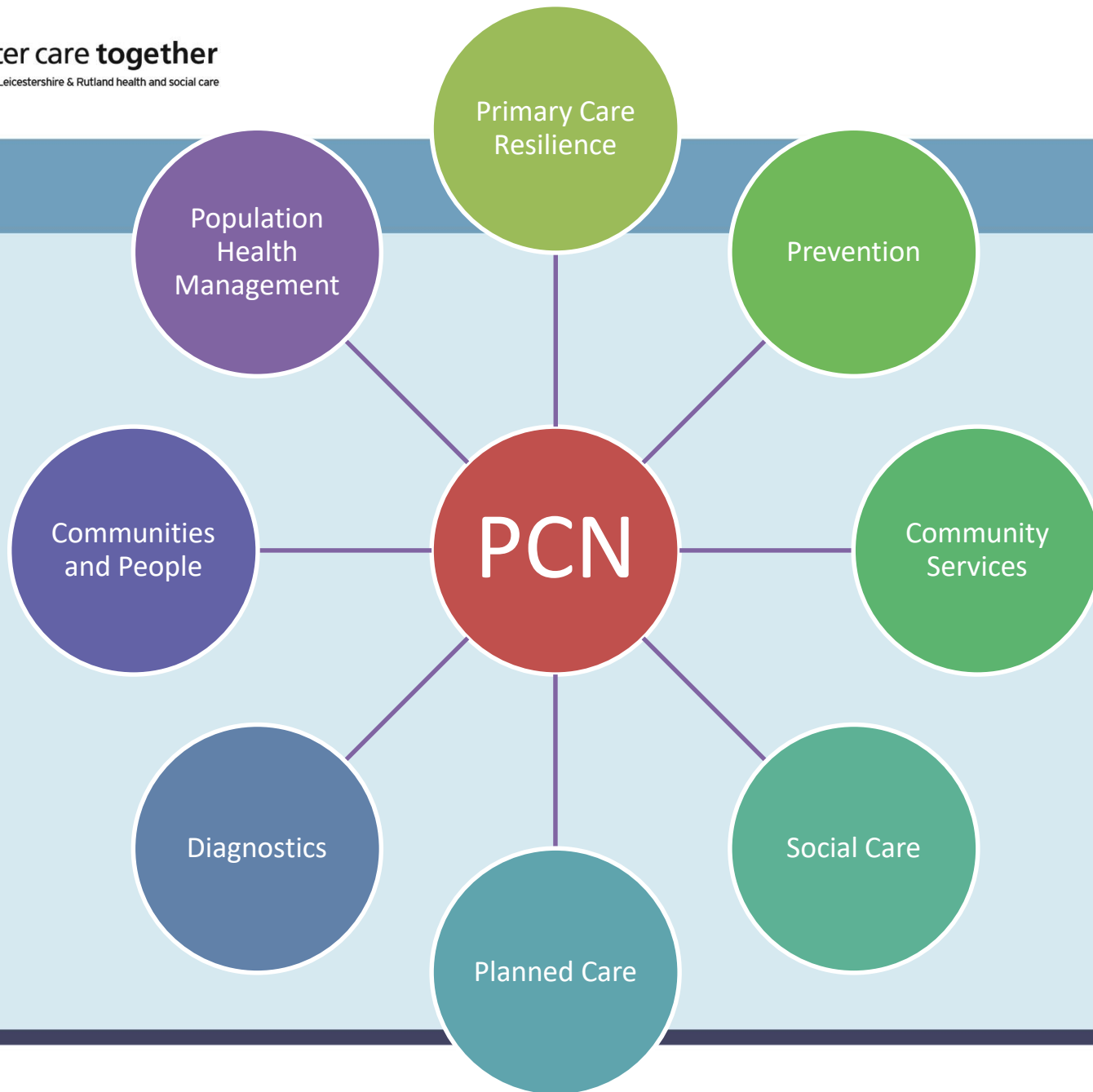
System – Leicester, Leicestershire and Rutland: the level at which NHS organisations will work with partners to set overall priorities and outcomes to improve the health and wellbeing of the whole population. It is also the level at which NHS organisations will be held collectively accountable for their financial and operational performance, and the footprint on which national NHS resources will increasingly be allocated into LLR.

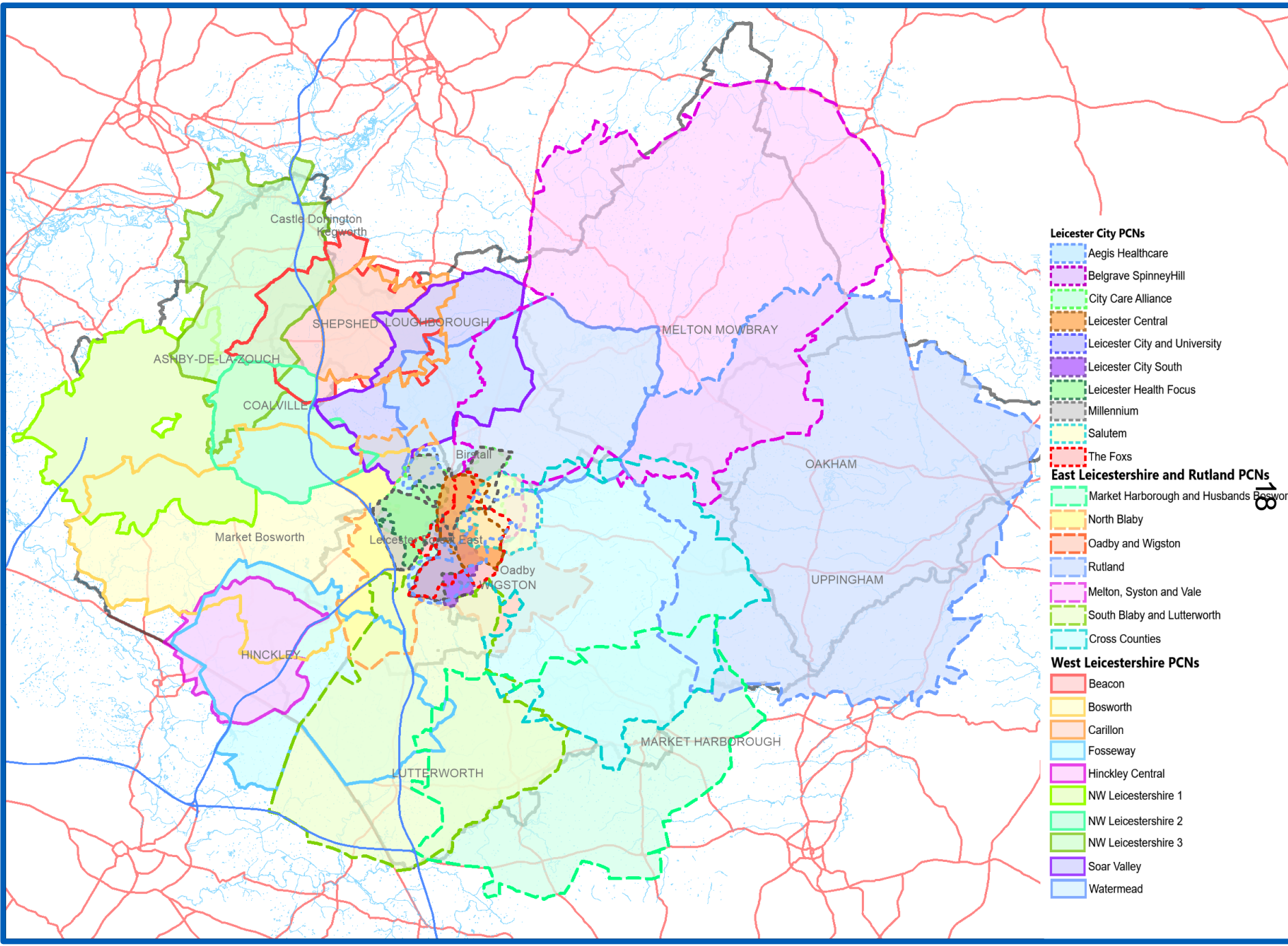
LLR NHS Care Alliance: NHS providers collaborating to deliver improved integrated models of care across LLR

Place – Upper Tier Local Authorities: the level at which NHS organisations will work with upper tier local authorities and other partners to improve health and wellbeing outcomes for their specific populations, and, where appropriate, integrate the delivery and commissioning of health and care.

Neighbourhoods - Groups of GP practices in LLR, operating as 25 Primary Care Networks: the level at which NHS primary and community care services work together, along with social care and many other agencies, to coordinate and manage the care of individuals close to home.







- Leicester City PCNs**
- Aegis Healthcare
 - Belgrave Spinney Hill
 - City Care Alliance
 - Leicester Central
 - Leicester City and University
 - Leicester City South
 - Leicester Health Focus
 - Millennium
 - Salutem
 - The Foxes
- East Leicestershire and Rutland PCNs**
- Market Harborough and Husbands Bosworth
 - North Blaby
 - Oadby and Wigston
 - Rutland
 - Melton, Syston and Vale
 - South Blaby and Lutterworth
 - Cross Counties
- West Leicestershire PCNs**
- Beacon
 - Bosworth
 - Carillon
 - Fosseway
 - Hinckley Central
 - NW Leicestershire 1
 - NW Leicestershire 2
 - NW Leicestershire 3
 - Soar Valley
 - Watermead

The 2019/20 'To Do List' for PCNs

- Agree form ✓
- Formal PCN agreement ✓
- Appoint an ACD ✓
- Begin to appoint to new roles ✓
- Understand what development the PCN needs
- Develop a plan based on maturity matrix
- Get ready for 2020/21 and beyond





5 Year Expectations of PCNs

Ability to focus on Population Health Management

Ability to integrate care

Ability to manage resources

Ability to work with their communities

Maturity of their leadership and partnerships

Capability for proactive population health analysis and improvement

MDT working across all partners within the PCN supported by IT interoperability

Capability to understand requirements and to manage resource flows across the PCN

Community and Voluntary sector voices are embedded into PCN planning and decision making

Access to the right information and ability to be part of decision making at the right level

The Network Service Specifications

Seven specifications:

- A real change to traditional DES
- There is no payment for delivery of specifications
- Failure to deliver the specifications negates entitlement to the PCN DES
- Expectation is that new roles creates the new capacity to deliver the specifications



First five for 2020/21

- Structured Medications Review
- Optimisation Enhanced Health in Care Homes
- Anticipatory Care requirements for high need patients
- Personalised Care
- Supporting Early Cancer Diagnosis

Additional for 2021/22

- CVD Prevention and Diagnosis
- Tackling Neighbourhood Inequalities (population health)

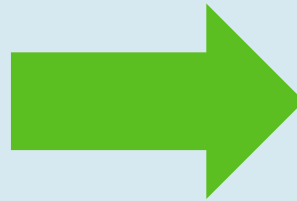
The New Roles Scheme

New roles for 2019/20

- Social prescriber
- Clinical Pharmacist

Coming soon (2020/21+)

- Physiotherapist
- Physician Associate
- Community Paramedics



An opportunity to:

- Create new roles
- Reduce pressure on GPs
- Continue to transform and improve access for patients
- Develop the practice/PCN multi-disciplinary team
- Work together as a PCN



Financial Implications for PCNs – New Roles

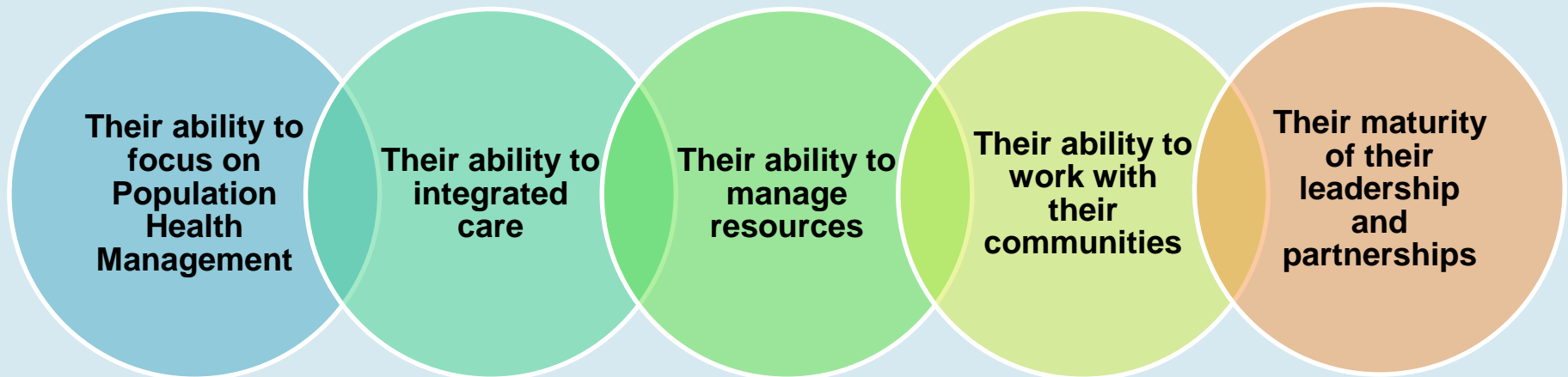
For a 50,000 patient PCN:

CLINICAL ROLE		2019/20	2020/21	2021/22	2022/23	2023/24
Clinical Pharmacist	FTE	1	2	3	3	3
Social Prescriber	FTE	1	2	3	3	3
Physiotherapist	FTE		1	1	2	3
Physician Associate	FTE		1	1	1	2
Community Paramedic	FTE			1	1	2
Total Headcount		2	6	9	10	13

	2019/20 (from July)	2020/21	2021/22	2022/23	2023/24
National Funding	£110 m	£257 m	£415 m	£634 m	£891 m
LLR Population	1,144,575	1,145,720	1,146,865	1,148,012	1,149,160
Funding per 50k typical network (paid per weighted list of a PCN)	£ 92,000.00	£213,000	£342, 000	£519,000	£726,000
TOTAL Funding Available in LLR	£ 2,106,018	£ 4,880,765	£ 7,844,556	£11,916,366	£16,685,806

PCNs' readiness to deliver

- This is a big 'ask' – PCNs need support to be ready to deliver
- New tool to help PCNs self-assess their 'readiness'
- The Maturity Matrix – asks PCNs to understand



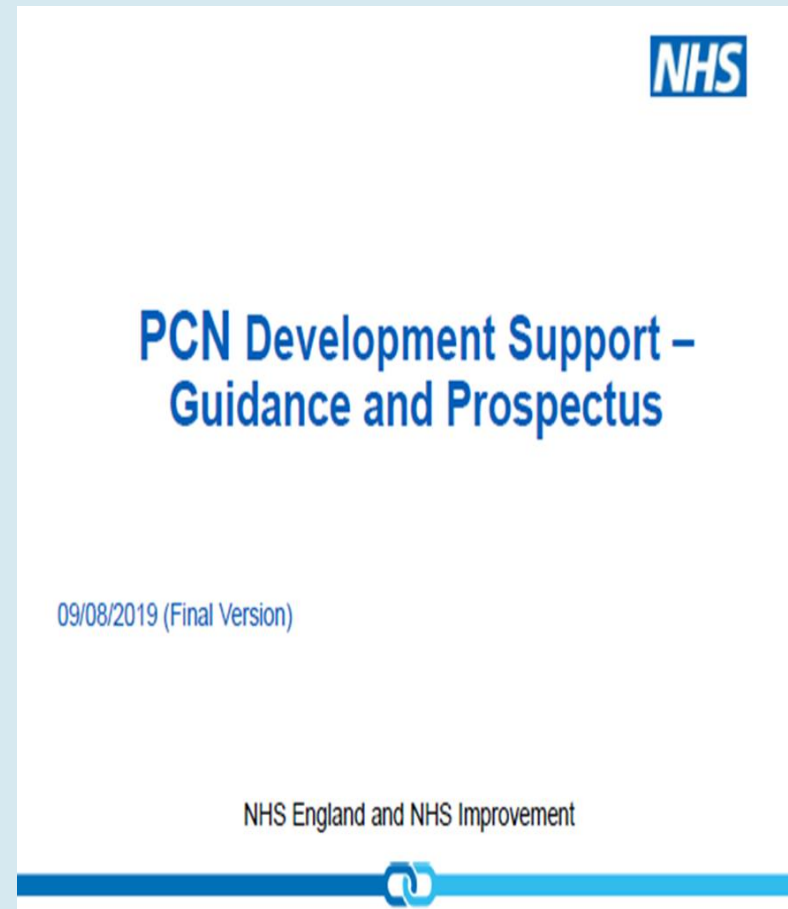
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In understanding the gap, PCNs and ACDs are able to access the right support and development opportunities



Plan to support PCNs?

- Additional funding
- Offer of support
- Development Plan
- Practical support
- PCN / Practice Organisational Development & Leadership



Additional Support in Kind

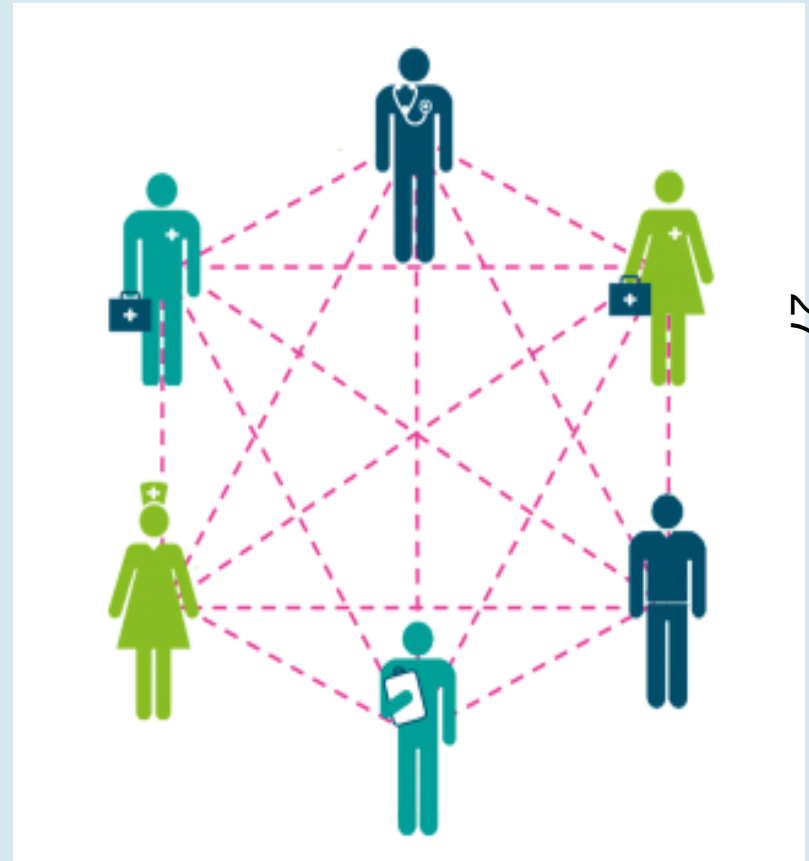


- CCG management support
- Interpretation of National Guidance
- NHSE reporting
- Governance and process development
- Policy and documentation standardisation
- Business intelligence (e.g. Aristotle, ACG, & Population Health Management)



Workforce

- Cross System planning
- Workforce career pathways e.g. Paramedics /Pharmacists
- Recruitment support
- Sourcing job descriptions and personal specifications



Communications and Engagement



- Expertise and advice
- Arranging and planning events
- Strengthening relationships with PPGs and communities
- Messaging support
- Communication tools
- Support in implementation