



South Tyneside PCNs make it over the line – and look forward to getting started

First signalled in the NHS Long Term Plan in January, primary care was given just a few months to come together by 1 July to provide care at greater scale in local networks.

This was quite a policy ambition, even by NHS standards, requiring neighbouring GP practices to organise themselves into patient population sizes of between 30-50,000, agree governance, appoint clinical directors and make a range of decisions about finance and employment. Despite the odds, NHS England reports that 99 per cent of GP practices made the deadline.

One such success, achieved with days to spare, was South Tyneside which has created three PCNs within its existing federation: South, East and West.

“We were driven to achieve ahead of the deadline to allow for any last minute requirements,” admits primary care network manager Karen Large who, on two days a week marshalled the 21 practices in South Tyneside into the three primary care networks, covered the ground on governance and met the national milestones to be ready for the 1 July deadline.

Aside from her own hard work, Large attributes the success to four key factors:

- The existence of the federation
- A CCG providing funding to allow for the development of emerging PCNs including the appointment of roles such as Large’s
- The cooperation of the GPs
- The support offered by PCC’s general practice development team.

The three PCNs appointed South Tyneside Health Collaboration (STHC) to manage their business requirements and provide PCN staff. STHC was established in 2017 and, while there is no mention of federations in the long term plan, the usefulness of having an organisation that can provide the business and back office support for the PCN was immediately obvious and remains part of the structure in South Tyneside. Separate accountancy budgets and records will be managed by STHC, with costs coded for each

network as appropriate. “It is really beneficial to have a single operating system managing and supporting the back office requirements,” says Large.

PCNs will support one of the main goals of the long-term plan, enabling a focus on prevention and, more personalised care. They will help to integrate primary care with secondary and community services, and bridge a gap between general practice and emerging integrated care systems.

“We will be able to provide a broader resource offering care closer to home, relieving pressure on primary, secondary and social care,” she adds.

PCNs will play a vital role in population health, by identifying prevention and treatment strategies that reflect local needs while their clinical directors and others will be key as leaders and co-ordinators of local services beyond general practice.

Tracy Green, PCC’s general practice development lead, who facilitated some PCN events in South Tyneside says: “Primary care networks will ultimately provide a far more joined-up provision of care for patients. It’s all about putting the patient in the middle and saying, ‘What do they need?’ It’s about trying to keep patients out of hospital unless absolutely necessary. Networks know and understand their patients and are being allocated some workforce budget to support the delivery of new services over the coming years.”

The appointment system will be more flexible, with shorter waiting times and offer patients different ways to get treatment and advice including digital, telephone-based and face-to-face appointments.

Although patients’ point of contact may remain with their usual practice, they will have access to a wider range of professionals. Top of the list for all PCNs are social prescriber link workers which are being welcomed as part of the solution for patients who attend frequently but tend to have social rather than clinical needs. NHSE will fund at 100% one social prescriber link worker per PCN.

Pharmacists, one for each PCN, are part-funded to the tune of 70% of their salary cost. Other professionals planned but not yet appointed, include paramedics and physiotherapists from March 2020, which will create the opportunity for patients to see the most appropriate clinician for them.

Recognising the opportunities and the associated workload, the STHC will appoint three network liaison officers, one for each PCN. These will report to Large who remains in post until end of March 2020. A PCN programme board will meet quarterly from autumn onwards, setting the strategic direction, working collaboratively with the clinical commissioning group (CCG) and other partners involved in the healthcare and wellbeing of people in South Tyneside.

Swift action and fast decision making were needed in order to meet a series of tight deadlines up to 1 July. First were the three network contract applications which had to be submitted to the clinical commissioning group (CCG) by 15 May. These confirmed each clinical lead, patient coverage, list size and payment methods.

The CCG asked PCC to support the initial sessions which were held over three afternoons in April at which Green provided an overview of the long-term plan and the upcoming key milestones for PCNs in the preparatory year. This included appointing a clinical director for each network.

Matt Brown, executive director of operations at NHS South Tyneside Clinical Commissioning Group (CCG) says: “The development of the primary care networks is a great opportunity for the area. The CCG is pleased to have been involved in their development, and we will continue to be supportive of the networks going forward.”

By 31 May, the CCG had to confirm the network coverage and approve variation to GMS, PMS and APMS contracts. One of the difficulties was just covering the ground, says Large, ensuring that GPs at all 21 practices had read and signed the necessary documentation.

While the July deadline was hailed as the official launch of PCNs, Large emphasises that networks remain in a preparatory phase. “There is still a lot of work to do but we have a solid foundation on which to build, working together differently to deliver the best possible healthcare for our people in South Tyneside.

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