

The Network DES has significant associated funding to increase staffing and deliver the service requirements.

The ongoing development of PCNs is a programme of transformational change. Not just for primary care but for community services across health and care, physical and mental health. The CCG will need to work with system partners to actively support and progress the transformation change required to achieve the integration of primary care and community services.

Engagement: clinical, stakeholder and public/patient:

Not applicable

Financial Implications of Paper:

The financial entitlements associated with the Network Contract DES total a maximum of £8,186,776 for PCNs and a further £1,275,853 for individual participating practices. These sums are included in Primary Care Medical local allocations with a small amount from the CCG core allocations from NHS England (see [NHSE Financial Implications letter 03.03.20](#)).

PCNs are eligible for the following funding streams:

Payment	Annual value	Notes	Oxon £ ,000
Core PCN funding	£1.50 / registered pt		£1,154
Clinical director	£0.722 / registered pt		£556
Extended hours access	£1.45 / registered pt		£1,116
PCN support	£0.27 / weighted pt	April to Sept 20	£195
Care home premium	£60 / bed	Aug 20 to Mar 21	Tbc
Impact and Investment Fund	tbc	Oct 20 to March 21	Tbc
Additional Roles Reimbursement	£7.131 / weighted pt	Maximum claimable sum	£5,166
Total			£8,187

Action Required:

Oxfordshire Primary care Commissioning Committee is invited to:

- Note the work as delegated by OPCCC to confirm PCNs for Oxfordshire
- Note that Oxfordshire has 19 PCNs and 1 Network which will be referred to locally as 20 PCNs
- Note the steps that have been taken to ensure that 100% population coverage is achieved with respect to access to Network services

OCCG Priorities Supported (please delete tick as appropriate)

✓	Operational Delivery
✓	Transforming Health and Care
✓	Devolution and Integration
	Empowering Patients
✓	Engaging Communities
✓	System Leadership

Equality Analysis Outcome:

CCGs must ensure that PCN services are available to the entire registered patient population of the area.

PCNs must engage patients in developing new services and changes related to service delivery – engaging with a range of communities including “seldom heard” groups.

PCNs must provide reasonable support and assistance to the commissioner in the performance of its duties to engage patients in the provision of and/or reconfiguration of services where applicable to the PCNs patients

Link to Risk:

AF32: There is a risk that Oxfordshire will not deliver comprehensive services if resources (money and people) are not used optimally leading to poorer health outcomes.

817: Risk the system doesn't work effectively together requirements of the Long Term Plan won't be delivered. Implications are that we may not be able to ensure the delivery of services to meet population need & that the funding we can attract is limited.

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Primary Care Networks 2020/21

1. Context

- 1.1. The Long Term Plan (LTP) and 'Investment and evolution – a five year framework for GP contract reform to implement The Long Term Plan' set an ambitious programme of change for primary care and community services. They described Primary Care Networks (PCNs) as the building block of integrated care. The PCN concept is however wider than just general practice as they are intended to dissolve the historic divide between primary and community health services
- 1.2. The Network Contract DES sees general practice take a leading role in every PCN. Work that started in 2019/20 will be required to continue to ensure that PCNs continue to develop beyond the current practice members so that they are able to deliver the full range of network requirements. Clear evidence of the integrated primary and community care response during the COVID19 pandemic has demonstrated the ability of groups of practices to lead in service redesign and delivery.
- 1.3. The integration set out in the Long Term Plan grows over time with increasing numbers of services and areas of focus being included from years 2 to 5 of the plan where 2020/21 is year 2.

2. Network DES 2020-21 overview

- 2.1. NHS England launched the Network Contract DES on 31 March 2020, with some changes designed to enhance practices' and PCNs' capacity and ability to respond to the COVID-19 outbreak.
- 2.2. The first Network Contract DES ran from July 2019 to March 2020 and focused on setting up PCNs. Major additions and changes for 2020/21 include:
 - Enhancements to the Additional Roles Reimbursement Scheme – increased funding and more eligible roles included such as First Contact Physiotherapists and Physician Associates (previously announced) and extra roles such as podiatrists, dietitians and occupational therapists
 - Four new service requirements in addition to existing Extended Hours Access:
 - Structured Medication Review and Medicines Optimisation (from October 2020)
 - Enhanced Health in Care Homes
 - Supporting Early Cancer Diagnosis.
 - Social Prescribing (to build on the Social Prescribing Link Workers already in place under the 2019/20 PCN Network Contract)
 - Collaboration with non-GP providers – PCNs must document agreements with the following in their Network Agreement:
 - community service providers (by 30 September 2020)
 - mental health providers (by 31 March 2021)

- community pharmacy providers (by 31 March 2021)
- 2.3. The final specification includes changes in response to the COVID-19 pandemic:
- The implementation date for the Structured Medication Review service requirements postponed until 1 October
 - The introduction of the Investment and Impact Fund (IIF) postponed for at least six months, with direct funding provided in the interim
 - A requirement for all PCNs to provide a social prescribing service

3. Confirming participation in the PCN DES

- 3.1. The national specification placed a requirement on commissioners to confirm and approve all primary care networks by 12 June 2020. For 2020/21 practices were given the opportunity to opt in or opt out by 31 May 2020. The confirmation process was led by Oxfordshire Primary Care Commissioning Operational Group (OPCCOG) on delegated authority of Oxfordshire Primary Care Commissioning Committee (OPCCC).
- 3.2. Where any practice does not participate in a PCN the commissioner must ensure that that all its registered patients have access to network services. A commissioner may contract with any suitable provider for the delivery of network services although are not able to offer services directly back to opting out practices as a better offer.
- 3.3. A practice participating in the Network Contract DES for 2020/21 will be automatically enrolled to participate in any subsequent year's Network Contract DES to 2024, and any variation that may take place in-year, unless it chooses to opt out in specific circumstances.

4. Oxfordshire position

- 4.1. Oxfordshire can confirm that 63 out of 67 practices have agreed to opt in and form 19+1 Primary Care Networks as detailed in Appendix 1.
- 4.2. Across Oxfordshire
- 1 practice (Cowley Road Medical Centre) opted out of a single PCN originally of 4 practices
 - 2 practices (Alchester Medical Group and Montgomery House surgery) opted out of a single PCN originally of 3 practices
 - 1 practice (Sibford Surgery) has never been part of a PCN
- 4.3. One practice, Bicester Health Centre opted in to the Network Contract DES but was not able to form a PCN as it did not meet the national criteria for a PCN which was that it must have a PCN list size as at 1 January 2020 of between 30,000 and 50,000.
- 4.4. Taking into account the unique geography and population demographics of Bicester, the work to establish the Bicester PCN during 2019/20, the need to provide Network services to patients of the other two practices in Bicester and the best interest of the patients of Bicester, the CCG, working with the LMC, has commissioned network services from Bicester Health Centre for the whole of Bicester. Locally, the CCG will ensure that the

- Bicester Network will have access to all the benefits of being part of a PCN including access to funding and integration with the community services.
- 4.5. The CCG, working with LMC, has approached the local PCNs for delivery of network services to the patients of East Oxford Health Centre and Sibford Surgery. East Oxford PCN has now been commissioned to provide Network services to Cowley Road Medical Practice. No PCNs in the north of the county wished to provide services to Sibford Surgery (as there are incompatible IT issues). The CCG is now working with a local federation to ensure that the patients of Sibford Surgery have access to network services.
 - 4.6. Banbury PCN, which was the largest PCN in Oxfordshire, has split into two PCNs for 2020/21 – Banbury Cross PCN (consisting of a single practice) and Banbury Alliance PCN. The two PCNS will continue to work together where working across Banbury is advantageous.
 - 4.7. Other changes from 2019/20 included a new PCN Clinical Directors in Wallingford and Surrounds PCN and City – East Oxford and a change to PCN Boundary for Eynsham and Witney to include the new Windrush Medical Practice boundary change (considered in February 2020)

5. Next steps for PCNs

- 5.1. The Long Term Plan places PCNs at the heart of the work to deliver integrated primary care and community services. PCNs are regularly described as the building blocks of integration. The CCG alongside other system partners will continue to support and empower the PCNs to develop and succeed.
- 5.2. PCNs demonstrated strong clinical leadership during the response to COVID-19, with some Clinical Directors leading on some of the core workstreams for the system. Building on this will strengthen their contribution to the system strategic direction where their voice will be increasingly important.
- 5.3. PCNs have a number of key actions over the next few months including developing workforce plans to secure additional roles funding and prepare for the delivery of the DES Enhanced Health in Care Homes specification from 1 October 2020

6. Recommendation

Oxfordshire Primary care Commissioning Committee is invited to:

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