

Primary Care Networks Development in West London

Health & Wellbeing Voluntary Organisations Forum

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Introduction

- What are Primary Care Networks?
- Who are the Primary Care Networks in West London CCG?
- What will Primary Care Networks be doing?
- How can Primary Care Networks work with Voluntary Sector?

Context

- In 2018, practices in West London began to work more closely together as Primary Care Networks
- In 2019, national policy documents encouraged all GP Practices to be part of a Primary Care Network
- From July 2019, the Network Contract DES has gone live which formalises the formation of PCNs

What are primary care networks (PCNs) ?

- Groups of GP practices, community health and care services coming together to form networks
- Ambition to improve connectivity of services enabling smoother referrals and more joined up service for patients
- Commitment to personalisation and social models of care including social prescribing
- There isn't a blue print so they will all look different
- Suggested population size of 30 – 50,000 people
- Some PCNs are developing at different rates and in different ways

PCNs are key to the future

- Primary care networks are small enough to give a sense of **local ownership**, but big enough to have **impact** across a 30k+ population.
- They will comprise groupings of clinicians and wider staff **sharing a vision** for how to improve the care of their population and will serve as **service delivery units** and a **unifying platform** across the country.

What are the benefits of primary care networks for patients?

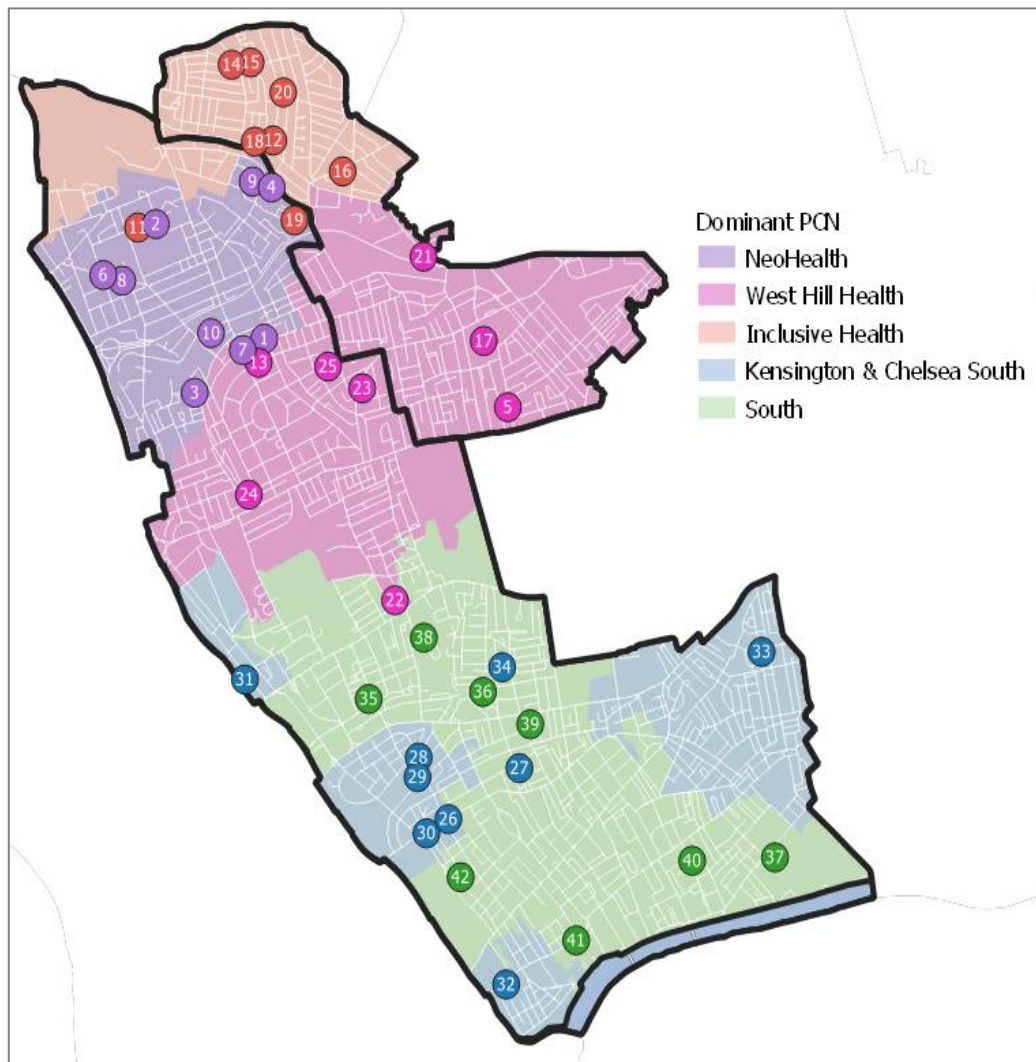
- **More coordinated and joined up services** so patients don't have to repeat their story multiple times
- **Access to a wider range of professionals** in the community, so patients can get access to the people and services they need in a single appointment
- **Appointments that work around patient's life**, with shorter waiting times and different ways to get treatment and advice including digital, telephone-based and face-to-face
- **More influence** when patients want it, giving more power over how health and care are planned and managed
- **Personalisation** and a focus on prevention and living healthily, recognising what matters to patients and their individual strengths, needs and preferences



Who are the Primary Care Networks in West London CCG?

PCN Name	No. of Practices	Aggregated Patient List (Raw: 1 st January 2019)	Named Clinical Director
NeoHealth	9	38,152	Dr Rachael Garner
Inclusive Health	8	33,449	Dr Akber Ali
West-Hill Health	8	66,890	Dr Simon Ramsden & Dr Naomi Katz
Kensington and Chelsea South	9	59,474	Dr Puvana Rajakulendran
South	8	55,791	Dr Fiona Butler

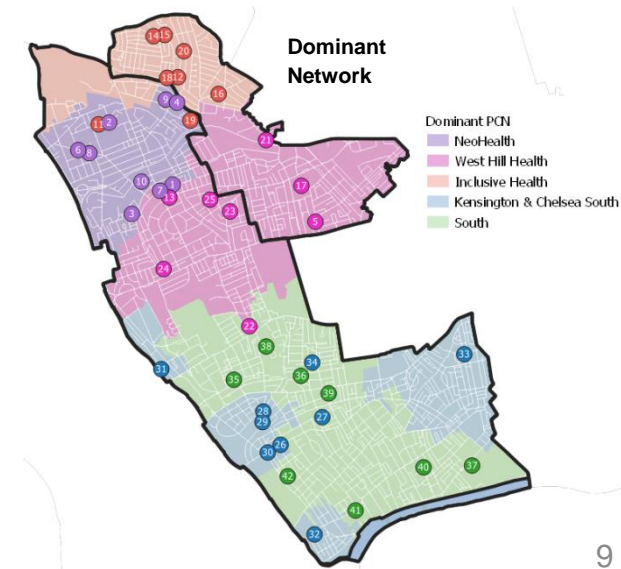
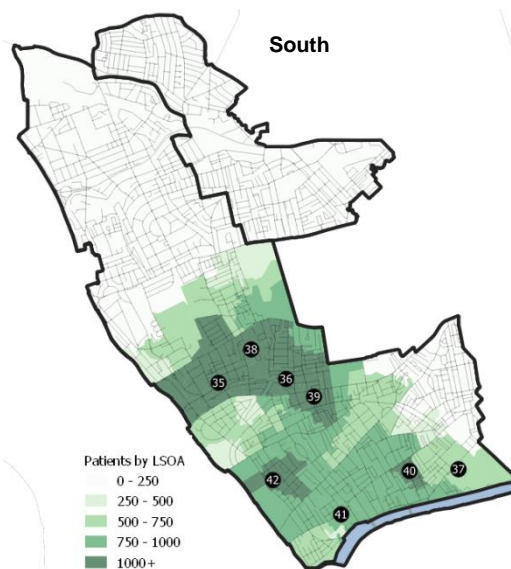
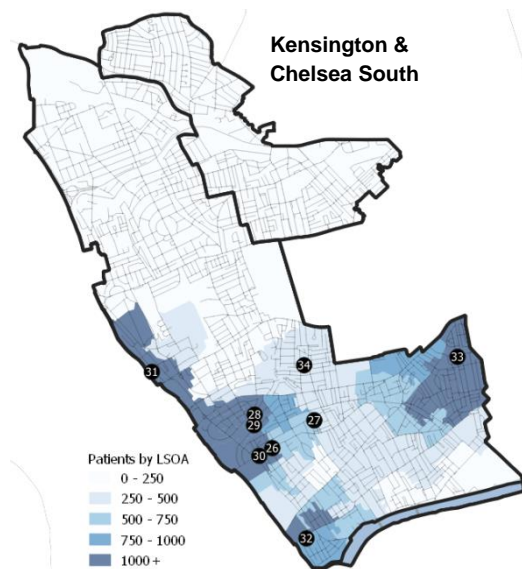
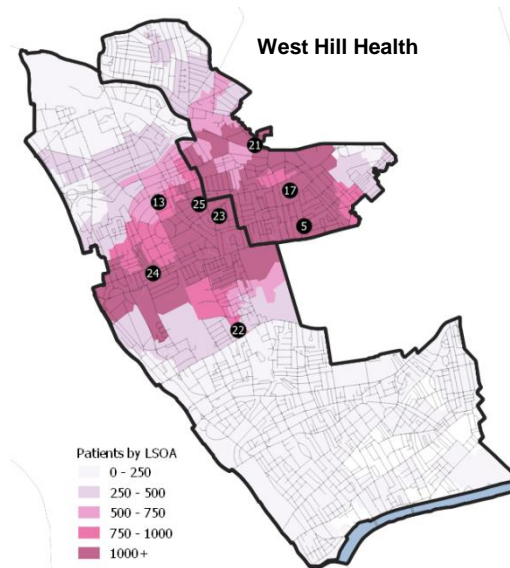
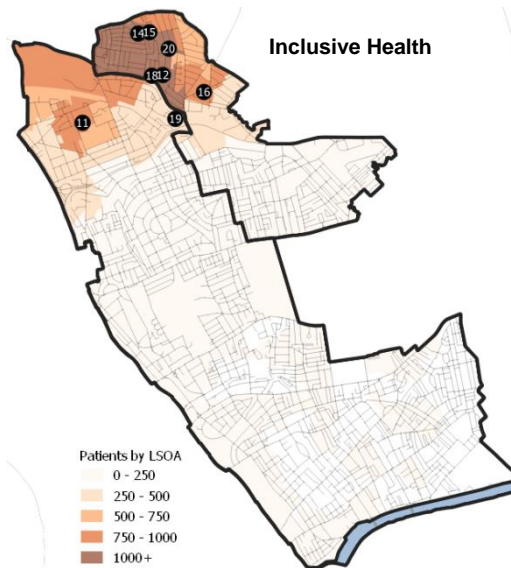
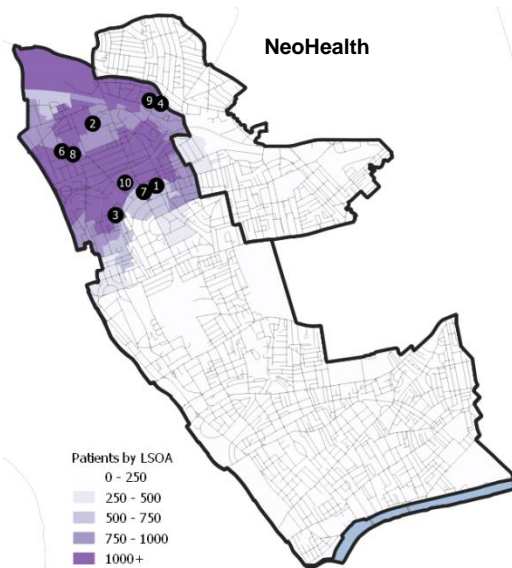
Network Map



Primary Care Network	Map Label	Code	Practice Name
NeoHealth	1	E87067	Colville Health Centre
	2	E87733	The Exmoor Surgery
	3	E87706	Foreland Medical Centre
	4	E87024	The Golborne Medical Centre (Ramasamy)
	6	E87003	North Kensington Medical Centre
	7	E87065	Notting Hill Medical Centre
	8	Y00507	St Quintin Health Centre
	9	E87742	The Golborne Medical Centre (Dathi)
	10	E87050	Beacon Medical Centre
	11	Y01011	Barlby Surgery (AT Medics)
Inclusive Health	12	Y02842	Half Penny Steps Health Centre
	14	E87735	Queens Park Health Centre (Lai Chung Fong)
	15	E87755	Queens Park Health Centre (Ahmed)
	16	E87038	The Elgin Clinic
	18	E87751	Harrow Road Surgery (Dr Srikrishnamurthy)
	19	E87026	The Meanwhile Gardens Medical Centre
	20	E87021	Shirland Road Medical Centre
	5	E87722	Lancaster Gate Medical Centre
	13	Y00200	Portobello Medical Centre
	17	E87009	The Garway Medical Practice
West Hill Health	21	E87637	Grand Union Health Centre
	22	E87016	Holland Park Surgery
	23	E87061	The Pembridge Villas Surgery
	24	E87029	The Portland Road Practice
	25	E87007	Westbourne Grove Medical Centre
Kensington & Chelsea South	26	E87746	Brompton Medical Centre
	27	E87048	Chelsea Medical Services (Dr Joshi)
	28	Y03441	Earls Court Health and Wellbeing Centre
	29	E87047	Earls Court Medical Centre
	30	E87750	Earls Court Surgery
	31	E87720	Kensington Park Medical Centre
	32	E87063	King's Road Medical Centre (AT Medics)
	33	E87738	Knightsbridge Medical Centre
	34	E87702	Kynance Practice
	35	E87701	The Abingdon Medical Practice
South	36	E87043	Emperor's Gate Health Centre
	37	E87711	Royal Hospital Chelsea
	38	E87715	Scarsdale Medical Centre
	39	E87013	Stanhope Mews Surgery
	40	E87665	The Chelsea Practice
	41	E87762	The Good Practice
	42	E87004	Redcliffe Surgery

Where do patients in the Networks live?

Patient spread in each area



Network Contract DES

- Extended Hours
 - 30 mins per 1,000 patients
- Quality Improvement modules
 - Prescribing Safety
 - End of Life Care
- Additional Roles
 - Clinical Pharmacist
 - Social Prescribing Link Worker
- “Preparatory year” prior to the delivery of service specifications from April 2020

Future Network service specifications

- During 2019 and 2020 NHSE to develop 7 service specifications:
 - Structured medication reviews (Start date: April 20)
 - Enhanced health in Care Homes (April 20)
 - Anticipatory care requirements (During 20/21)
 - for high need patients typically experiencing several LTCs
 - Personalised care (During 20/21)
 - Supporting early cancer diagnosis (During 20/21)
 - CVD prevention and diagnosis (During 2021/22)
 - Tackling neighbourhood inequalities (During 21/22)
- Specifications will set-out national minimum requirements.

Developing PCNs in NWL - Keystones



Planned care

- Getting the right diagnosis and effective treatment
- Long term condition management
- Population health – proactive care of those with rising risk, stable risk and those with complex needs
- Prevention and maximising self care
- Outpatient referral guidelines

Unplanned care

- Access
- Maximising Self Care
- Different appointment types
- Demand and capacity – understanding full workforce capacity across partner organisations working in the PCN

PCN Maturity Matrix

- 5 Domains
 - Leadership, planning and partnerships
 - Use of data and population health management
 - Integrating care
 - Managing resources
 - Working in partnership with people and communities
- 4 levels
 - Foundation
 - Step 1
 - Step 2
 - Step 3
- Assessment in September, follow-up at year-end

Example of Developing PCN Maturity

- Stage 1
 - The PCN has established relationships with local voluntary organisations and their local Healthwatch
- Stage 2
 - Insight from local people and communities, voluntary sector is used to inform decision-making
- Stage 3
 - PCNs have fully incorporated integrated working with local Voluntary, Community and Social Enterprise (VCSE) organisations as part of the wider network
 - Community embedded into working practices and integral part of PCN planning and decision-making
 - Building on existing community assets to connect with whole community and co-design local services and support

Discussion – Engagement

- How can we ensure that West London PCN's build on the wealth of local knowledge within voluntary sector organisations?
- How should PCNs liaise and interact with organisations? Individually or in groups?
- What offers are consistent across all 5 PCNs, what are more localised?
- What further information would support you to engage?

Next Steps

- Feedback from today will be shared with the Clinical Directors of Primary Care Networks
- Primary Care Networks will continue to develop and prepare to deliver services outlined today
- Continue dialogue and come back to a future meeting to understand how you have been able to link into PCNs

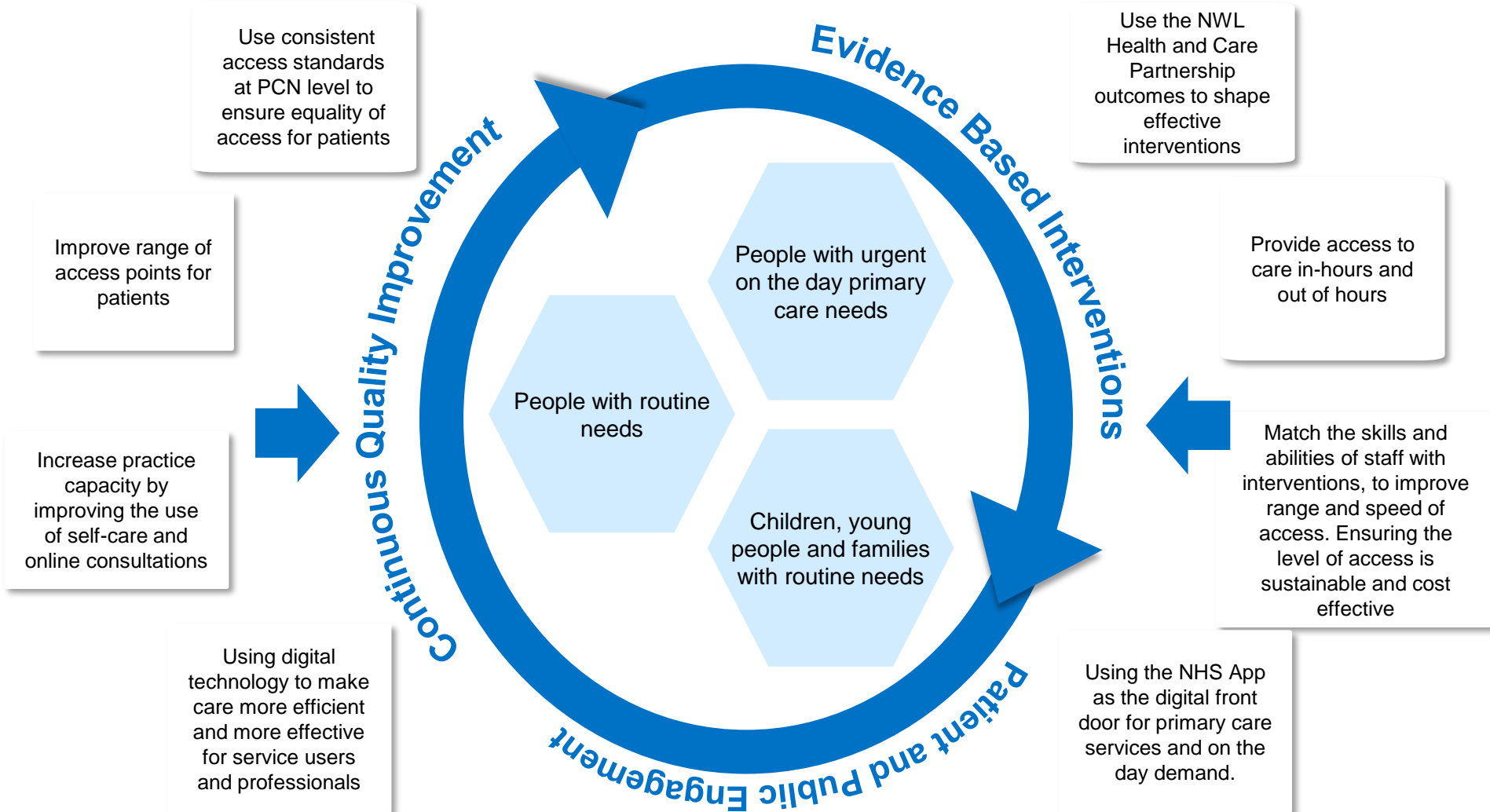
Any Questions?

Appendix A: Core characteristics of PCNs

- Practices working together and with other local health and care providers, to provide coordinated care through integrated teams
- Providing care in different ways to match different people's needs; flexible access to advice and support for 'healthier' populations, and joined up multidisciplinary care for those with more complex conditions
- Focus on prevention, patient choice, and self care, supporting patients to make choices about their care and look after their own health, by connecting them with the full range of statutory and voluntary services
- Use of data and technology to assess population health needs and health inequalities, to inform, design and deliver practice and population scale care models; support clinical decision making, and monitor performance and variation to inform continuous service improvement
- Making best use of collective resources across practices and other local health and care providers to allow greater resilience, more sustainable workload and access to a larger range of professional groups

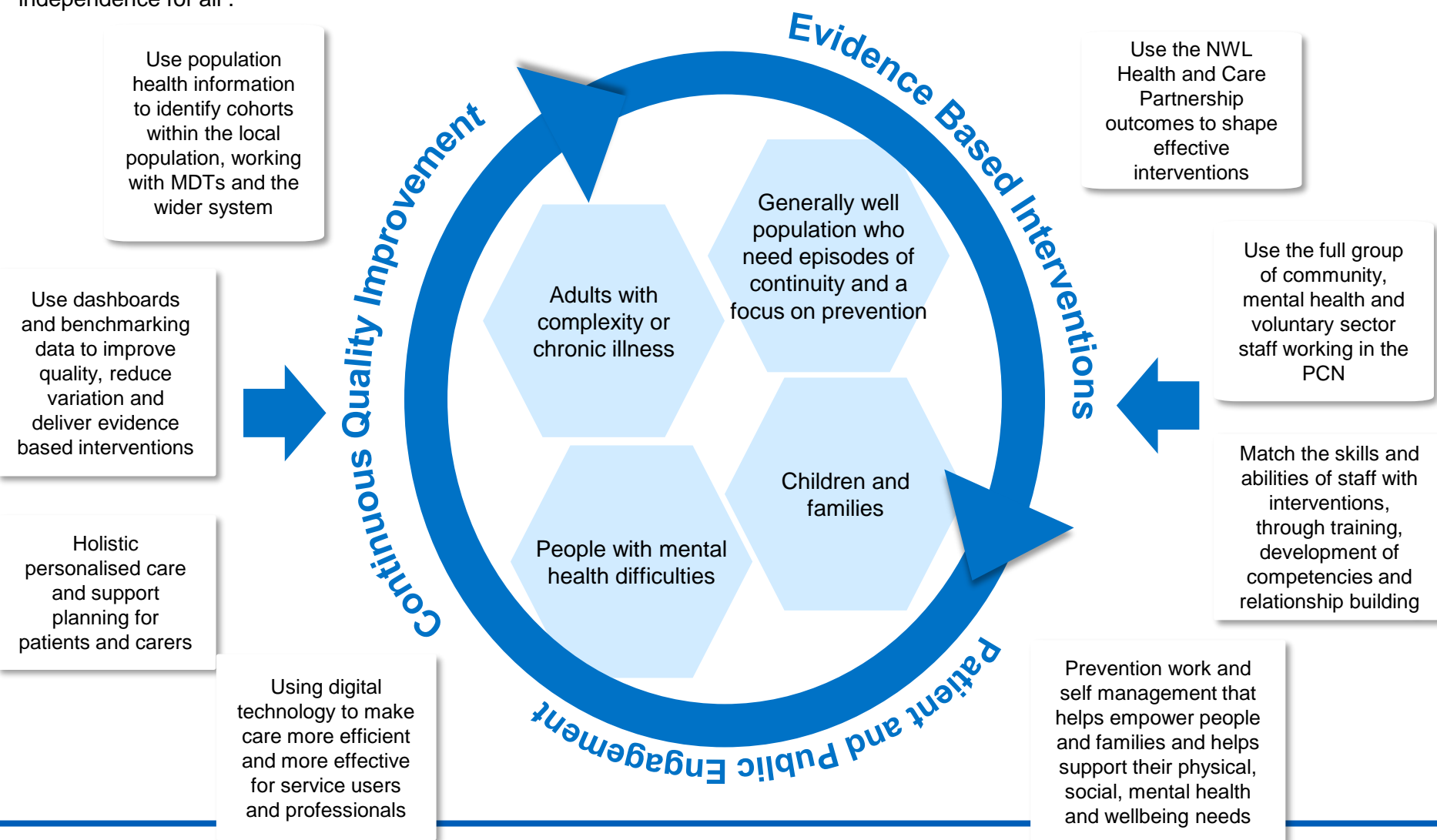
Appendix B: Accessible Care Delivery Model

As we progress with the transformation of Primary Care across North West London, accessible care is focused on ensuring patients access the right care, at the right place at the right time.



Appendix C: Proactive Planned Care Delivery Model

As we progress with the transformation of Primary Care across North West London, population analysis will be a key enabler across our PCNs, supporting our commitment to providing accessible, proactive, coordinated and preventive care and improving health, wellbeing and independence for all .



Appendix D: Coordinated Care Model for most complex 'highest risk' people with frailty and multiple long term conditions

