

## Focus on the Primary Care Networks DES

January 2019

This note provides a brief overview of the Primary Care Networks DES. Detailed guidance on the constituent aspects of the DES will be released by April 2019.



## What are Primary Care Networks?

Primary Care Networks will consist of a grouping of GP practices within a coherent geographical area, typically covering a population of 30-50,000 patients. By July 2019, it is expected that all areas within England will be covered by a Primary Care Network. Over the coming years PCNs will be supported in developing an expanded primary care team, with member practices also working alongside other organisations such as Community Trusts and the voluntary sector, in order to help alleviate workload pressures on practices and allow GPs to concentrate on the most complex patients.

These Networks can be structured a number of ways, with the decision on how a respective Network operates down to agreement between its practice membership. However, they should be small enough to still provide the personal care valued by both patients and GP practices, but large enough to have impact and economies of scale through deeper collaboration between practices and others in the local health and social care system.

The BMA will be producing further guidance on structures and other aspects of Networks shortly.

## What is the PCN DES?

Also referred to as the 'Primary Care Network Contract', the DES is designed to support practices to develop and implement Primary Care Networks, working in conjunction with neighbouring practices within their area.

The DES consists of:

### – Network Agreement

This is an agreement between practices who wish to jointly form a Network. It will outline the governance and financial structure of the Network, the role and responsibilities of each respective practice in delivering the DES specification, and the extended workforce proposals, to be funded under the DES.

In developing the proposed Network, practices will need to discuss and agree how the Network intends to operate, the financial flow of the funding coming into the Network, and what workforce it will require in order to undertake the criteria within the DES Specification.

In order to help in this process, a template Network Agreement has been developed by NHS England and GPC England, which should be completed with the appropriate details and signed by a representative of each constituent practice.

This will be finalised over the coming weeks and will be available on the BMA website.

### – DES Specification

A specification outlining the full requirements of the DES will be published in March 2019. This will be agreed between the GPC England and NHS England and will set out what practices and Networks need to do under the DES.

## Funding

Funding under the DES will be paid to a nominated provider within the Network as set out within the respective Network Agreement (with the exception of the Network Engagement funding which will go direct to practices) and will consist of several streams:

### – Network Engagement Funding

Practices will receive an additional payment for engagement with the Primary Care Network Scheme, via the SFE. This is the only funding that is paid directly to practices for participation in the DES.

#### – Network Administration Payment.

There will be a recurrent payment of £1.50 per patient as an entitlement for networks, from CCG central allocations, to assist in the general administration costs of the Network. Precisely how this funding is utilised will be for the Network collectively to decide.

#### – Workforce

The DES provides for workforce reimbursement for the Network on a 70/30 split (including on-costs), covering a number of specified health professions and designed to allow the Network to build up an expanded primary care team.

*More detail on the workforce reimbursement scheme can be found in the 'Workforce' section below.*

#### – Clinical Lead Funding

A total of £31m of funding will be available to fund the clinical lead post for each network on a basis of 0.25

WTE per 50,000 pts, at national average GP salary (including on-costs). This will be provided on a sliding

scale based on network size (rising to £45m by year 2023/24).

#### – Extended Access

From 2019/20 the requirements and funding of the Extended Hours DES will be transferred to Networks. This will provide approximately £1.45 per patient. Further detail on this can be found within the 'Requirements' section below. Following an Access Review in 2019, a more coherent set of access arrangements will start being implemented in 2020, including transferring the £6 per patient funding under the GPFV Improving Access scheme to Networks.

#### – Services

From 2020 there will be the potential for additional funding for new services in line with the aims set out in the NHS Long Term Plan. These will be phased in gradually over the next 5 years and will cover:

1. Medications Review and Optimisation
2. An Enhanced Health in Care Homes Service
3. Anticipatory Care
4. Personalised Care
5. Supporting Early Cancer Diagnosis
6. Cardiovascular Disease Prevention and Diagnosis
7. Inequalities

### Workforce

New PCN workforce will be part funded **recurrently** at 70%, with 30% to be provided by the Network members (apart from social prescribers which will be 100% funded by NHSE), with the eligible posts increased over the next five years to enable Networks to build up their expanded primary care team. The aim is to introduce over 20,000 additional workers into the primary care workforce, over the period of 5 years.

For practical purposes, and to enable Networks to be fully up and running before the scheme fully develops, for the first year of the DES (2019/20) every network of at least 30,000 population will be able to claim **70% funding as above for one additional whole-time equivalent (WTE) clinical pharmacist** and **100% funding for one additional WTE social prescribing link worker**. Beyond 100,000 network size, the 2019/20 reimbursement scheme doubles to two WTE pharmacists and two social prescribers; with a further WTE of each, for every additional 50,000 network population size.

Over the coming years, First Contact Physiotherapists, Physician's Associates and Community Paramedics will all be added to the scheme.

Whilst it is not a requirement for staff employed under the DES to be engaged on Agenda for Change terms, reimbursement will be capped at the weighted AfC mid-point for each category of staff. For 19/20, maximum reimbursable amounts for the eligible workforce will be:

	AfC band	Maximum reimbursable amount in 2019/20 with on costs
Clinical pharmacist	7-8A	37,810
Social prescriber	5	34,113

**Further guidance on the workforce reimbursement scheme will be released in the coming weeks.**

### Next Steps for Practices

Whilst the full documentation for the DES will not be published until March, practices should open discussions with neighbours and colleagues with regards to forming a primary Care Network. LMCs are ideally positioned to act as a coordinator and mediator in these discussions, where necessary.

When signing up to the DES, Networks will need to make brief submission to their CCG outlining:

- The names and the ODS codes of the member practices;
- The PCN list size, i.e. the sum of its member practices' lists as of 1 January 2019;
- A map clearly marking the agreed PCN area;
- The initial PCN Agreement signed by all member practices;
- The single practice or provider that will receive funding on behalf of the PCN; and
- A named Clinical Lead/Director from within the GPs of the PCN (additional funding provided for this role).

This should be submitted no later than 15th May 2019 and should be confirmed by the relevant commissioner no later than 31st May.

### Timetable for the 2019/20 PCN DES

Date	Action
Jan-Apr 2019	Practices meet to discuss forming PCNs and begin to put together the Network registration requirements
By 29 Mar 2019	NHS England and GPC England jointly issue the Network Agreement and 2019/20 Network DES Specification
By 15 April 2019	Primary Care Networks submit registration information to their CCG
By 31 May 2019	CCGs confirm network coverage
Early Jun	NHS England and GPC England jointly work with CCGs and LMCs to resolve any issues
1 Jul 2019	Network DES goes live
Jul 2019-Mar 2020	National entitlements under the 2019/20 Network Contract start: <ul style="list-style-type: none"> <li>– year 1 of the additional workforce reimbursement scheme</li> <li>– ongoing support funding for the Clinical Director</li> <li>– ongoing £1.50/head from CCG allocations</li> </ul>

## FAQs

### **Does the Network have to be a set size?**

It is expected the most Networks will be between 30,000 and 50,000 patients. However, there will be exceptions to this, depending on local geography and what fits best with GP practices. For example, in rural areas a Network of less than 30,000 patients may exceptionally be necessary. In contrast, some areas may wish to have, or may have already developed, Networks of greater than 50,000 patients. In these cases, practices should discuss with the commissioner, what they think the best size for the Network should be, and the reasoning behind it prior to submitting their application documentation.

### **We are a practice with a patient list of over 100,000, can we be a network on our own?**

There will be some practices with patients lists in excess of the suggested 30,000 – 50,000, and which already operate across multiple sites within a geographic area. In such cases it is possible for the practice to operate as a Network itself, with an informal split of its constituent sites into 'neighbourhoods' of approximately 30,000-50,000 patients. More detail on how this will operate will be available in later guidance.

### **Can practices in different areas form a Network?**

Networks should form a single coherent area, without any gaps in coverage within the Networks outer boundaries.

### **Who employs the extended workforce funded under the DES?**

The network workforce could be employed in a number of ways, depending upon the structure of the Network, and how its member practices wish it to operate. For example, the Network may wish for the practice which has been nominated to hold the funding to use that funding to directly employ the staff that can then be utilised across the Network. Alternatively, employment of staff could be spread across the member practices, with funding redistributed from the fundholding practice as required.

Detailed guidance on the options available will be published in the coming weeks.

### **What happens if my practice does not want to join a Network?**

The 2019/20 contract agreement includes additional funding for engagement and participation within a Network. Should a practice not wish to engage in the Network DES, the respective practice will no longer qualify for this and the network will take responsibility for the provision of Network level service to that practice's patients.

### **How will the Clinical Lead of the Network be appointed?**

The appointment process for the role of the Network's Clinical Lead is down to the respective Network to decide and will need to be outlined within the Network Agreement.

### **Will we be able to claim reimbursement for existing staff under the DES?**

The scheme is designed to grow additional capacity through new roles, not to fill existing vacancies or subsidise the costs of employing people who are already working in primary care, whether funded by a practice, a CCG or a local NHS provider. Reimbursement through this route will only be for demonstrably additional people (or, in future years, replacement of those additional people as a result of staff turnover). The only exception to the 'additionality' rule is existing clinical pharmacists reimbursed under either (i) the national Clinical Pharmacists in General Practice scheme, or (ii) the national Pharmacists in Care Homes scheme. Both schemes have tapered funding. Both will be subsumed into the new more generous arrangement.

### **What will the Network Services within the DES contain?**

The service requirements within the DES will be phased in gradually over the next 5 years, covering the 7 areas mentioned above. These will be discussed and agreed with GPC England prior to each implementation, and full guidance will be issued as each service specification is introduced to the DES. Further information on what is broadly expected that each of these 7 services will cover will be available within the full DES guidance.

