



## Report to Cabinet

**Date:** 15<sup>th</sup> November 2022

**Title:** **Development of Primary Care Networks – Select Committee Report**

**Relevant councillor(s)** Councillor Jane MacBean, Chairman, Health & Adult Social Care Select Committee

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**Ward(s) affected:** *Not ward specific*

### **Recommendations:**

**Recommendations made by the Health & Adult Social Care Select Committee to Cabinet are that:**

#### ***Governance and oversight***

- 1) A firm commitment from the Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board (BOB ICB) to invest, both financially and in people, at local Place level to deliver, through strong leadership, regular monitoring and reporting on progress with PCN development, in an open and transparent way with key partners and stakeholders.**
- 2) The undertaking of a mapping exercise to align future primary care provision, based on fully developed PCNs across the county, with future housing growth at “Place and neighbourhood”. Ensure senior people are involved in conversations between Buckinghamshire Council and health in relation to future planning of primary care. Attendance at the planned joint Select Committee meeting.**
- 3) The preparation of an annual report to the Health & Adult Social Care Select Committee on the performance of PCNs, including resourcing, staffing and outcomes.**

### ***Development of Primary Care Networks***

- 4) PCN workforce plans to be published on the websites at Place level, as well as being shared with the Patient Participation Group Chairs on an annual basis to coincide with submission of them to the ICB.**
- 5) Ensure all PCNs have a dedicated network manager in post. Lobby NHS England for this to be a funded position as part of the additional roles reimbursement scheme to ensure fairness across the PCNs and to review the current yearly funding arrangements.**
- 6) Create through the Place-based Partnership support for PCNs to be creative when recruiting to the additional roles and to lobby NHS England to allow more flexibility around the roles matched to local need.**
- 7) Investment by the ICB to ensure a more consistent approach to GP websites leading to updated, accessible and user-friendly information for all patients. Websites to be used to promote the additional services available across the PCN, promote PPGs and to publicise current vacancies.**
- 8) Greater consideration should be given to the working environment. Access to IT and other equipment for PCN teams needs to be made easier and the funding available needs to be more clearly publicised to the Network. The benefits of working within a PCN need to be promoted through the recruitment campaigns and to the wider community.**

### ***Patient Participation Groups***

- 9) A “Back to Basics” approach should be adopted for developing Patient Participation Groups. The Place-based Partnership should work with Healthwatch Bucks and PPG Chairs to refresh and re-affirm the statutory need to establish a PPG, including a clear steer on the role of the Chair. A directory of PPG Chairs needs to be developed as a matter of urgency and circulated to all PPGs and Network Managers to encourage closer collaboration and the sharing of knowledge and best practice.**
- 10) Develop a fair, comparable and consistent approach in supporting the development of Patient Participation Groups across the BOB ICS with clear, measurable outcomes. These outcomes to be co-produced with PPG representatives.**
- 11) Provision of regular communications to all PPGs, including topical webinars with guest speakers and regular newsletters for PPGs to help increase their membership. Development of basic mandatory practices, including automatic sign-up prompts for new patients and greater collaboration between PPGs and GP**

practices to recruit PPG members.

- 12) Linked to recommendation 7, clearer and more comprehensive information on GP surgery websites relating to the work of the PPG, including upcoming meetings and minutes. It needs to be regularly refreshed and updated to include more emphasis on the benefits/improved outcomes that PPGs can provide for patients and a working mechanism for patients to contact their PPG.

#### *Partnership working*

- 13) Develop a formalised approach/framework with clear pathways to ensure named social workers are known to GPs, Practice Managers, Network Managers and Community Healthcare Teams.
- 14) Re-introduce regular Multi-Agency Group meetings to include mental health practitioners, social prescribers, social workers, district nursing teams and reablement & rehabilitation teams.
- 15) Community Board Managers to reach out to PPG Chairs and PCN Inequality Champions to build relationships and work together to realise both the NHS LTP in bringing PCNs, PPGs and local communities together as well as supporting the delivery of the “Opportunity Bucks” theme around health and wellbeing.

#### *Digital, data and information sharing*

- 16) Investment by the ICB to prioritise the delivery of consistent digital and data solutions. Develop a clear strategy for delivering population health management across the county for PCNs, informed by updated census information.

#### *Communications*

- 17) The Place-based partnership to develop a co-ordinated communications and engagement plan for key partners involved in PCN development to enhance joint working, deliver key public messages, written in Plain English and share best practice and information. Plans to be published on all GP surgery websites and PCN websites.

**Reason for decision:** For Cabinet to consider the recommendations of the Health & Adult Social Care Select Committee.

## **1. Executive summary**

- 1.1 The Health & Adult Social Care Select Committee agreed to set up an inquiry into the development of primary care networks in Buckinghamshire in September 2021.

1.2 A small group of councillors volunteered to participate in the inquiry. Evidence gathering meetings, with a number of stakeholders, took place between January 2022 to June 2022. The inquiry group was chaired by Cllr Jane MacBean and comprised of Cllrs Phil Gomm, Carol Heap, Howard Mordue, Alan Turner and Julia Wassell. Following the evidence gathering meetings the inquiry group then met to discuss and agree its key findings and recommendations, which are presented in the report found at Appendix 1.

## **2. Other options considered**

2.1 Appendix 1 provides further context to the Select Committee's recommendations. Cabinet is asked to consider these recommendations and provide a response to the recommendations relevant to the Council.

## **3. Legal and financial implications**

3.1 These will be considered as part of the Cabinet's response.

## **4. Corporate implications**

4.1 These will be considered as part of the Cabinet's response.

## **5. Consultation with local Councillors & Community Boards**

5.1 The report and recommendations were produced by a cross-party inquiry group of Members from the Health & Adult Social Care Select Committee.

## **6. Next steps and review**

6.1 As the focus of this inquiry is on the development of primary care networks, the majority of recommendations are aimed at the Integrated Care Board, Integrated Care Partnership and Place-based Partnership. Representatives from the Integrated Care Board have been asked to respond to the recommendations relevant to them. Cabinet will provide a response to the Select Committee recommendations aimed at the Council at its meeting on 15<sup>th</sup> November 2022. The Health & Adult Social Care Select Committee will then receive an update after 6 months and 12 months to monitor the implementation of all the recommendations.