



Development of Primary Care Networks Inquiry – Recommendations from the Health & Adult Social Care Select Committee inquiry group – 6 month recommendation progress table

Inquiry Chairman – Cllr Jane MacBean

Principal Scrutiny Officer – Liz Wheaton

Response from Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (ICB) and Buckinghamshire Council’s Cabinet

Recommendation	ICB/Cabinet’s Response – Y/N & comments	Progress recommendation monitoring in May 2023	Lead Health Partner/ Member/Officer & Timelines
<p>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.</p>	<p>Yes</p> <p>BOB ICB confirm that there is an intention to maintain investment in the infrastructure required for PCNs to deliver in line with National direction and available funding including.</p> <ul style="list-style-type: none"> • Internal overarching BOB wide and place focused support team • Access to PCN Leadership development • Continued commitment and encouragement to utilise the full ARRS workforce funding. • Access to the PCN development funding available • Consideration of 23/24 funding and development <p>PCN performance will continue to be monitored through an evolving dashboard and taken through</p>	<p>Yes</p> <p>The 23/24 PCN DES Contract has reinforced the investment in local leadership as well as removing the caps on a couple of ARRS roles and encouraging further recruitment of ARRS staff during the 23/24 year. There has also been a commitment from NHSE to include ARRS budgets in the ongoing funding for PCNs.</p> <p>ARRS workforce data continues to be regularly monitored to ensure that all PCNs are adding to appropriate capacity which will match their patient needs.</p> <p>The ICB has provided funding and commitment to supporting Primary Care</p>	<p>Louise Smith/ Simon Kearey</p> <p>Ongoing with regular review</p>

	the appropriate governance routes / partnership forums.	Leadership which includes integration of delegates from PCNs within the new Bucks GP Provider Alliance	
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.	<p>Yes</p> <p>BOB ICB commit to the direction of travel in line with National guidance and emerging contractual requirements of PCNs with regards development and delivery.</p> <p>PCNs will be encouraged to work in neighbourhood groups with Community Boards.</p> <p>BOB ICB will continue to work with planning partners with regards to housing growth and subsequent service and estates requirements in the appropriate forums.</p>	<p>Yes</p> <p>The focus for PCN development work in 23/24 will mainly be around delivery of integrated teams. These will support the Place Based Partnership plans of the ICB.</p>	<p>Louise Smith/ Simon Kearey Ongoing</p>
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.	<p>Yes</p> <p>PCN assurance will be developed in the coming months, expected to include resourcing, staffing and outcomes.</p>	<p>Yes</p> <p>This data will be included in the Annual Report t to the HWB.</p>	<p>Louise Smith/ Simon Kearey March 2023</p>
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.	<p>Agreed in part</p> <p>The ICB will be able to provide a summary of all place workforce finances allocated and roles recruited to on a yearly basis. There would however need to be further discussion as to which websites these could be posted on most appropriately.</p>	<p>Buckinghamshire Primary Care Team continue to hold patient engagement steering groups which include PPG chairs. Future guidance around this area will be agreed as part of the Patient Engagement Strategy being presented at the BOB ICB board in May.</p>	<p>Louise Smith/ Simon Kearey/ Julie Dandridge / Helen Clarke March 2023</p>
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.	<p>Agreed in part</p> <p>It is currently up to individual PCNs to decide how they utilise their funding. A network manager is recognised by the ICB as a valuable role but cannot be prescribed.</p> <p>As an ICB we are currently reviewing the current commitment to a band 7 network manager working with our GP Leadership Group to understand different options available.</p>	<p>This is still the case with some PCNs being covered by a collaboration of Practice Managers – there is currently still no dedicated funding for Network Managers provided under the ARRS scheme..</p> <p>With the advent of the Transformation and Innovation role there is a far greater emphasis on a Network Manager being in place for a PCN and we understand recruitment plans are in place for those who do not have one currently.</p>	<p>Louise Smith/ Simon Kearey March 2023</p>

	Yearly funding arrangements will be reviewed as a matter of course.		
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.	Yes The ICB will work to ensure that PCNs maximise the ARRS funding within the boundaries available and by working with partners so as not to destabilise the workforce and ensure patients are seen by the most appropriate professional and outcomes are maximised. Integrated ways of working will support this.	Yes We continue to support the recruitment for ARRS staff across the ICB by working closely with key partners such as Oxford Health and the Local Authority to ensure that opportunities are widely circulated and taken up.	Louise Smith/ Simon Kearey Ongoing
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.	Yes Currently most practices are using similar templates to provide their websites. The ICB will work with providers to ensure that certain minimum information levels are provided in line with the most recent guidance NHS England » Creating a highly usable and accessible GP website for patients	Yes Practices are regularly provided with key information to put on their websites and the primary care team monitor that this is happening.	Louise Smith/ Simon Kearey/ Julie Dandridge / Helen Clarke March 2023
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.	Yes The ICB is currently ensuring that all new and existing roles have appropriate IT to support them and that communities of practices are created to ensure peer support. As part of the new working arrangements the ICB will work with PCN directors to ensure ongoing transparency and involvement.	Yes A great deal of work has been carried out in this area and all ARRS staff should now have access to the appropriate equipment - with data sharing arrangements still being finalized.	Louise Smith/ Simon Kearey/ Andy Ferrari March 2023
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	Yes The ICB intends to develop its patient and public engagement strategy including that linked to place and community hubs. This may include PPG development as appropriate and will be reviewed in a wider context with support from Healthwatch and Nursing/Communications Directorates. The ICB have noted that the Place-based partnership when set up	Yes The ICB has committed to support Healthwatch to support the continued development of PPGs – the Engagement Strategy paper being presented to the board in May expected to outline the way forward in this aspect.	Louise Smith/ Simon Kearey December 2022 and September 2023

<p>matter of urgency and circulated to all PPGs and Network Managers to encourage closer collaboration and the sharing of knowledge and best practice.</p>	<p>will consider this.</p>		
<p>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.</p>	<p>Yes</p> <p>As above (point 9)</p> <p>The ICB will continue to work with PPGs on the best way to develop patient and public engagement for Primary Care</p>	<p>Yes</p> <p>See above (point 9)</p>	<p>Louise Smith/ Simon Kearey/ Julie Dandridge / Helen Clarke April 2023</p>
<p>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.</p>	<p>Yes</p> <p>As above (point 9)</p>	<p>Yes</p> <p>See above (point 9)</p>	<p>Louise Smith/ Simon Kearey/ Julie Dandridge / Helen Clarke March 2023</p>
<p>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.</p>	<p>Yes</p> <p>As above (point 7 & 9)</p> <p>Healthwatch and the ICB may continue to provide updates which can be publicised on Practice Websites which can be used to support and show the value of the work of PPGs</p>	<p>Yes above (in point 7 and 9)</p>	<p>Louise Smith/ Simon Kearey March 2023</p>
<p>13. Develop a formalized approach/framework with clear pathways to ensure named social workers are known to GPs, Practice Managers, Network Managers and Community Healthcare Teams.</p>	<p>Agreed in part</p> <p><u>Council response</u></p> <p>The Council understands that the Inquiry's recommendation in relation to having a named social worker is about creating a single point of contact (SPOC) for PCNs into adult social care. Named social workers are being established for adult social care residents who live at home in the community.</p>	<p><u>Council response</u></p> <p>Actions are now complete. A Head of Service within ASC Operations has been allocated as the thematic lead for ensuring strong relationships between PCNs, GPs and social care. Closer working has been achieved from this approach to integrate into BAU with the following actions taken:</p>	<p>Cabinet Member: Cllr Angela Macpherson, Cabinet Member for Health & Wellbeing</p> <p>Lead Officer: Service Director for ASC Operations, Buckinghamshire Council (Sara Turnbull)</p>

The service understands the vital importance of a SPOC to facilitate effective working and the restructure of adult social care operations in June 2021 was designed to align the service more closely to PCNs in 4 geographical areas of Buckinghamshire - North, East, South and Central:

ASC Area (North, East, South & Central)	PCNs in the ASC areas In order of size of the area covered by the PCN (brackets: overlap is minimal)
North	Aylesbury North PCN AVS PCN BMW PCN Maple PCN
East	Aylesbury North PCN Chesham & Little Chalfont PCN Westongrove PCN Mid Chiltern PCN Maple PCN (BMW PCN) (Dashwood PCN) (Cygnet PCN)
South	Arc PCN South Bucks PCN The Chalfonts PCN Mid Chiltern PCN (Chesham & Little Chalfont PCN) (Cygnet PCN)
Central	AVS PCN Mid Chiltern PCN Dashwood PCN Cygnet PCN (Arc PCN)

To ensure that any enquiries or requests for support are picked up in a timely manner, adult social care has provided each PCN with a specific telephone number and generic email address for the assigned social work team:

- a) Contact details have been communicated with all PCNs for adult social care for locality teams. Information provided on appointment of SPOC (named worker) for cases where this is required.
- b) This has been completed – these links have been established and staff are attending monthly online meeting with The Swan & Aylesbury North PCN, GP surgeries at Hughenden Valley and Poplar. The plan is to expand this approach with other localities and PCNs countywide.
- c) ASC provided a presentation to all the PCN Network coordinators meeting in January 2023, sharing Buckinghamshire Council’s vision and the scope of work covered by ASC.

North	Unit 1 Midshires Business Park, Smeaton Close, Aylesbury, HP19 8HL	01296 38
East	King George V House, King George V Road, Amersham, HP6 5AW	01296 38
South	Seeleys House, Campbell Drive, Knotty Green, Beaconsfield, HP9 1TF	01494 58
Central	Buckinghamshire Council, Queen Victoria Road, High Wycombe, HP11 1BB	01296 38

Integrated Care Board response

This work is very much the focus of establishing integrated neighbourhood teams. We have now aligned teams across the varies areas and partners and are working on establishing a key single point of contact for each team

Louise Smith/ Simon Kearey
March 2023

A manager within social care will be contacting all PCNs within the next 3 months to ensure PCNs are clear on the process, which will be monitored and reviewed as necessary to ensure joint working is as effective as possible for the benefit of residents. Adult social care would also benefit from as SPOC within the PCNs and this is something that will be asked for when making contact.

Integrated Care Board response

As part of the wider development of integrated care teams it is expected that relevant individuals in PCNs, Practices and community teams are linked into local social workers and vice versa.

14. Re-introduce regular Multi-Agency Group meetings to include mental health practitioners, social prescribers, social workers, district nursing teams and reablement & rehabilitation teams.

Agreed in part

Integrated Care Board response

Multi-discipline team working is a key aspect of the Integrated Care Partnership strategy linked to primary care.

Agreed

Integrated Care Board response

All teams are very much currently working closely as part of a Multi-disciplinary team approach.

We are following up on some work undertaken in MK to support integrated teams.

Social Care: in MK they are about to give Social workers access to the HIE (Health Information Exchange) so that Social Workers can see the full Primary Care and hospital medical record as long as they have recorded

Louise Smith/ Simon Kearey/ Jenny Ricketts
March 2023

	<p><u>Council response</u></p> <p>Adult social care regularly works with the partners referenced in the Inquiry’s recommendation as part of our business as usual approach of multi-disciplinary meetings linked to individual clients.</p> <p>There is a well established process for discussing complex cases, partners are able to refer and take part in complex case panels, if business as usual approaches are not achieving the outcomes needed for our residents.</p> <p>The Council agrees the need for a wider discussion with health and the VCS in developing the approach for more integrated neighbourhood working in Buckinghamshire. As yet, there is no blueprint on the approach but a new joint programme team has been established to take forward the delivery of integrated health and care. Proposals will be discussed at the new Place-based Board, once it is established for Buckinghamshire.</p>	<p>the NHS number on their IT system. This is an enormous achievement and they expect 70% coverage of Social Services clients.</p> <p><u>Council response</u></p> <p>Multi-agency group meetings are part of the BAU within adult social care. Ongoing liaison with partners happens operationally and strategically.</p>	<p>Cabinet Member: Cllr Angela Macpherson, Cabinet Member for Health & Wellbeing</p> <p>Lead Officer: Service Director for ASC Operations, Buckinghamshire Council (Sara Turnbull)</p>
<p>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.</p>	<p>Agreed</p> <p><u>Council response</u></p> <p>The Opportunity Bucks programme aims to ensure that all residents in the county have the opportunity to succeed, that nobody gets left behind and we reduce inequality within our communities. Through this programme, we are targeting 10 wards where there are longstanding challenges and residents are facing significant hardships. This programme is overseen by a board with multi-agency membership including the Council, NHS, BBF, LEP, Registered Social Landlords and VCSE.</p>	<p>Agreed</p> <p><u>Council response</u></p> <p>The Opportunity Bucks programme is progressing and priority initiatives for the next 12 months have been identified within the Health & Wellbeing theme. These priorities include establishing play streets, smoke free parks and playgrounds and ensuring there is sufficient mental health support within schools in target areas. In addition to the theme priorities, ward partnerships have been established in the 10</p>	<p>Cabinet Member: Cllr Steve Bowles, Cabinet Member, Communities</p> <p>Lead Officers: Wendy Morgan-Brown, Head of Community Boards and Matt Everitt, Service Director, Service Improvement</p>

	<p>Community engagement and involvement is a key principle of the programme. We are establishing Ward Partnerships within each of the 10 target areas to provide local insight, identify issues and best practice, and codesign solutions. The Ward Partnerships are supported by Community Board Managers who help to identify activity being delivered across partners within the ward areas and coordinate involvement in the partnership.</p> <p><u>Integrated Care Board response</u></p> <p>Each Community Board will be linked in to their local PCN leads.</p>	<p>target wards, with input from local Councillors, community organisations and local representatives to identify local issues and challenges to address through the programme.</p> <p>Community Board Managers have contact details for PCNs (and vice versa). Involvement in the Boards varies depending on each Board and their priorities/meeting subject, or when there is a need or value to them for the Board to be involved.</p> <p><u>Integrated Care Board response</u></p> <p>There has been some work on this but work still to do to ensure a comprehensive and across the county link between the Community Boards and the work being undertaken by neighbourhood and PCN teams.</p>	<p>Louise Smith/ Simon Kearey March 2023</p>
<p>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.</p>	<p>Yes</p> <p>Population Health data will be provided on a regular basis to all PCNs who will use this to drive a population health management (PHM) approach to key patient cohorts as well as monitor outcomes.</p> <p>All PCNs will have a good level of PHM knowledge and access to support if needed.</p>	<p>This is an outstanding piece of work – resources have been provided to ensure that PHM information can be provided and PCNs have taken advantage recent updates to the JSNA. Advanced Care Finder tools are being worked on to deliver to all practices and PCNs in the next couple of months to support PHM work locally.</p>	<p>Louise Smith/ Simon Kearey/ Andy Ferrari / Jane O’Grady June 2023</p>
<p>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.</p>	<p>Yes</p> <p>When set up, we would expect the Place-based partnership to develop a comprehensive communication and engagement plan aimed at delivering key public messages, encompassing best practice and developments elsewhere.</p>	<p>Yes</p> <p>We are working closely with Place Based Partnerships to ensure consistent and comprehensive communications are provided.</p>	<p>Louise Smith/ Simon Kearey/ Philippa Baker June 2023</p>