



Somerset Primary Healthcare Ltd

# 9 April LMC Study day - PCN

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# PCNs – surely we can keep it simple?

Remember the LMC workshops from early Federation days which presented advice from Porter Dodson and Lentells.

If thinking of a Lead practice or new local company...

Don't underestimate:

- Risk
- Workload
- Responsibility
- Diseconomies of scale
- Impact of fragmentation

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# Can SPH help?

SPH provides the various company and governance structures that enable NHS contracting at federation/PCN level

AND does so in a relatively cost-effective, risk-managed and efficient way.

The asks of PCNs, now and in transition to ICS, are immense. Proper infrastructure, management and governance is essential. Don't be tempted to take short cuts

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# How SPH and the GP Board are preparing for a future ICS

- ▶ Focusing on bringing the providers together
- ▶ Preparing to offer a hosting service for employees and services into PCNs
- ▶ Considering ways to bring PCN CDs into SPH structure
- ▶ Securing funding to support the development of an Umbrella Primary Care Organisation



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# Considerations for PCNs

- ▶ Employment may not be as favorable as re-deployment of resources working with other providers
- ▶ The BMA Primary Care Handbook offers an excellent summary of possible models
- ▶ Governance and Policies may benefit from a shared approach across PCNs

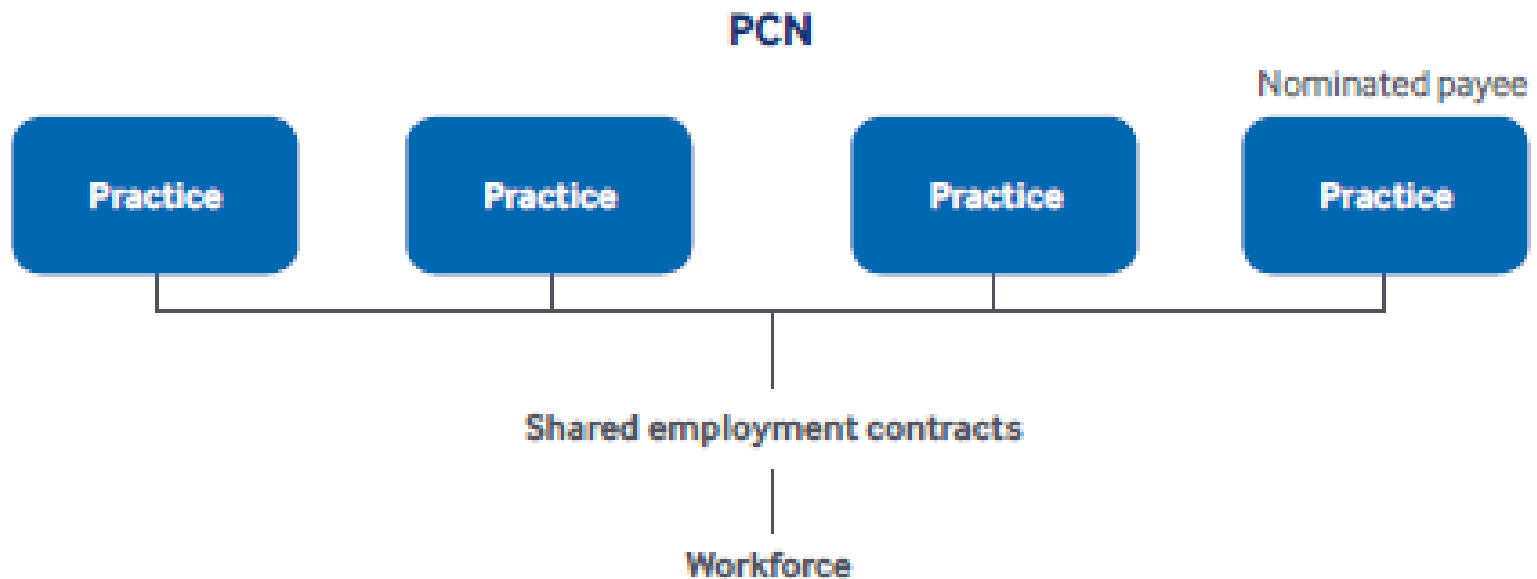


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# PCN Models

## 1. Flat practice network

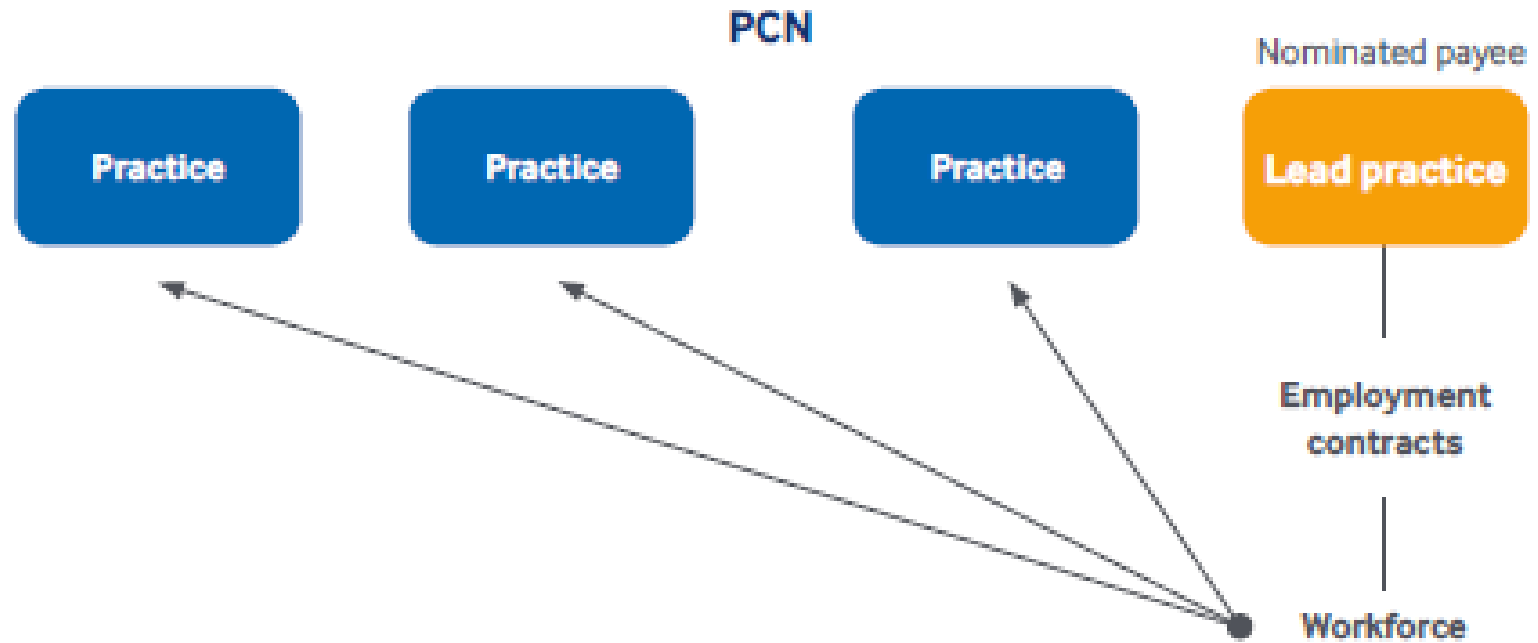


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# PCN Models

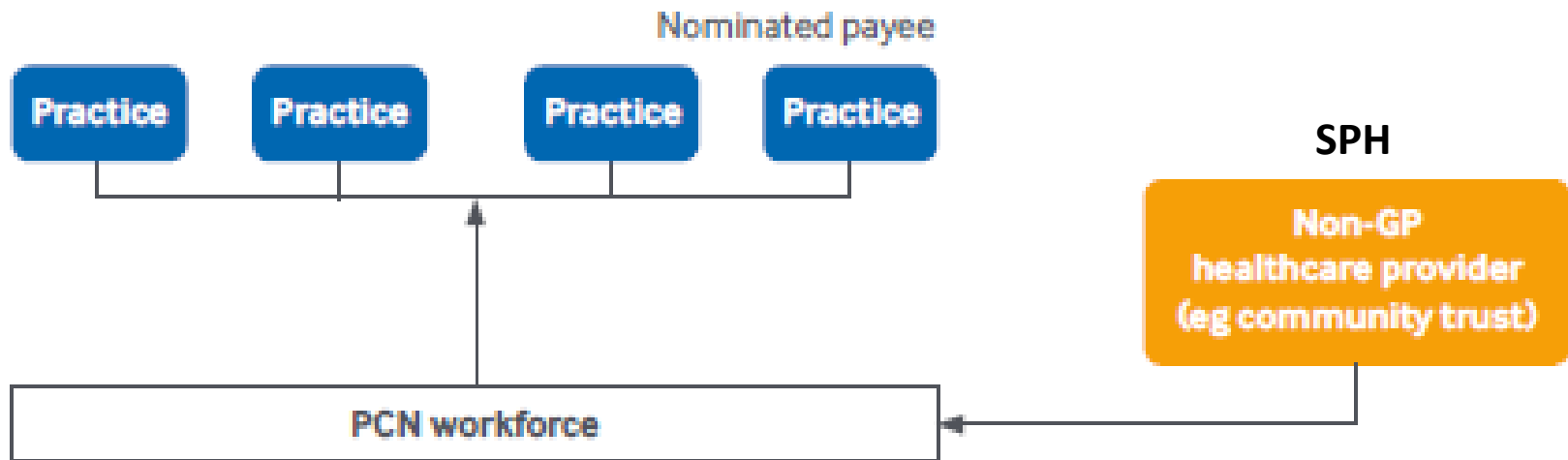
## 2. Lead provider



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# PCN Models

## 5. Non-GP provider employer models



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# Can SPH do it all?

No... but it can be a significant partner to each PCN

- ▶ For it to work the PCN and SPH need to work together
- ▶ And usually the LMC/FT/CCG too!
- ▶ It requires individual projects to be managed by individual PCNs, but with support from SPH.

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# As soon as possible...

- ▶ Agree explicit expectations within the PCN and between the PCN and SPH
- ▶ Consider the PCN CD being a Director of SPH
- ▶ Depending on your chosen model CQC, Pensions and VAT may need very careful consideration
- ▶ Seek expert accountancy advice
- ▶ ensure complete indemnity at medical professional, organisation, public and employment liability level

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## Cont...

- ▶ Consider shared policies and procedures – for example, complaints procedure, risk management etc.
- ▶ Remember that we are likely to be asked to work much more closely with other providers in the future. Building these relationships will require significant effort

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# Summary

In these time of austerity, change and chaos we need to:

- ▶ Make efficient use of resources
- ▶ Exploit economies of scale
- ▶ Avoid fragmentation within primary care
- ▶ Avoid fragmentation with other providers/organisations
- ▶ Ensure proper assessment and mitigation of risk
- ▶ Ensure impact on front line patient care is maximised
- ▶ Reduce workload, uncertainty and burden for practices (GPs and Managers!)

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# **SPH IS READY to help**

- ▶ SPH doesn't have all the answers in a ready-to go format. But It does know how to get us all there!
- ▶ Developed strong relationships with all providers to make the changes as smooth and successful as possible.

**Please do speak to us  
and support the development of SPH ready for an ICS...**



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**Thank you**

**Any questions?**

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