

Why does your PCN need a Strategy?

The start of the journey for Primary Care Networks (PCNs) is just the beginning.

Practices need to have established their Network and submitted their initial Network Agreement by 15th May 2019.

The next step is to complete the Schedules to the Network Agreement by 30th June 2019.

The initial Network Agreement can be submitted on behalf of the Network, however the Schedules need sign off by all practices within the Network.

The Network Agreement and accompanying Schedules form a legally binding document and contain within them 104 clauses and 7 schedules.

Schedules

The Schedules are made up of:

Schedule 1 - How the PCN holds meetings and makes effective decisions

- Governance of the Network

Schedule 2 - Additional Terms

- These are additional to the ones that are in the national template.
- For example, if you wanted to add additional duties to the Clinical Director role that were only relevant to your Network.

Schedule 3 - Activities

- For example, how will Extended Hours be provided?
- Who is the provider of services? (subcontracting arrangements)
- For CQC purposes, who is providing the regulated activity?
- Any other specific considerations for services and/or their delivery.

Schedule 4 - Financial Arrangements

- Who will be the lead practice for funding from the commissioner?
- What level of funding will the network receive?
- What will the funding pay for? (i.e. workforce, extended hours, other services)
- What additional funding may practices/members require/input?
- How will funding be transferred between practices, what for, when?
- How are profits/losses/liabilities apportioned?
- Banking arrangements and accountancy?
- How is income and expenses dealt with? What is the difference between a PCN and practice income/expense?
- Arrangements for cross-indemnities (if required)
- Any other specific considerations for funding?

Schedule 5 - Workforce

- e.g. the employment of the “additional staff roles” that will be available to the PCN at 70% or 100% reimbursement.

Schedule 6 - Insolvency

- This schedule sets out a list of suggested different events of insolvency that would enable Members to take action under the Clauses.

Schedule 7 Arrangements with organisations outside of the Network

- This is used for referring to or setting out arrangements with organisations outside the PCN.
- It could be complicated to weave in other arrangements into the Network Agreement and so Schedule 7 enables them to be recognised and identified by the PCN.

Once all of the above have been submitted, your Network will become functional from the 1st July 2019.

To take your Network to the next stage of being operational, you will require a strategy that considers how it will operate and provide joined up models of care to benefit your local residents.

Your strategy should include, but not be limited to:

Governance

- Decision making
- Management structure.

Developing the Leadership and Culture

- Workforce development.

Engagement

- With the wider partners in your community outside of health, including voluntary, community and faith groups and local councils.

Planning the delivery of your services

- Extended Hours.

Vision & Values

- Where do you want your PCN to be in the future?
- How will you behave to get to achieve your goals?

Aims & Objectives

- SMART methodology.

Priorities for the short, medium and long term

- What do you want to achieve, by when.

As you will see, there is a significant amount of time, effort and understanding that is required to enable PCNs to function to the best of their ability.

A strategy will ensure that your Network is functioning at the right level, and at the right speed, in order to achieve your goals.

**Discover how Orr Medical Training
can help you develop your PCN
strategy and email us at:
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