



Primary Care Doncaster Limited

Strategic Business Plan 2019 - 2021

Contents

Contents 2

1. Executive Summary 3

2. Vision, Mission and Values 4

3. Successes 5

4. Opportunities..... 6

5. Strategic Priorities 7

6. Enabling Workstreams..... 9

7. Work Plan..... 9

8. Workforce Strategy – Priority Actions 11

9. Review..... 12

1. Executive Summary

Primary Care Doncaster (PCD) Ltd is a company limited by shares, set up in June 2017. The member shareholders are the 40 general practices in Doncaster, each holding a share worth £1. Each neighbourhood of practices has elected 2 Directors of the company. These 8 Directors constitute the Board of the company, along with the Chief Executive, the Business Development Manager, and the Local Medical Committee (LMC) Chief Executive Officer, as non-voting Board Members.

The company was set up in response to a number of drivers. Firstly, general practice workload has grown significantly over recent years, due to a growing elderly population, changes in medical technology and the ways in which patients are treated. This increase has not been matched by a proportionate increase in funding or workforce, leading to more pressure being put on GPs and their teams. Working together as a federation can help to ease this pressure, potentially by doing certain functions at scale, pooling resources, developing the workforce, and sharing best practice.

Secondly, national and local policy drivers increasingly require a collective response from general practice. The NHS Long Term Plan (2019) describes how funding will be routed through primary care networks (PCN), made up of groups of practices working together, to deliver more integrated and holistic patient care; underpinned by network agreements and contracts. Locally, practices can be supported to work in their four respective neighbourhoods by PCD, as an existing legal entity to act as the vehicle for contracts and funds to flow through to general practice. Alongside this, PCD represents general practice within the Doncaster Provider Alliance, influencing and shaping the design of future health & social care.

And finally, there are population health challenges that can only be fully addressed by practices working together. Reducing health inequalities, and tackling the prevention agenda, is a huge task; but one that general practice should be at the very heart of, as it is the first port of call for thousands of families. PCD aims to be a socially responsible organisation, working with its members and all its partners, to reverse the trends in preventable long-term conditions, and reduce variation in access to and quality of care across the borough.

This Strategic Business Plan for 2019-2021 is a refreshed version of the plan created in 2017. The refreshed priorities take account of the current context, which includes PCD's position as an established and viable provider of services, the Doncaster Provider Alliance, Doncaster Growing Together, and the NHS Long Term Plan.

3. Successes

In the first 18 months of its life, PCD has achieved some milestone successes, which now act as the foundations for this refreshed strategic plan. The most significant of these are listed below against the 3 pillars of our mission.

3.1. Sustainability & resilience

- Developed a Workforce Strategy, based on high quality intelligence gathered from member practices
- Provision of TARGET education sessions to practices, based on their self-declared training needs
- Membership of Doncaster Chamber of Commerce for all practices, giving access to expert advice on Human Resources, Health and Safety, legal matters
- Visa Sponsorship status, to allow PCD to sponsor newly qualified immigrant GPs to work in Doncaster
- Successful bid to national Clinical Pharmacist scheme, providing pharmacist sessions to 7 practices
- Development of Doncaster locum bank

3.2. Transformation & Innovation

- Delivery of Inclusion Health Clinics for vulnerable people, via partnership approach
- Offering First2Physio services for direct referral from general practice
- Membership of Doncaster Provider Alliance, signed Memorandum Of Understanding
- Facilitating practice participation in Trainee Nurse Associate scheme, in partnership with Doncaster and Bassetlaw Teaching Hospital Foundation Trust (DBTHFT)
- Growing local Doncaster GPs with Extended Roles, via Community Dermatology partnership with Leeds GPs
- Development of integrated wound care services with partners

3.3. Accessing Opportunities

- Hosted the Releasing Time for Care Programme, supporting practices with backfill to engage in quality improvement activity, with measurable results
- Attracting investment in development of PCNs
- Won contracts for Extended Access Services and TARGET, creating organisational viability, that in turn allows PCD to invest in general practice, to the benefit of its members

4. Opportunities

4.1. National Policy

The NHS 10 year Long Term Plan, published in January 2019, sets out a new direction of travel for healthcare, and along with that, general practice.

The plan confirms a £4.5 billion uplift to primary medical and community health services, with the objective to improve out-of-hospital care. In addition, all of England will be covered by integrated care systems (ICSs) by April 2021 and key responsibilities placed on PCNs (formed of GP practices working together on agreed network footprints, signing an additional contract as an extension to their current contracts). Funding flows and performance frameworks will be reformed to support both ICSs and PCNs.

There is a major push on a range of clinical priorities. These priority areas include children and young people (itself made up of five further sub-areas), cancer, cardiovascular disease, stroke, diabetes, respiratory disease and mental health. Furthermore, a full chapter is dedicated to reducing health inequalities, with specific reference made to particular vulnerable groups such as the homeless and young carers.

4.2. Local Policy

Locally, the Doncaster Place Plan 2016 – 2021 is being refreshed, and describes the vision of an Integrated Care Partnership (ICP) for Doncaster, within the bigger footprint of the South Yorkshire and Bassetlaw ICS. It is the ambition for all parts of the system to work together on transformational change, to prevent the deficit spiralling to £140m by 2021. This shows us there is a significant funding challenge, but within that significant opportunity for primary care to help provide more in the community and increase efficiency.

Increasingly, there is a recognition that we need to maximise community assets to create greater resilience and independence from statutory services. Therefore local focus and emphasis is being placed on development of integrated neighbourhoods, with general practices working strongly together as a critical cornerstone for their success.

There are six priority areas identified to test the concept of the ICP:

- Urgent & emergency care (including extended access)
- Dermatology
- Intermediate Care
- Complex Lives
- Vulnerable Adolescents
- Starting Well (1001 days)

General practice has a role to play in all of these areas, and as such they all constitute opportunities for primary care.

5. Strategic Priorities

5.1. Original priorities

In the original Strategic Plan, the following were identified as the priority focus areas for PCD in the first 12 months, selected through consideration of:

- Potential financial value
- Alignment with PCD key strengths
- Level of certainty of success
- Feedback from member practices

PCD's priority service areas for income generation in 2017-2019 were:

- Primary Care Education and Development
- Community Dermatology Service
- Extended Access Service

As at January 2019, PCD is delivering Extended Access and TARGET services, having won tenders for these contracts in 2018. The community dermatology service is subject to a longer term approach to implement an accreditation process for local GPs, in order to deliver a service in the future.

5.2. Priority Areas 2019-2021

PCD held an organisational time-out in September 2018 to revisit the mission of the organisation and to reset the strategic aims, goals and priorities against the most up-to-date health and social care context. Broadly, three priority areas were agreed, which have since been refined and tested against key emergent policies, including the NHS 10 Year Plan. These areas are:

- **Extended Access: Deliver, Develop, Maintain**

This contract represents PCD's most significant income stream, which is critical to organisational viability. It is imperative that it is delivered effectively, that patients and practices alike receive a high quality service, and all opportunities are taken for innovation and transformation within this financial envelope, as part of the contractual requirement to expand the capacity over the contract term. For these reasons, it continues to be a high priority within PCD's strategy over 2019-2021.

- **Integrated Pan-Doncaster Services**

The Doncaster Place Plan emphasises heavily the need for services to be delivered closer to home, and for all providers to work in a more integrated and holistic way to achieve this. General practice is the fundamental cornerstone to success in this regard, and as such PCD has a key role in influencing, shaping, and facilitating the delivery of new integrated pathways and services. PCD recognises three broad areas of focus within this priority area:

- **Urgent & Emergency Care (UEC) 2020**; the urgent care system, inclusive of GP Out-of-Hours, the Same Day Health Centre, Front Door Assessment Service, Extended Access, and Emergency Care Practitioner Home Visiting, is due for procurement in 2020, as all current contracts expire on 30 September of that year
- **Integrated Neighbourhoods / Primary Care Networks**; these are a clear emphasis of both the local Doncaster Place Plan, and the NHS Long Term Plan. PCD has a contract to develop Primary Care Networks and is committed to doing this within a wider partnership approach around Integrated Neighbourhoods. PCD will work with member practices to support their development of the required network agreements, and to achieve the associated investment; under whatever guise member practices give a mandate for
- **Integrated Care System (ICS) / Integrated Care Partnership (ICP)**; PCD is committed to being a credible and strong partner alongside the rest of the health and social care organisations within the Doncaster Provider Alliance. PCD will support where appropriate the priorities of this Alliance, under the auspices of the signed Memorandum of Understanding. Current focus areas are “The First 1001 Days”, “Vulnerable Adolescents”, “Complex Lives”, Dermatology, UEC, Intermediate Care, and Learning Disabilities.
- **Income Generation Streams**

To ensure PCD continues to be a viable and sustainable organisation, achieving additional income streams is always a strategic priority. Without this, the company runs the risk of not existing long enough to deliver the mission for primary care that is described above. The following opportunities have been identified as initial priorities to scope out, based on an assessment of the local and national landscape:

- **Dermatology**; this remains a priority from the original strategy, as long waiting times for new outpatient appointments at the acute hospital still remain, and the consultant dermatology workforce crisis deepens. PCD is looking to forge a partnership with Street Lane Skin Services, Leeds, who will deliver a community dermatology service in Doncaster to act as a training base for local GPs who wish to be accredited with an Extended Role in Dermatology. The long term ambition is for Doncaster GPs to then provide this service, in Doncaster
- **ENT**; initial conversations have been held with DBTHFT, and there appears to be consensus that a significant proportion of the work done in the hospital could be done in GP practices
- **Mental Health**; this continues to be a national priority, re-emphasised in the Long Term Plan, with recurrent funding associated with it. Working together with Rotherham, Doncaster and South Humber Foundation Trust (RDaSH), the commissioners have asked PCD to come up with a proposal to deliver Enhanced Physical Health Checks for

patients on the Severe Mental Illness register. Potential recurrent funding could be attached

- **Community DVT pathway**; work is required to understand the potential of this in Doncaster, as it is something that federations elsewhere have helped redesign and deliver more care out-of-hospital
- **Long Term Conditions (LTCs)** of Prevalence: both Diabetes and Cardiology are priorities for prevention work in the Long Term Plan, and both are prevalent LTCs in Doncaster, with a real potential to improve population health
- **Integrated Wound Care** service; Doncaster Clinical Commissioning Group (CCG) have asked the Provider Alliance to work together to deliver this in 2019. PCD will support and facilitate member practices to deliver high quality and integrated wound care services as part of the agreed framework, as this is an area of high priority for them

The PCD work plan describes how the corporate function will dedicate the required resources to progressing them, and the timescales for the various actions.

6. Enabling Workstreams

These enabling workstreams are critical to the achievement of the above. They are:

- **Workforce, Education & Training** ; This area includes delivery of TARGET, and the Workforce Strategy¹
- **Member practices engagement**; This is ongoing and continuous, and takes multiple forms, including individual practice visits, neighbourhood meetings, annual events, practice manager meetings, TARGET, and being open to requests to help with practical daily issues where a collective/centralised approach will relieve pressure on individual practices
- **Estates**; PCD will support the delivery of the CCG Primary Care Estates Strategy
- **IT**; PCD will continue to support the work on rolling out the Integrated Digital Care Record, and the integration of SystemOne TPP and EMIS Web clinical systems for the benefit of practices and patients

7. Work Plan

This document sets out the sub-tasks under each priority area and the target milestones and timescales for delivery

¹ See Section 8 for the Workforce Strategy's Priority Actions

PCD Work Plan 2019-2021			2019												2020											
Created January 2019			Jan	Feb	Mar	Apr	May	Jun	July	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	July	Sept	Oct	Nov	Dec		
Extended Access: Deliver, Develop, Maintain	Utilisation	6 month review completion	■	■	■	■																				
		Implement recommended findings																								
		Patient communications and engagement		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Ongoing practice support, training and awareness		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
	Workforce	Review and trial different clinical skill mix according to need		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Explore alternative recruitment routes		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
	IT	Work with EMIS & TPP re: pipeline developments		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Optimise Lantum capability	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Wrap-around IT packages including ICE, ERS etc	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
	Expansion	Family hubs (fits with Place Plan priority and national agenda)	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Inclusion Health clinics (fits with Place Plan priority & also national agenda)	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Medication Reviews, Partnership working with pharmacies		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
Increase capacity to 45 minutes per 1000, based on need and evidence			■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■			
Pan-Doncaster Integrated Services	UEC 2020	Attend UEC Strategic Group	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■			
		Participate in UEC Task & Finish Group	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Support data collection and scoping work		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Report back outcomes to PCD Board							■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Review position re procurement																								
	Integrated Neighbourhood	Appoint Project Co-Ordinators	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Identify Clinical Leadership		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Understand support required by practices re network agreements		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Run IN workshops																								
	ICS/ICP	Deliver pilots and projects		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Engage with ICS PC Workstream		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Membership of Doncaster Provider Executive Group		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
Income Generation Streams	Dermatology	Support Areas of Opportunity	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■			
		Dermatology scoping, costing & funding discussions	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Dermatology training and education needs addressed		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Community Dermatology pilot go-live																								
		Dermatology contracting negotiations - ACP level																								
	Mental Health	Sustainable Community Dermatology service in place with supporting contract																								
		Design of SMI Enhanced Healthchecks model with RDASH	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Mobilisation of SMI service																								
	Wound Care	Implement and continuous review																								
		Support data collection		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■		
		Identification of hub practices and service model design																								
		Training Needs analysis																								
Support training plan delivery																										
ENT	Support mobilisation																									
	Go-Live for practices																									
	DVT																									
	LTC - Diabetes/Cardiology																									

8. Workforce Strategy – Priority Actions

The PCD Workforce Development Strategy sets out some priority actions to be taken forward in 2019-2021, and are included here for completeness as they are fundamental enablers to delivery of the PCD Strategic Priorities and associated work plan.

Priority Initiative	Lead Entity
Support practices to deploy the APEX/Insight tool , and help them use the intelligence to best effect, identifying business risks and opportunities. We will work together to understand these at neighbourhood level, and offer practices the head-space to find solutions, as well as practical support implementing them.	PCD & SYB PCWTH ²
Exploit the potential of the federation “at scale” model, by exploring the options for PCD to be host employer for clinical roles, including GPs and nurses , which work across a number of practices (mirroring the employment model of the clinical pharmacist scheme). There are several GP vacancies held in Doncaster, and a pending nurse retirement risk; shown by the data collated so far. There is potential through this approach to offer a more varied portfolio type career for primary care clinicians, which could be more attractive than working in a traditional salaried role in one practice. PCD will work with the LMC and initially practices with long-standing vacancies to explore this.	PCD & LMC
Develop a local Vocational Training Scheme for Practice Nurses. The VTS model is an effective one for GP trainees and could be deployed for nurses also. This is becoming more and more urgently needed, as the data shows, the local nursing retirement risk is real, and action needs to be taken. SYB PCWTH is pursuing this at regional level and have the support of PCD in making it happen in Doncaster.	SYB PCWTH
Trial the implementation of Doncaster local staff network (locum bank); digital platform upon which practices can advertise vacant shifts/gaps, for local Doncaster clinical and non-clinical staff to book onto.. Maximises unused capacity within local workforce and establishes a fair system with practices setting rates and requirements, cutting out locum agencies	PCD
Offer ongoing development programme for practice administrative staff , ensuring vital skillsets are sustained and enhanced, and leadership is developed at every level, fostering a culture of continuous learning and positivity	PCD
Clinical pathway redesign; align strategies across ICS, Doncaster Place Plan, CCG and PCD, to provide a coherent framework within which to develop primary care workforce. Agree on priority pathway areas; initial recommendations include dermatology, mental health, ENT, VTE, & MSK. Offer clear commissioning intentions over next 3-5 years to inject greater certainty	CCG & PCD
Integrated neighbourhood model; progress work to develop networks within neighbourhoods and re-establish the health care community ethos across organizational boundaries, releasing capacity by freeing up workforce from unnecessary duplication and bureaucracy. Adapt successful models from elsewhere that have capitalized upon social prescribing and asset-based community development, to make tangible improvements to the workforce through better recruitment & retention	PCD
Scan, disseminate and co-ordinate national schemes for consideration by Doncaster practices, including Return To Work schemes, GP Resilience Scheme, International Recruitment Scheme	CCG

² South Yorkshire & Bassetlaw Primary Care Workforce & Training Hub

9. Review

The overall Strategic Business Plan will be reviewed in January 2020. The work plan will be monitored regularly via the monthly PCD Board of Director meetings.