



Primary Care Doncaster Limited

Strategic Business Plan 2017-19

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1. Executive Summary

Primary Care Doncaster Ltd is a company limited by shares, set up in June 2017. The member shareholders are the 43 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 Manager, and the LMC Secretary, 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.

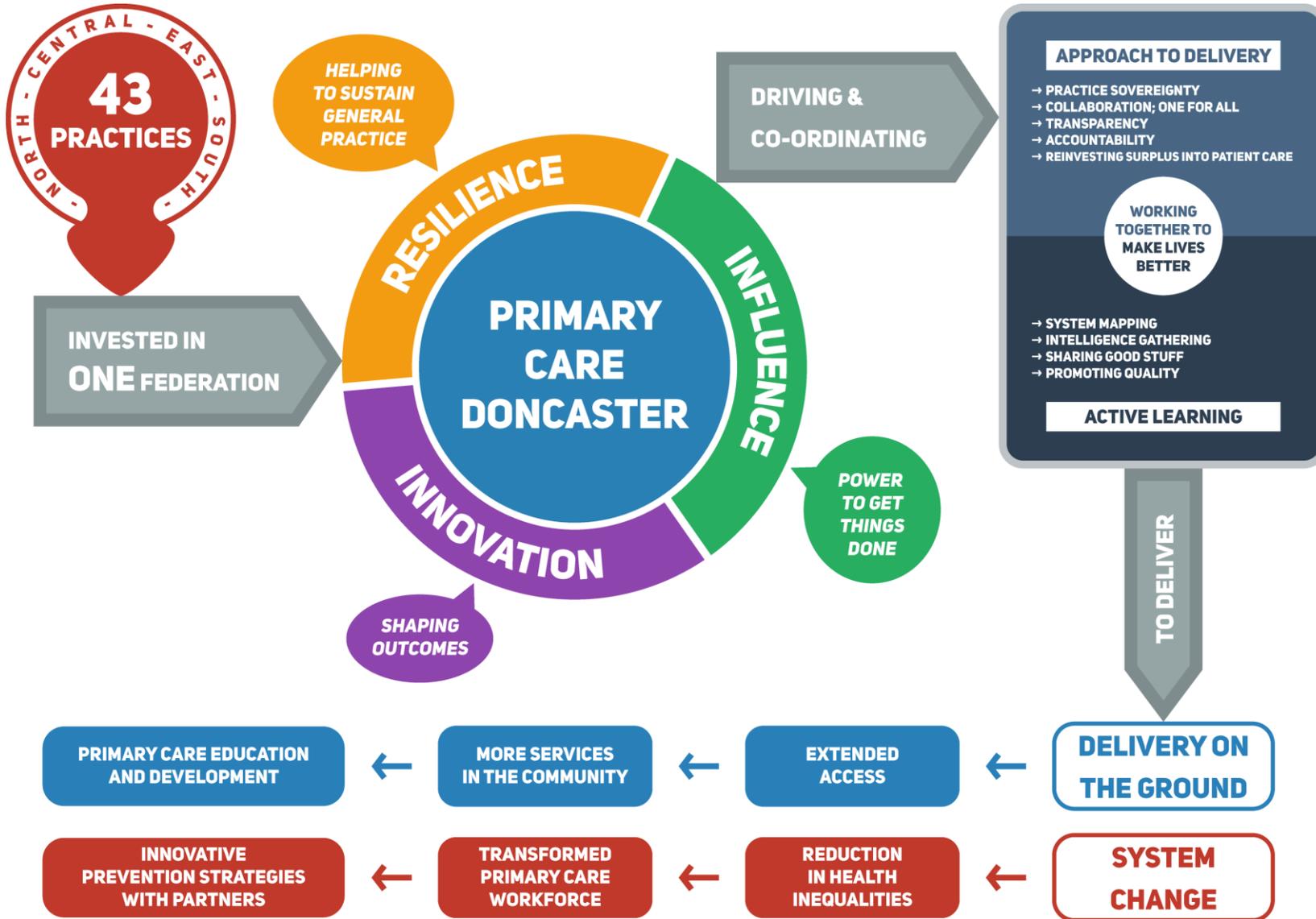
Secondly, national and local policy drivers are emerging which require a collective response from general practice. Nationally, the GP Forward View is making funding available for various initiatives for groups of practices working together, either on redesign of services or introducing new roles in primary care. The federation can access these opportunities and ensure the benefits are deployed in practices. Locally, commissioners are asking all providers to work together under an Accountable Care Partnership arrangement, which again requires general practice to be represented as a collective, and to participate within a new contractual framework. Primary Care Doncaster Ltd is the vehicle for this.

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. Primary Care Doncaster 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.

Therefore the aims of the organisation are to:

- support general practices to increase their sustainability and resilience;
- facilitate transformation and innovation in primary care services, influencing and shaping strategy through strong system partnerships; and
- access opportunities created by national and local policy for general practice to grow, innovate, and continuously raise standards of care.

2. Mission, Vision, Values



3. Market Opportunities

3.1 National Policy

Accountable Care

NHS England has recently outlined ambitions for Accountable Care Systems (ACSs) to be developed. An ACS involves an alliance of providers that collaborate to meet the needs of a defined population. This Provider Alliance takes responsibility for a budget allocated by commissioners to deliver a range of services to that population. The intention is for the ACS to work under a contract that specifies the outcomes and other objectives they are required to achieve within the given budget.

Eight areas of England have now been identified to lead their development; South Yorkshire & Bassetlaw is one of these areas. This creates an opportunity for Primary Care Doncaster to become an integral partner within the alliance, to ensure general practice remains at the heart of patient care and maximises the potential of improved relationships with other parts of the system.

Extended Access

The [General Practice Forward View](#) published in April 2016 set out plans to enable clinical commissioning groups (CCGs) to commission and fund additional capacity across England to ensure that, by 2020 everyone has improved access to GP services including sufficient routine appointments at evenings and weekends to meet locally determined demand, alongside effective access to out of hours and urgent care services.

The [NHS Operational Planning and Contracting Guidance 2017 – 2019](#) sets out the funding trajectory for this work, supporting CCGs to deliver extended access as part of delivering the General Practice Forward View.

NHS England has committed to achieving 50% national coverage by March 2018 and 100% of the population by March 2019. Local commissioners have to have the following in place:

- Weekday provision of access to pre-bookable and same day appointments to general practice services in evenings (after 6:30pm) – to provide an additional 1.5 hours a day,
- Weekend provision of access to pre-bookable and same day appointments on both Saturdays and Sundays to meet local population needs,
- Robust evidence, based on utilisation rates, for the proposed disposition of services throughout the week.
- A minimum additional 30 minutes consultation capacity per 1000 population, rising to 45 minutes per 1000 population

3.2 Local Policy

Locally, the Doncaster Place Plan 2016 – 2021 has been developed, and describes the vision of an Accountable Care Partnership (ACP) for Doncaster, within the bigger footprint of the South Yorkshire and Bassetlaw Accountable Care System (ACS). 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. There are 6 priority areas identified to test the concept of the ACP:

- 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.

In addition, the CCG has decommissioned a number of procedures which fall below certain thresholds of clinical value. There is potentially a private market for these procedures, which could be explored by Primary Care Doncaster.

4. SWOT Analysis (action oriented)

<p>Strengths</p> <ul style="list-style-type: none"> • Embedded breadth and depth of clinical expertise • Premises network to deliver care closer to home • List-based care provided by member practices is unique 	<p>Actions</p> <ul style="list-style-type: none"> ➤ Collect workforce information ➤ Identify capacity for specialist services in primary care ➤ Take inventory of spare rooms and space ➤ Maximise income generation from this ➤ Optimise opportunities to be host provider around which other services are co-ordinated 	<p>Weaknesses</p> <ul style="list-style-type: none"> • No recurrent income stream • Lack of trading record • Lack of direct control over workforce 	<p>Actions</p> <ul style="list-style-type: none"> ➤ Cultivate relationships with partners and commissioners ➤ Proactively develop proposals ➤ Protect non-recurrent resources to maintain running costs over 2 years ➤ Present trading records of member practices as proxy ➤ Work with member practices to develop good relationships, benefit of general practice to be at heart of PCD
<p>Opportunities</p> <ul style="list-style-type: none"> • GPFV offering practice development support • CCG support • New money into Doncaster with Extended Access initiative • DBTHFT offer to work on shifting services • Group-buying to achieve savings for practices 	<p>Actions</p> <ul style="list-style-type: none"> ➤ Consider backfill for practices to engage ➤ Regular dialogue with CCG; proactive proposals, shape outcomes ➤ Work with practices to shape the specification proposal to CCG, prepare to bid ➤ Dermatology pilot, cost up and lead development ➤ Scope with practice managers (ie supplies contracts) ➤ Explore benefits of locum bank 	<p>Threats</p> <ul style="list-style-type: none"> • Workforce Crisis • Commercial survival as start-up <p>Non-engagement of practices</p>	<p>Actions</p> <ul style="list-style-type: none"> ➤ Work on workforce development schemes ➤ Engage with education providers ➤ Prioritise bidding for & delivery of TARGET spec ➤ Pump-prime practice workforce initiatives ➤ Prepare financial plan to safeguard NR funds for 2 years running costs ➤ Develop partnerships within ACP with established NHS bodies ➤ Continuously engage with commissioners ➤ Analyse data to identify areas of opportunity ➤ Neighbourhood meetings

5. Income Generation

The funds upon which Primary Care Doncaster is established are non-recurrent, and it is imperative that they are used to make the organisation self-sustaining. Securing contracts is the principal activity for the first 12 months of PCD's existence. These contracts need to yield a sufficient operating profit to enable the organisation to cover its costs on a recurrent basis.

5.1 Priorities

From the market context and SWOT analysis above, the following have been identified as the priority focus areas for PCD in the first 12 months. These have been 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 are:

- **Primary Care Education and Development** (TARGET contract to be let by April 2018)
- **Community Dermatology Service** (nominal timescale for pilot: April 2018)
- **Extended Access** (Contract to be let by April 2019 at latest, potentially in-yr 2018)

Opportunities that arise will be considered on a case by case basis, to assess their potential to be added to or replace the priorities on the list.

5.2 Enabling workstreams

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

- **Workforce development** (a strong and diverse workforce is needed to run services)
- **ACP engagement** (services will be commissioned through the Provider Alliance in future)
- **Practice support** (provision through sustainable and resilient practices will be the backbone of any PCD offer or bid)

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. Review

The overall Strategic Business Plan will be reviewed in October 2018. The associated action plan will be monitored monthly via Board meetings.