

East Lancashire CCG Initial Viability Assessment (IVA)

Title of Project	<i>General Practice Nursing Development Support</i>
Author	<i>Adele Thornburn</i>
Date	<i>18 June 2018</i>
Board Assessment Date	

CCG Strategic Area Alignment	<p>Out of Hospital New Model of Care and development of primary care. The achievement of our local priorities for improved population health and wellbeing, through the further design and delivery of the New Model of Care with a focus on Neighbourhood Health and Wellbeing Teams, and Health and Wellbeing Improvement Priorities.</p>
Idea Source/ Initial underpinning Evidence	<p>General Practice Nursing (GPN) teams are absolutely essential to supporting and delivering general practices to work at scale and in hubs or networks as described in the "Next steps on the five year forward view (2017) and the Pennine Plan: Together a Healthier Future (2017).</p> <p>In 2013 ELCCG approved a quality improvement scheme to support financial backfill for GPNs to attend professional forums, share best practice and contribute to advisory commissioning groups. The proposal was further refreshed in 2016 which provides a resource from the Primary Care Development budget to support:</p> <ul style="list-style-type: none"> • 1 nurse from each practice to attend 8 locality and 4 East Lancs wider 2-hour forums per annum <p>In support of the GP Lead Nurses in each locality (5):-</p> <ul style="list-style-type: none"> • 1 nurse attending a quarterly GPN Leads 2-hour meetings pa • 1 nurse attending a bi-monthly locality nurse 2-hour meetings pa • 1 nurse attending the quarterly East Lancs nurse 2-hour forum meeting pa <p>In recognition of the emerging primary care networks across East Lancashire and national strategies and drivers to support GP Nursing, this paper proposes a change to the way in which the existing resource earmarked to support GPN is utilized. The change will support the NHSE GPN Workforce Development Plan (March 2017) and GP- developing confidence, capability and capacity: a ten point plan for GPN (July 2017) which will be critical to East Lancashire in developing and sustaining a primary care nursing workforce fit for the future and the new models of care (NMC), and giving recognition to the valuable contribution that experienced nurses can bring to a credible, authorised role as part of the PCN leadership team. To support this authorised position, a job description for the GPN Lead role and process for appointment should be given consideration.</p>

CCG PRIORITISATION	
Quality	<p>This proposed change will support the achievement of the GPFV aims and the triple aims outcomes in Leading Change Adding Value (LCAV):</p> <ol style="list-style-type: none"> 1. better outcomes, 2. better experiences for patients and 3. make better use of resources whilst reducing unjustifiable variation in standards of care. <p>GPN teams are an essential component of the general practice workforce. They</p>

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	<p>provide care and treatment across the life course and increasingly work in partnership with people with acute illness and with complex undifferentiated conditions. GPNs have a responsibility to lead change and add value so that improved outcomes, a better patient experience and more effective and efficient use of resources can be achieved. This proposal will support the development of the GPN leadership role, expanding the number of lead nurses to cover 8 PCNs, and supporting their development through education and supportive networks.</p> <p>The proposal will enable achievement of local priorities for improved population health and wellbeing, through the further design and delivery of the NMC with a focus on Neighbourhood Health and Wellbeing Teams, and Health and Wellbeing Improvement Priorities.</p>																																								
Innovation	To support the development of NMC the Chief Nursing Officer of England has identified that there is an expectation that more GPNs will play a role in leading practices or social enterprises and the opportunity to think differently about ways to improve access and outcomes. The LCAV framework will help focus GPNs on where change can be made and how to do this.																																								
Productivity	The GPN ten point plan (2017) sets out actions needed as part of expanding the capacity and capability across the whole primary care workforce which will enable the management of people's health closer to home. It will also build GPN capability to support improved and innovative approaches to delivering health and wellbeing. Encouraging and promoting GPN leadership is an enabler to building and strengthening opportunities to work differently and to maximize the potential of all team members.																																								
Prevention	GPNs are in an ideal position to take a lead in bringing about behaviour change. There is evidence to demonstrate that they can reduce obesity, heart disease, cancer and diabetes, improve health and fitness, and save lives.																																								
Potential Savings Level	The benefits realisation will be in multiple forms; including accelerated implementation of NMCs and opportunities for innovation.																																								
Indicative date for realisation of potential savings																																									
Potential Resource Requirement	<p>This proposal builds on the GPN support in place over the preceding 5 years and with a greater focus on the contribution of leadership at the PCN level.</p> <p>The existing budget support = £38,300pa</p> <p>The revised proposal requires overall support of £38,250pa</p> <table border="1"> <thead> <tr> <th></th> <th></th> <th></th> <th>overall cost</th> </tr> </thead> <tbody> <tr> <td>8 GPN PCN (leadership)</td> <td></td> <td>3.5 hours / month</td> <td>8400</td> </tr> <tr> <td>53 GPs (East Lancs Forum)</td> <td></td> <td>2.5 hours/quarter</td> <td>13250</td> </tr> <tr> <td>SNPs & ACPs (Forum)</td> <td></td> <td>2.5 hours/quarter</td> <td>7500</td> </tr> <tr> <td>Chairperson EL GPN forum</td> <td></td> <td>3.5 hours / month</td> <td>1050</td> </tr> <tr> <td></td> <td></td> <td></td> <td>0</td> </tr> <tr> <td>Chairperson SpN/ACP forum</td> <td></td> <td>3.5 hours / month</td> <td>1050</td> </tr> <tr> <td>Leadership Development programme</td> <td></td> <td>7 full days</td> <td>7000</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>38250</td> </tr> </tbody> </table>				overall cost	8 GPN PCN (leadership)		3.5 hours / month	8400	53 GPs (East Lancs Forum)		2.5 hours/quarter	13250	SNPs & ACPs (Forum)		2.5 hours/quarter	7500	Chairperson EL GPN forum		3.5 hours / month	1050				0	Chairperson SpN/ACP forum		3.5 hours / month	1050	Leadership Development programme		7 full days	7000								38250
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	Locality nurse forums will no longer be financially supported through the Primary Care Development budget, and practices may utilise additional income attributed through the GP quality framework to support these local arrangements.
Potential Investment Requirement	Nil additional

Brief explanation of idea/ commissioning activity required to realise project outcomes/benefits	<p>As an Integrated Care Partnership (ICP) we will partner with local GP practices, formed into clinical hubs serving 30,000-50,000 populations. GP practices will be the foundations of the neighbourhood-based health and wellbeing teams. The role of the PCN is essential to the development and delivery of emerging NMC. The intention in PL is to align Primary Care Networks (PCNs) to the neighbourhood health and wellbeing teams, and put working arrangements in place to allow them to develop a plan for joined up delivery of community based services.</p> <p>To support the delivery of this challenging agenda and timescales it is essential that GPN leadership is valued for the expertise and knowledge they can contribute. It is a considerable challenge to recruit and retain a workforce that is fit for the future. The “One workforce” vision for Pennine-Lancs requires engagement and working with all colleagues, across all organisations, to shape the delivery of our services and also ensure that we make best use of our people and use the skills they bring.</p> <p>GPN teams are ideally placed to contribute and lead in the development of new skills to meet the health needs of our population. However GPNs are facing workforce pressures with a third intending to retire by 2020. This proposal supports leadership opportunities for GPNs, enabling them to demonstrate their valuable contribution to the development of PCNs and NMC, and will provide fresh opportunities for GPN teams to develop skills and advance their careers thereby assisting with recruitment and retention of the workforce and easing GPs workload.</p> <p>The proposal for support will align with national and regional strategies to support GPN leadership, and will enable and drive the development of NMC in the Pennine Plan. Specifically, the proposal will support financial backfill to provide:-</p> <ul style="list-style-type: none"> • The expansion of the GPN Leads from 5 to 8 in recognition of the emerging PCNs • One GPN Lead in each of the 8 PCN to be allocated 3.5 hours per month to contribute to PCN development boards • One nurse from each GP practice to be allocated 2.5 hours per quarter to attend the East Lancs Nurse Forum • Chairperson for the East Lancs Nurse Forum to be allocated 3.5 hours per month to perform associated duties • 30 nurses to be allocated 2.5 hours per quarter to attend an East Lancs Specialist Nurse and Advanced Clinical Practitioners Forum (to be formed) • Chairperson for the East Lancs Specialist Nurse and Advanced Clinical Practitioners Forum to be allocated 3.5 hours per month to perform associated duties • 5 existing GPN Nurse Leads to be supported to attend the GPN Leadership for Quality Programme (Northwest) (total 7 days each over 6 months)
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Idea Supported by	Primary Care Development - Lisa Cunliffe
Potential Identified Clinical Lead	<i>Adele Thornburn</i>
Potential Exec Project Sponsor	<i>Jackie Hanson</i>
Potential Project Manager	<i>Adele Thornburn</i>

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IVA Outcome

	Action	Tick	Additional information
Outcome of Board Assessment:	Agree to proceed with project and add to tracker		<insert as required>
	Agree to proceed with project following additional actions/information		<insert as required>
	Integrate idea into business as usual taking into consideration organisational capacity and capability		<insert as required>
	Do not proceed with idea (please state reasons)		<insert as required>
Any Further information / next steps	<insert as required>		
Completed by	Name	Signature	Date
	<insert name>	<insert sig>	<insert date>

