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PCNS IN THE HARROGATE AND RURAL DISTRICT

What have we done, and where are we up to?

What are PCNs?

- Primary Care Networks are collections of practices that work together to provide care for 30,000 to 50,000 people in their local community.
- First introduced in July 2019 as part of new GP contract.
- Deliver requirements of NHS England “Network Contract Enhanced Service”
- They are not new organisations, structures or commissioning bodies
- There are 4 PCNs locally:
 - *Heart of Harrogate PCN*
 - *Mowbray Square PCN*
 - *Ripon and Masham PCN*
 - *Knaresborough and Rural PCN*
- We work alongside the local GP Federation, “Yorkshire Health Network”.

What is the structure of the PCNs?

- Each PCN has a Clinical Director (one day a week)
- Employ management support from Yorkshire Health Network (YHN)
 - *2 PCN Managers across 4 PCNs.*
 - *HR and Finance*
- Member practices each provide Board members.

So, What Have We
Achieved So Far?

A wider variety of clinical staff than ever before.

Every PCN now has:

- Pharmacists and Pharmacy Technicians
- First Contact physiotherapists
- Social Prescribers
- Occupational Therapists (PACT service)
- First Contact Mental Health Workers

In addition some have:

- Health & Wellbeing Coaches
- Paramedics
- Physicians Associates

Supported the population during the pandemic

- Rapid implementation of remote working tools across the region.
- Establishment of “Red Sites” for suspected Covid cases.
- Implementation of Covid vaccination sites (Ripon and Harrogate)
- Home Covid vaccines for housebound and Care Homes

Work with wider Health and Social Care System

- Members of Harrogate and Rural Alliance
- Numerous staff co-employed with local partners.
 - *First Contact Physiotherapists are co-employed with Harrogate Hospital*
 - *Social Prescribers with North Yorkshire County Council*
 - *Mental Health Workers with Tees Esk and Wear Valley Trust*
- 4 Main PCNs work closely together. However wider links with PCNs across North Yorkshire
- Links with Third Sector partners (particularly invaluable during pandemic).
- Ongoing engagement with CCG and ICS.

What can we expect from the future?

Short term:

- “Enhanced Access” – Additional service 6:30 - 8 Monday to Friday and 9-5 on Saturdays, from October.
- Work on preventing Cardiovascular Disease, improving health in Care Homes, implementing plans to support and enhance cancer diagnosis, and tackling inequalities.
- Further growing and developing practice teams.

Long term:

- Sajid Javid backed report from Policy Exchange suggests phasing out GP contract by 2030 and contracting General Practice to large scale providers.
- Role of PCNs in this process – how do we ensure best possible outcomes for our patients?

Any questions?