Document Version Control

Document Author: Robert Connor
Project Manager
Primary Care Transformation Programme
NHS England South (South West)

<table>
<thead>
<tr>
<th>Date</th>
<th>Contributor</th>
<th>Version</th>
<th>Comment/Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>13-04-15</td>
<td>Author</td>
<td>0.1</td>
<td>First draft</td>
</tr>
<tr>
<td>23-04-15</td>
<td>Author</td>
<td>0.2</td>
<td>Formatting</td>
</tr>
<tr>
<td>22-07-15</td>
<td>Author</td>
<td>0.3</td>
<td>Addition of contributor/participant stakeholders</td>
</tr>
<tr>
<td>10-08-15</td>
<td>Author</td>
<td>1.0</td>
<td>For Publication</td>
</tr>
<tr>
<td>11-11-15</td>
<td>Author</td>
<td>1.1</td>
<td>Updated contact details</td>
</tr>
<tr>
<td>18-12-15</td>
<td>Author</td>
<td>1.2</td>
<td>Correction of Marina Muirhead’s email address (NHS England)</td>
</tr>
<tr>
<td>31-03-16</td>
<td>Author</td>
<td>1.3</td>
<td>Updated contact details</td>
</tr>
</tbody>
</table>
Contents

Resource Development Stakeholders................................................................. 4
Introduction ............................................................................................................... 5
Why Collaborate? .................................................................................................... 5
What Could Collaboration Look Like? ................................................................. 5
Caveats for Collaboration ....................................................................................... 6
Next Steps ............................................................................................................... 6
  What’s the Big Idea? ............................................................................................. 6
Identifying and Agreeing the Collaborators ......................................................... 7
Initiating Discussion and Achieving Consensus .................................................. 7
Idea to Action ......................................................................................................... 7
Initiation .................................................................................................................. 7
The Legal and Financial Framework .................................................................... 8
Communications .................................................................................................... 8
Measuring Success .................................................................................................. 8
  General Practice Sustainability ‘Health-Check’ Tool ........................................... 9
  Facilitation ........................................................................................................... 9
  Information Packs .............................................................................................. 10
  Advice and Guidance ......................................................................................... 10
  Who to Contact? .................................................................................................. 10
Resource Development Stakeholders

This information resource has been developed in consultation with the following organisations:

- Bristol CCG
- Somerset CCG
- South Gloucestershire CCG
- NEW Devon CCG
- South Devon and Torbay CCG
- NHS Kernow CCG
- Avon LMC
- Somerset LMC
- Devon LMC
- Cornwall LMC
- South West Academic Heath Science Network
- Severn Deanery
- Sample groups of GPs and Practice/Business Managers within all seven South West CCG areas
- NHS England South (South West) Primary Care
Introduction

This document aims to provide guidance to General Practices considering collaborative initiatives with other General Practices and local community providers. It is one of a suite of documents focused on supporting general practice in achieving and maintaining sustainability, and exploring new, innovative ways of working.

Why Collaborate?

- Demand for Primary Care is increasing – how can General Practice respond?
- The traditional model of General Practice is no longer sustainable – funding shortfall vs. increased pressures on Primary Care service provision
- Growth in General Practice workforce is half the growth of other clinical/medical specialties and this cannot be rectified overnight
- National agenda for change – The Five Year Forward Plan highlights the need to explore innovative use of a range of community partnerships and multi-disciplinary initiatives to better manage those with acute and long term conditions
- Increased commissioning focus on doing business with larger Primary Care organisations, which would impact on larger populations
- General Practice is best-placed to explore how and why it can respond to the range of pressures which it faces
- Exploring ways of reducing cost and maximising limited resources by applying economies of scale to General Practice business models
- Exploring ways of identifying additional income streams e.g. collectively bidding for enhanced service contracts
- Tailoring new ways of working to meet the needs of the local population and the profiles of local General Practices – no ‘one size fits all’

What Could Collaboration Look Like?

- Formal or informal agreements – driven by the ‘vision’ or purpose of the collaboration
- Networks/alliances/federations – groups of General Practices coming together for a common goal while maintaining degrees of autonomy at individual Practice level
- Formal legal entities such as:
  - Mergers/Super-Partnerships – single partnership entity comprising multiple service delivery sites across a wider geographic area. Corporate or commercial structure
  - Legally-defined ‘network’ or ‘federation’ entities – component General Practices as shareholders in a new venture to deliver a specific set of goals or services while maintaining relative autonomy at individual core business level. The composition and legal structure of these networks or federations will
depend on the reason for and purpose of the group of participants coming together

Caveats for Collaboration

- Considering and agreeing the **participants** or ‘members’ – who will be collaborating?
- Considering and agreeing the **high-level purpose** or ‘vision’ of the collaboration – why do you want to collaborate and what do you want this collaboration to achieve?
- Considering **means and mechanism for achieving consensus** – collectively responding to individual member views, aspirations, concerns, doubts, fears and expectations
- **In-house’ or external resources** – ensuring the fledgling group of participants or members has the facilitation, documentation and planning resources available to support the development process i.e. ‘from idea to action to delivery’. Who will lead? Who will support?
- Achieving an understanding of process – **what needs to be in place**, such as:
  - Agreed goal?
  - Business Case?
  - Legal advice and guidance?
  - Formalised Business Plan?
  - Financial and/or human resource investment?
  - Communications approach?
  - Patient involvement?
  - Other stakeholder involvement e.g. NHSE commissioning representatives? CCG representatives? LMC representatives? Other service providers e.g. community health care, voluntary organisations, urgent or secondary care providers?
  - Project management or co-ordination resources?
  - Administrative resources?
  - New or enhanced telephony and/or technical infrastructure?
  - New premises?

Next Steps

General Practices wishing to begin considering how to collaborate in order to establish networks and federations or single business units may need to consider the following:

What's the Big Idea?

- What is the goal or vision?
- Is there a prescribed business ‘model’ which you are aiming to establish?
- What is your aspiration (reducing costs? Increasing income streams? Providing new services?)?
• What is the envisaged size of the collaborative entity e.g. involving a small number of General Practices or all within a CCG area?

Identifying and Agreeing the Collaborators

• Which General Practices will make up the venture?
• Do potential collaborators need to be approached and invited, and if so, how/by whom?
• Do you want selection criteria or baseline standards for interested Practices?
• What information do you want all interested Practices to provide e.g. current patient demographics, current premises profile, current service delivery profile, current workforce profile, current use of technologies, current contractual status, current financial profile, etc.?

Initiating Discussion and Achieving Consensus

• Where will this occur?
• How will it be facilitated?
• How will it be structured and documented?
• How will outcomes be followed-up?

Idea to Action

• Considering and agreeing all the tasks, actions, roles and responsibilities required to realise the agreed vision.
• Where will this occur?
• How will it be facilitated?
• How will it be structured and documented?
• How will outcomes be followed-up?

Initiation

• Do we need a plan for delivering and achieving the collaboration?
• Who will be responsible for documenting and managing/overseeing that plan?
• How will progress, obstacles, risks and issues be monitored, documented, communicated and addressed?
• What resources will you need to achieve this?
• Are you willing and/or able to use external sources of support and expertise?
The Legal and Financial Framework

- Does the goal or objective require input from a supplier of legal advice and/or accountancy services?
- How will this be obtained?
- How will any associate costs be met?
- Who will be responsible for facilitating payment?
- What information or action is required by your commissioners?
- What are the timescales for information provision to and action by your commissioners?

Communications

- Who are your stakeholders?
- Do you have internal and external stakeholders?
- With whom do you need to communicate?
- Why do you need to communicate?
- When do you need to communicate?
- How do you need to communicate?
- What do you need to communicate?
- Do you need a Communications Plan?
- Who will be responsible for communications?
- Do you want to rebrand?
- How will you achieve this and what will be the resource/investment implications?

Measuring Success

- How will completion of establishing the venture be determined?
- How will you ensure the fully-formed venture is measurable against its original idea and business case?
- How will the venture be managed and administered?
- How will the effectiveness and success of the venture be measured as it commences its brief or purpose?
- Do you need subject matter expertise within the delivery of the venture’s objectives e.g. bid-writing expertise for ventures focusing on tendering for enhanced services, or business development expertise for incrementally expanding entities?
- Do you need to make provision for adding to the venture’s membership in the future?
How Can NHS England Help?

NHS England South West is developing a range of support mechanisms and approaches to assist General practices in considering collaborative ventures:

General Practice Sustainability ‘Health-Check’ Tool

A set of analytical questions aimed at prompting and encouraging a General Practice to examine and reflect upon its current sustainability status. The set of questions are designed for use by a General Practice for a General Practice, to enable it to build up a detailed picture of its current state, its strengths and weaknesses, and the challenges it faces. The ‘health check’ tool has been developed in collaboration with CCG primary Care personnel, LMCs and General Practice personnel, and addresses:

- Patient Experience
- Clinical Capacity and Skills Mix
- Administrative Capacity and Skills Mix
- Clinical Safety
- Management Capacity
- Financial Capacity
- Premises Capacity and Condition
- Clinical Governance
- Management Information and Business Intelligence
- Delivery of Care – Challenges and Barriers
- Range of Provision – Gaps and Limitations
- Stress-Points and Tensions

Outcomes and conclusions achieved by a Practice can then be used to consider and decide what action to take to enhance sustainability, and what options are available.

Facilitation

Provision of guided facilitation to enable individual, or groups of, General Practices to:

- Consider outcomes and conclusions from completing the Sustainability ‘health-check’ tool
- Consider options for change
- Consider potential partnerships for change, and how to engage
- Consider the business case for change
- Consider next steps – how to initiate change
Information Packs

Provision of the following information resources for General Practice:

- General Practice Sustainability ‘Health Check’ Tool
- A Guide to Collaboration
- A Guide to Mergers
- A Guide to Networks and Federations
- A Guide to Provider Organisations
- A Guide to Setting Up and Managing a Project
- Examples of Innovation in General Practice

Advice and Guidance

Provision of advice and guidance for:

- Setting up and managing projects
- Project documents and templates
- Problem solving
- Accessing current change and innovation initiatives
- Sense-checking on progress and development

Who to Contact?

NHS England’s GP Sustainability and Transformation initiative is part of the NHS England South (South West) Primary Care Team’s work programme. Heads of Primary Care are Marina Muirhead (BNSSSG) and Julia Cory (DCIOS).

Marina Muirhead can be contacted on 0113 8253 605 or 07525 495691 or by email at marinamuirhead@nhs.net

Julia Cory can be contacted on 0113 8248 967 or 07900 715328 or by email at julia.cory@nhs.net