# NHS EnglandHosting a Time for Care programme

# Readiness self-assessment

Planning and implementing change in GP practices is often faster, easier and more successful when it is done in collaboration and with expert facilitation. Through this programme practices can access the best evidence and advice, pool knowledge and resources, and receive coaching on how to use improvement tools in their work. Crucially, the collaborative approach also makes it easier for your change programme to be linked with other development and investment opportunities, support from the CCG and partnership with other organisations.

That is why preparation is important – it takes time and planning to create the conditions for success. This framework will help you take stock of the current readiness in your area. It is recommended that practice leaders and the CCG review this together. The answers will help identify areas where your preparedness can be enhanced. Your development adviser will also be able to work with you on this. You are not required to submit your self-assessment. You may wish to discuss it with your Development Advisor (when appointed)

*This document includes an embedded chart at the end, for you to enter the results of your self-assessment and create a chart. This does not work on smartphones or tablets.*

## What proportion of practices is interested?

While it is rarely possible to secure interest and commitment from every practice in a given area, the success of your Time for Care programme will be affected by the proportion of practices who are participating. Broader involvement will produce greater benefits for collaborative arrangements between practices, and makes it easier for the programme to be supported as a mainstream part of the CCG’s work to support and transform services, and having a significant critical mass will add momentum to your change efforts. It is also important for achieving best value for money from NHS England’s investment in facilitating the programme.

### Assessment

| **Proportion** | **Score** |
| --- | --- |
| 0 – 20% | 1 |
| 21 – 40% | 2 |
| 41 - 60% | 3 |
| 61 – 80% | 4 |
| 81 – 100% | 5 |

## How have practices been involved to date in agreeing to engage in this programme?

A change programme like this relies on active participation of practices. It cannot succeed on the enthusiasm of a few local leaders alone. Giving practices time to discuss, question and consider the proposed programme is therefore an important part of preparation.

### Assessment

| **Proportion** | **Score** |
| --- | --- |
| No practice involvement to date. | 1 |
| Practices have been informed of the proposal to submit an expression of interest. | 2 |
| All practices have had the chance to discuss this together.  | 3 |
| All practices have had the chance to discuss this together and within the practice team.  | 4 |
| All practices have had the chance to discuss this together and within the practice team. The priorities and plans have been agreed with the practices. | 5 |

## What is the current level of commitment from practices?

This programme helps practices to adopt new ways of working that will release time for care. Only practices themselves can actually make these changes. The commitment of GPs and practice managers is therefore a crucial determinant of success for the change programme, with members of the local collaboration needing to commit to attending workshops, measuring and redesigning their systems and processes, and sharing learning with their peers.

### Assessment

| **Proportion** | **Score** |
| --- | --- |
| Practices have not yet made a commitment to engage actively in the workshops and in making change. | 1 |
| Practices are in the process of considering how they will enable the practice manager and a senior clinician to engage. | 2 |
| A proportion of practices have committed to engage actively in the workshops and in adopting new ways of working. | 3 |
| All practices have committed to engage actively in the workshops and in adopting new ways of working. | 4 |
| All practices have committed to engage actively in the workshops and in adopting new ways of working.. They have arrangements in place to ensure the practice manager and a senior clinician can attend and lead changes within the practice. | 5 |

## How is the CCG committing to this programme?

A great deal can be achieved by practices working together to change the way they work. However, change is almost always more successful and sustainable when it is aligned with wider commissioning plans for the local health and care system. CCGs are the chief source of investment and support in kind for practice development, and this development programme will be more successful if it is linked with local investment. Planning and delivery of this programme should therefore be undertaken in close partnership between the CCG and their practices.

### Assessment

| **Proportion** | **Score** |
| --- | --- |
| The CCG has not yet been involved in discussing this programme. | 1 |
| Plans are in place to discuss this with the CCG. | 2 |
| The CCG has been involved in discussions about this programme | 3 |
| The CCG is an integral part of the planning and delivery of this programme. | 4 |
| The CCG is an integral part of the planning and delivery of this programme. The Time for Care programme will be aligned with local plans and investments. | 5 |

## How engaged are other partners?

Much can be achieved by a group of practices working together to implement change. However, many of the 10 High Impact Actions rely on collaboration with others. This may include community pharmacies, community nursing teams, therapists, mental health teams and the voluntary sector. It will usually also include patients, who can help in setting priorities for action as well as being key to the success of many new ways of working.

### Assessment

| **Proportion** | **Score** |
| --- | --- |
| There is no plan for engaging partners or patients. | 1 |
| Potential partners have been identified and/or approaches to engaging with patients discussed. | 2 |
| Potential partners have been approached and/or patients contacted. | 3 |
| Partners have been involved in planning so far, but not patients. | 4 |
| Partners have been involved in planning so far and patients are engaged to contribute to the programme of change.  | 5 |

## What are the leadership arrangements?

Effective clinical leadership is a vital component of a programme to redesign care across practices. It is therefore important to have one or more leaders who have the confidence of practices, are skilled in engaging and leading others, and have the time to exercise this leadership.

### Assessment

| **Proportion** | **Score** |
| --- | --- |
| It is not yet clear who would provide clinical leadership across practices for this programme. | 1 |
| We have clearly identified clinical leadership. | 2 |
| We have clearly identified clinical leadership with the trust of practices, | 3 |
| We have clearly identified clinical leadership with the trust of practices, equipped to engage and inspire. | 4 |
| We have clearly identified clinical leadership with the trust of practices, equipped to engage and inspire, and with dedicated time set aside to lead. | 5 |

## What are the programme management arrangements?

Convening a collaborative of practices to plan and implement change is a significant programme management undertaking. It will be important to have people, time and systems in place to help ensure practices have a good and productive experience of the programme. It also makes it easier for your programme to be tailored to your practices’ needs and fully integrated with other work happening locally.

### Assessment

| **Proportion** | **Score** |
| --- | --- |
| There are currently no plans for programme management. | 1 |
| Plans are being developed for programme management. | 2 |
| There are people available to support this programme, although not necessarily with prior experience. | 3 |
| There are systems and experienced people available for programme management. | 4 |
| There are systems and experienced people in place for programme management, and potential timelines considered.. | 5 |

# Enter your scores

Enter your scores in the spreadsheet below to generate a spider chart. This gives an indication of areas where more preparation may be required.

*Double-click the chart below to enter your scores…*

