What did we investigate?

1. The contextual background of PCNs
2. The rationale for general practices to enter into collaborations
3. The early learning from establishing PCNs
4. Barriers to and facilitators of effective collaboration across GP practices
5. The likely future progress of PCNs in the English NHS

What did we find?

PCNs have been implemented in a timely manner and have established a range of new local health services. PCNs hold Directed Enhanced Service contracts, focusing on:

- Structured medicines review and optimisation
- Enhanced health in care homes
- Anticipatory care
- Personalised care
- Supporting early cancer diagnosis
- Cardiovascular disease prevention and diagnosis
- Tackling neighbourhood inequalities.

PCNs receive funds to support the appointment of a number of additional roles, including clinical pharmacists, social prescribers and physiotherapists, and for providing extended hours services to patients.

Each PCN is coordinated and led by a named Clinical Director, who is a clinician that is accountable to the practices that make up a PCN. Both clinical and other staff are often involved in the leadership and management of PCNs.

In rural areas, there was some perceived lack of fit with aspects of the PCN specification, alongside existing challenges of providing primary care to rural populations. PCNs have been an important part of the response to the COVID-19 pandemic. In particular, they play a significant role in England’s vaccination programme.

At a local level, PCNs helped coordinate “hot” and “cold” hubs to care for COVID-19 and non-COVID-19 patients, respectively. They also helped to coordinate the movement of staff between practices.

Early evidence of the development of primary care networks in England

Over the past 20 years, many general practitioners (GPs) have been working more closely with other local practices to offer a wider range of services for patients. In July 2019, NHS England & Improvement asked GP practices to join together into primary care networks (PCNs) and use new funding to offer extra services to improve the health and wellbeing of local communities.

What is a primary care network (PCN)?

Previous GP collaborations provide support in terms of management, leadership and infrastructure, although they can be a source of tension when interests, goals and ways of working do not align.

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Methods

Rapid evidence review Interviews Document review Survey

Four case study sites

Non-participant observations

The key lessons for policy and practice:

1. Increase engagement of GPs with their PCN
2. Build leadership and management capacity
3. Clarify role of PCNs in the wider health care system

1. Consistent long-term national policy
2. Broad and clear goals that balance local and national priorities
3. Take into account the needs of rural areas
4. Build on (and do not undermine) successes of previous GP collaborations and local practices
5. Include the wider primary care team in management and leadership
6. Clarify the relationship between PCNs and other parts of the local health system, including integrated care systems
7. Ensure sufficient monitoring and performance management, while giving space and autonomy to address local needs

PCNs (Primary Care Networks) are groups of general practices working together to provide integrated health care services in England. They are a new way of working, established in 2019, to improve health outcomes and reduce inequalities in health care. PCNs have a population focus, aiming to improve the health and wellbeing of the people in their area.

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