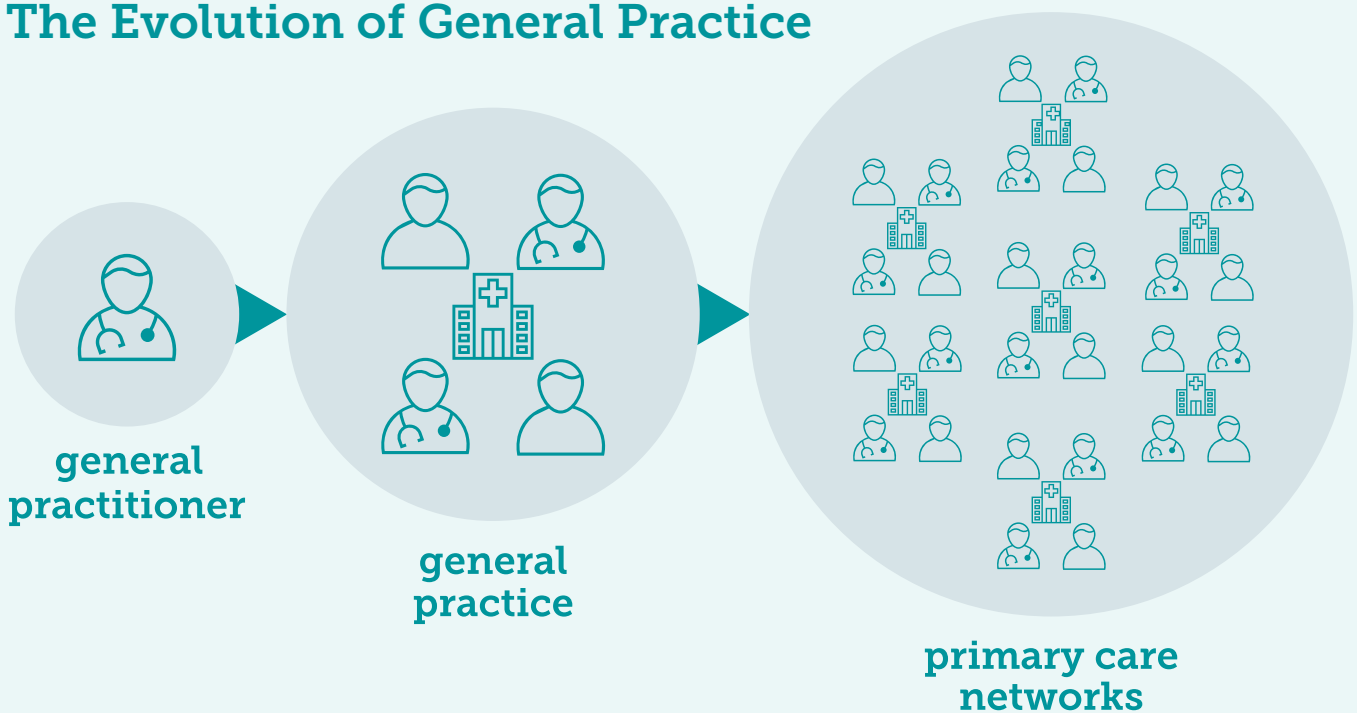


# A Prospectus to Support the Development of Primary Care Networks

## The Evolution of General Practice



## Introduction

Implementing the NHS Long Term Plan requires the development of effective primary care networks (PCNs). This suite of development offers has been designed by Altogether Better to help PCNs and GP practices to mature and thrive across all the PCN development domains.

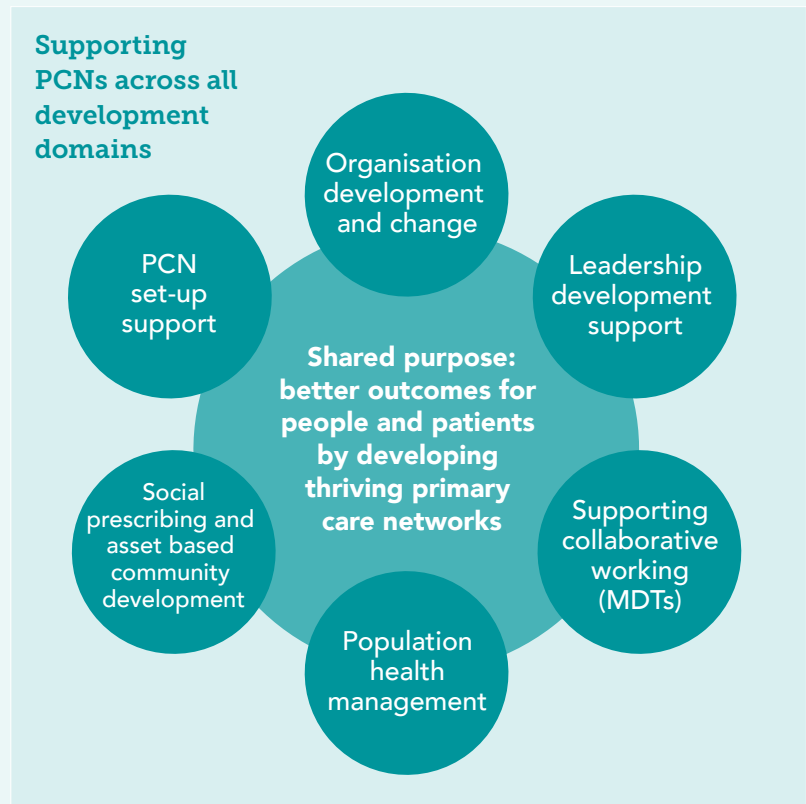
Our support is aimed at current and emerging leaders in primary care networks (PCNs), GP federations, Integrated Care Services (ICSs) and individual GP practices.

PCN clinical directors and directors of federations will find these offers of particular interest in supporting them to deliver the ambitions in the NHS Long Term Plan, in particular the shift towards prevention and population health management, achieving improved outcomes for patients and people in communities, as well as better working lives for those in primary care.

Altogether Better is an award-winning NHS organisation with a track record of working collaboratively in GP practices and emerging PCNs across the UK and their equivalents abroad.

We are experts in system change and organisational development (OD) and can work with any issues that surface over the course of our work with an organisation. Our experience has been built working with 25 CCGs, over 150 GP practices, and with STPs and fledgling ICSs.

We have published evaluations of our work and have data and stories to illustrate our impact.



**“Collaboration and systems leadership are fundamental in the new world of PCNs and Altogether Better brings pioneering approaches that are proven to make a difference”**

ROB WEBSTER,  
CHIEF EXECUTIVE,  
SOUTH WEST YORKSHIRE  
PARTNERSHIP NHS  
FOUNDATION TRUST

## Supporting primary care networks and practices

We offer a way through the problems and challenges facing primary care. Our approach allows each practice to retain its unique identity but benefit from both the economies of scale and new possibilities of delivery at scale that PCNs can promise.

We take a systems approach: the new way of working has to benefit the staff in each practice (life becomes easier), the network (you can do things you can't do on your own) and the patients and community you serve (clinical and social needs met).

We help GPs, practice managers and their teams in practices and across PCNs to develop the skills, behaviours, mindset and culture needed to create a general practice fit for the future.

Our experience extends to working at the interface between primary care, acute services, social and residential care and with local communities.

Using a range of evidenced-based approaches, practical tools and over 30 years' experience we can support practices and PCNs to:

- **Set up and get out of the blocks**
- **Develop confident leaders and strong teams**
- **Work collaboratively with each other**
- **Find a new way of organising that works for each practice and for the network**
- **Manage population health**
- **Lead high performing multidisciplinary teams**
- **Build asset based approaches which amplify social prescribing**
- **Shape their future**
- **Develop Collaborative Practice\***

**\*What is Collaborative Practice?**

Collaborative Practice is a tested approach which involves finding local people to work alongside the practices as volunteer Practice Health Champions, becoming part of an extended team that tackles the problems that medicine cannot fix. The reduction in demand that results from this approach creates the space and capacity for practices to deliver on the possibilities of PCNs.



**Many of the 5% of patients who use around 20% of the resource turn out to have social needs which, if met, reduce their attendance.**

**“Our GPs see 12 patients a session instead of the 15 they saw before. And have time for a coffee break together to discuss some of the more tricky cases.”**

**KAY KEANE,  
PRACTICE BUSINESS  
MANAGER,  
ALVANLEY FAMILY  
PRACTICE,  
STOCKPORT**

## Our approach

We work in partnership with practices. These close relationships mean we understand that developing PCNs is new and difficult work that can feel uncomfortable and unfamiliar to some.

We describe our work as 'couture, not off the peg' which means our support offer for PCNs is bespoke and unique to the local context. We know that the time available is short, and that the needs and level of development required will vary.

**"When we looked at our data we saw frequent GP attenders had declined by 30%**

**from 1,028 in 2015 to 714 in 2017."**

**SHEINAZ STANSFIELD,  
PRACTICE MANAGER,  
OXFORD TERRACE,  
GATESHEAD**

Our approach allows individuals, practices and PCNs to choose from a suite of learning opportunities and practical offers of support, including:

- **One to one support and coaching**
- **Development programmes**
- **Bespoke OD support**
- **Help exploring data to surface patterns and make better decisions about population health**
- **Support to develop collaborative working**
- **Facilitation, guidance and coaching to multi-disciplinary teams as they develop and embed**
- **Practical tools, training and resources, e.g. developing group consultations, improving the quality of the consultation and shared decision making**
- **Support to build asset based approaches**
- **Help to significantly reduce demand for appointments by using our Collaborative Practice approach**

Attender groups	range (appts/yr)	# patients	# GP appts	% of attenders	% of appts	appts/yr	£26,850	£26,850
A. Super attenders	25+	17	537	0.3%	2%	32	£26,850	£26,850
B. Bi-weekly	20-24	45	2,500	1%	5%	22	£49,300	£76,150
C. 3-weekly	15-19	161	4,278	20%	20%	16	£128,000	£213,000
D. Monthly	9-14	411	6,507	21%	21%	6		
E. Bi-monthly	5-8	1,046	2,048	11%	11%			
F. Quarterly	4	512	4,778	55%	55%	22%		
H. Infrequent	1-3	2,676	21,694	100%	100%			
<b>Grand Total</b>			2,500					

## Future-proofing primary care

Primary care is facing unprecedented challenge. New demands require new ways of thinking and doing things. We've worked with leaders in PCNs and practices to design evidence-based approaches and tools. These support people in practices to learn and develop the practical skills necessary to work effectively together and be better equipped to design and deliver services at both practice and network level.

### How our work meets your needs

#### You can't do it on your own

- ✓ Understanding what you can do at scale
- ✓ Understanding fit-for-purpose partnerships: they are not all the same
- ✓ Preventative interventions based on multi-agency and population health data
- ✓ PCNs contribute to ICS/STP strategic agenda
- ✓ Better use of existing resources
- ✓ New models of care develop
- ✓ System-wide benefits from a new PCN/secondary care relationship

#### The workforce challenge

- ✓ Leaders develop the confidence, skills, behaviours and tools to redesign care
- ✓ Staff morale increases
- ✓ Improved retention of staff
- ✓ The recruitment challenge is solved
- ✓ Peer networks develop
- ✓ Pressure on staff reduces
- ✓ Time is released to spend on the right things

#### Supporting prevention and self-care

- ✓ Patients receive the right support, from the right people, at the right time, in the right place
- ✓ More personalised care and coordination develops
- ✓ New offers to patients are designed
- ✓ Supports and amplifies the work of social prescribing link workers
- ✓ The practice becomes a hub, better connected to the community

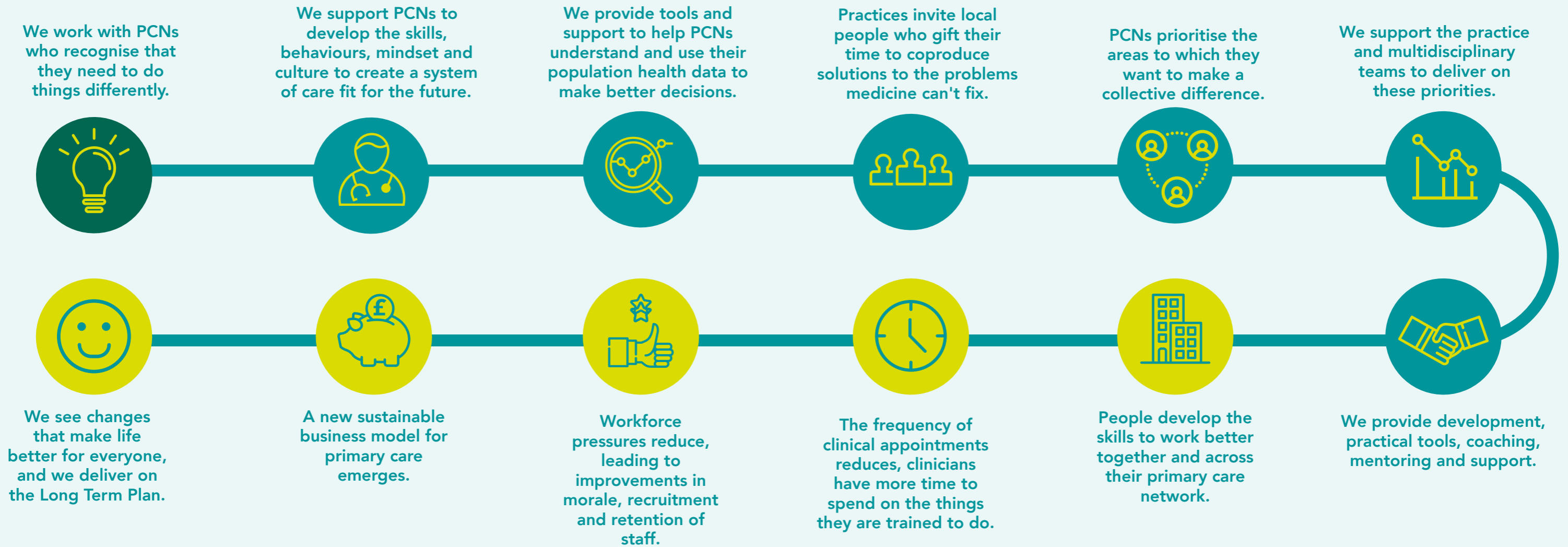
#### Coproducing solutions with each other and people in communities

- ✓ Local people help solve the problems that medicine can't fix
- ✓ Offers in the local community and voluntary sector are amplified and patients are connected
- ✓ The practice becomes part of the community

#### Organisational resilience

- ✓ A new business model develops
- ✓ Prescribing costs reduce
- ✓ Data is used to make better decisions for patients
- ✓ Recognition from CQC
- ✓ QOF achievement is supported
- ✓ Repeat visits reduce and long-term care costs reduce

**Supporting the development of primary care networks: the evolution of general practice**



## How we work with you:

We have a suite of tools and approaches designed to support primary care network development



"There's been a paradigm shift, a move to a wellness mindset not an illness mindset... it's one of the most rewarding things we've ever done."

DR JAWEEDA IDOO,  
GP PARTNER,  
ALVANLEY FAMILY  
PRACTICE,  
STOCKPORT

"It was the most empowering workshop, in every way, that I have ever been on and I learnt some very valuable skills from it...it is actually going to change my life."

MARIA KAY,  
PRACTICE MANAGER,  
PENNY'S HILL PRACTICE,  
DORSET





“At every programme module, I think of ways we could deal with things differently at work and it gives me new ideas, but the difference is I feel less afraid about trying new things or sorting out old chestnuts.”

CLARE DAVIES,  
SENIOR GP PARTNER,  
BANKS & BEARWOOD MEDICAL PRACTICE,  
BOURNEMOUTH MEDICAL CENTRE,  
CHRISTCHURCH, DORSET





## More about our team

**Altogether Better has been part of the NHS family since 2008. Our staff and associates bring experience and diverse perspectives from a broad range of backgrounds. Our team has worked in general practice and primary care, social care, the voluntary sector and with people in communities over the last 30 years.**

We have designed and led leadership development at all levels within the NHS (from Experienced CEOs and medical directors to junior doctors and new management trainees) and have particular expertise in delivering bespoke programmes (e.g. for trusts, STP CEOs, and practice managers in a CCG). Much of our work is supporting real time change (organisational development) in both primary and secondary care. We have facilitated the leadership of STPs and aspirant ICSs and have an extensive track record in organising networks to add value. We bring expertise in systems approaches and use this to support organisations to adapt and evolve.

### **Our award-winning approach**

Using a systems model of organisation development and an evidenced-base health champion approach to citizen involvement, Altogether Better has prototyped and scaled a radical system intervention which slowly, gently and subversively allows the system and the population it serves to co-evolve. This award-winning approach, which we call Collaborative Practice, has brought us national and international recognition.

We have worked with over 25,000 volunteer health champions who draw on their own assets and resources to improve health & wellbeing and service outcomes. We have a track record of developing Collaborative Practice in 25 CCG areas across the UK, ranging from inner city, urban areas to rural areas with a dispersed population.

We are well connected to developments around the world. We not only work internationally, we also have led study tours (for presidents of Royal Colleges, for CEOs or aspiring leaders) to places like South Africa, India, Vietnam, Holland and the USA where we can see both new approaches and emerging trends. With funding from the Canadian Government, Collaborative Practice is being tested across a number of sites in Ontario as their approach to social prescribing.

### **Creating and sharing best practice**

We are Faculty members of the NHS Leadership Academy, sit on the National Social Prescribing Steering Group and our work has been featured as a model of innovation and good practice in publications by The Kings Fund, the Health Foundation, HSJ, Innovation Hub, RSA and others. Our work was highlighted as best practice in NHS England's GP Five Year Forward View.

Working nationally, we've not only created best practice but we've seen it and can bring this to the work. We recognise that time is short and so we bring together evidence about what's needed and the tools to reduce appointments and improve outcomes.

We're very good at engaging those working in general practice (not just GPs). We understand that teams can feel pushed around, reluctant and jaded. We bring experience, stories and a compelling vision that gets them engaged and energised.

**Find out more at [www.altogetherbetter.org.uk](http://www.altogetherbetter.org.uk).**

**“The leadership development programme helps you to focus on the positive outcomes possible by working in a collaborative way, by embracing change and thinking differently... It challenges many of the established ways of thinking and makes you realise what is possible if you really want to make a difference.”**

**ANDY MINTRAM,  
BUSINESS MANAGER,  
THE ADAM PRACTICE,  
POOLE, DORSET**

# Logistics

## Working with your budget

We have described a wide range of programme offers to meet the support needs of both practices and PCNs.

We understand the importance of working alongside PCNs to design support which is tailored to both their development needs and their budgets. Our approach is to work alongside partners to define needs, offer options and provide costs based on exact requirements.

As part of the NHS family we price our work to match the cost to us to deliver and not to make a profit.

**The first step is to get in touch with Alyson or Helena to chat about how we can support you. Understanding your needs will help us prepare costed proposals designed to meet your local priorities and budget.**

## Chat to us



**Alyson McGregor**  
Director,  
Altogether Better  
E: [alyson.mcgregor@swyt.nhs.uk](mailto:alyson.mcgregor@swyt.nhs.uk)  
T: 07780 593409



**Helena Hughes**  
Head of Operations,  
Altogether Better  
E: [helena.hughes@swyt.nhs.uk](mailto:helena.hughes@swyt.nhs.uk)  
T: 07880 054015

## About us

Altogether Better has been part of the NHS family since 2008. We work with people and organisations in health and social care across the UK and with their equivalents abroad to develop the skills, mindset, culture and behaviours necessary to adapt to the changing world they find themselves in.



Talk to us to find out  
how we could work with you

**T: 01924 316394**

**E: [altogether.better@swyt.nhs.uk](mailto:altogether.better@swyt.nhs.uk)**

**[www.altogetherbetter.org.uk](http://www.altogetherbetter.org.uk)**

**Twitter: [@al2getherbetter](https://twitter.com/al2getherbetter)**