



**Greater Manchester
Primary Care Provider Board**
The partnership of primary care providers

2023/24 **Annual Review**

Part of Greater Manchester
Integrated Care Partnership



Foreword

Welcome to Greater Manchester Primary Care Provider Board's (PCB) annual review for 2023/24.

As the first and most mature primary care collaborative in the country, we have grown and progressed even further over the past year.

In this review, we highlight some of the major achievements and demonstrate how we have supported primary care providers and their workforce in Greater Manchester (GM), while also representing the sector in the wider system.

We are delivering support to primary care colleagues with training and development opportunities, via our programmes of work, and are a recognisable influence within the system. We endeavour to engage, co-produce, and collectively deliver programmes that aim to improve patient care while looking after those delivering the care.

Our thanks go to all our colleagues, from the front line to our GM boards, who work hard to make this possible.



Who we are, what we do and why

The PCB is centred around one shared vision of: *Primary care providers working collaboratively and in partnership at neighbourhood, place and system level to improve health and wellbeing throughout our communities.*

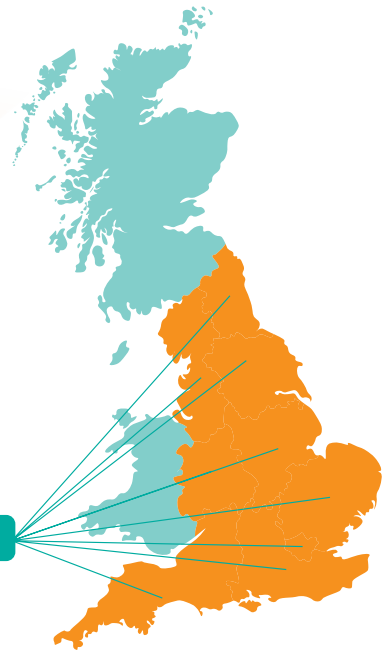
Established in 2015, we are England's first primary care collaborative. We give Greater Manchester's 1,800 primary care provider organisations (across community pharmacy, dentistry, general practice and optometry) a single voice.

Established in

2015

England's
first
primary care
provider

collaborative



65 🏠🏠
neighbourhoods

10 📍
places

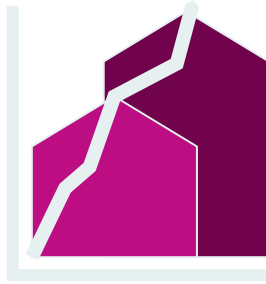
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2.8m
population

1 ⚙️
system

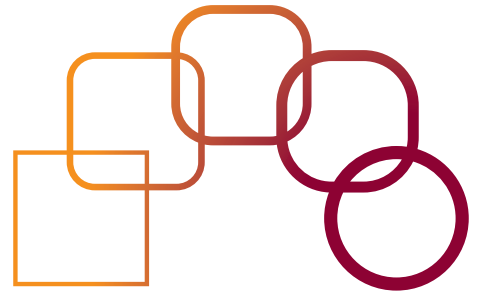
Shaping strategy
from the ground up



Improving
quality
of primary care



Driving
transformation



Bringing together



Giving providers



Delivering
better
patient
outcomes



PCB Delivery Team

The PCB delivery team is responsible for managing our programmes of work. The team brings together programme management disciplines, quality improvement, change management, clinical and provider leadership into a single function. This subject matter expertise is underpinned by large-scale change methodologies.

The team works alongside and has strong relationships with key system improvement partners, including Health Innovation Manchester (HInM), Strategic Clinical Networks (SCN), the Clinical Research Network (CRN) and Aqua, as well as thought leaders in primary care development, including the NHS Confederation and the Royal College of General Practitioners (RCGP).

Through these networks and the connections formed by the PCB, the delivery team has a strong reach across primary care and can respond to current thinking and be relevant to primary care today.

In addition, the delivery team supports GM locality teams, making sure there are links across localities and mutual support is available, along with a culture of continuous improvement and development.

The PCB delivery team also takes commissions to deliver against specific priorities.

In 2023/24, we worked with partners to fund and deliver several programmes to support the development of Primary Care Networks (PCNs). The content of each programme was in line with local and national policy, and in response to the needs expressed by PCN colleagues.

Details of this work can be found within this review, and we plan to extend our programmes in 2024/25 to include all primary care disciplines.

Fundamentally, the PCB delivery team supports the board to provide multiple functions, enabling it to:

- ✕ Develop strategy and a strong voice for primary care within GM, regionally and nationally
- ✕ Deliver quality improvement across primary care providers, transforming care, reducing variation, and improving patient experience and outcomes through Greater Manchester, local or neighbourhood-led programmes

We do this by:

- ✕ Championing and driving innovation, quality improvement and transformation
- ✕ Promoting and supporting exemplar employment practice, support, development and wellbeing for our 22,000-strong workforce through our HR function
- ✕ Delivering a sharp communications function, brand and consistent identity for the PCB
- ✕ Supporting and engaging clinical leadership in quality improvement and subject matter expertise

Our governance

When the devolution deal was struck, the need for a provider collaborative voice was important and central to the transformation agenda. We continued to grow and expand the number of programmes the PCB delivers through a memorandum of understanding with the Greater Manchester Health and Social Care Partnership (GMHSCP).

This arrangement continued into the GM Integrated Care System in July 2022, with the establishment of a Greater Manchester Integrated Care Partnership (GMICP) and NHS Greater Manchester (NHS GM), the Integrated Care Board (ICB) for Greater Manchester.

We are now fully integrated into the work and governance of the ICP as one of the first primary care collaboratives in the country.

We represent GM primary care providers on both the NHS Greater Manchester Board and the Greater Manchester Integrated Care Partnership (GMICP) Board, providing primary care provider insight into GM, and reporting back to the PCB.

Over time we have developed our governance in response to a growing involvement and accountability within the GM health and care system. This year we have seen a refresh for the PCB and our General Practice Provider Board. We have supported our locality GP Boards to develop, via formal board development opportunities. The PCB has established a cross-discipline Finance and Audit Committee to oversee our business matters.

Our memorandum of understanding with GM is inclusive of all primary care disciplines. We have welcomed this and the opportunity to work more closely together.

The current chair of the PCB is Luvjit Kandula and during 2023/24 the four discipline provider boards were chaired by Luvjit Kandula (community pharmacy), Don McGrath (dental), Dr Tim Dalton (general practice) and Dharmesh Patel (optometry). The chairs plus three members of each discipline board sit on the PCB, alongside representatives from nursing and NHS GM primary care. The board is supported by the PCB Chief Officer, Dr Tracey Vell MBE, and the wider team.



Our key 2023/24 achievements

Raising our profile

Building on the work completed in 2022/3 to create a shared PCB vision, strategic narrative, visual identity and website, we set up a communications team in April 2023 to help us reach frontline providers and all staff.

By producing consistent, clear and regular content for our communication channels, and ensuring that the PCB brand is at the core of everything we do, we have raised the profile of the PCB among providers and with the wider integrated care system.

With its distinctive look, the PCB visual identity has become the key, recognised brand representing the four disciplines of primary care within Greater Manchester. This, together with our PCB narrative and vision, will continue to strengthen our position as a significant partner in the system representing all primary care providers.

We have developed the **PCB website** (below right) as the main source of information and guidance for primary care providers, including regular news stories, resources and bespoke pages for each of our PCB programmes.

The number of average monthly users on the PCB website has grown from 1,500 users and 4,000 page views in 2022/3 to a monthly average of 2,400 users and 7,400 page views in 2023/4.

We have also grown our audience on the PCB social media channels, X and LinkedIn, by creating regular content directing followers to news items and information on the PCB website.

In April 2023, we had around 100 followers on X and around 30 on LinkedIn. In April 2024, this had grown to more than 1,000 and 700 followers respectively.

In June 2023, we launched the PCB Provider Update - our monthly e-newsletter which provides news and information for primary care providers and stakeholders, including updates on our latest projects and programmes, as well as news from the wider integrated care partnership.

Supporting sustainability

The PCB is committed to delivering the GM ambition to move more services into community settings; commissioning pathways of care that focus on prevention, rather than organisations. This work is running through all disciplines:

- ✕ Work has begun to establish a GM-wide GP-led gynaecology service as our first step in this new way of working. The GP Provider Board is leading this work with support from GM
- ✕ Community pharmacy is working with NHS GM to expand the eligibility criteria of the Minor Ailments Scheme (MAS) to support Pharmacy First delivery
- ✕ Optometry is working with the GM Strategic Clinical Network (SCN) to scale up the community glaucoma management service for low-risk patients, which has been running in Manchester for several years
- ✕ Dental providers are working with NHS GM to secure long-term funding for the successful GM Dental Quality Scheme launched in 2023

We continue to champion the direct flow of finances to providers, which will enhance their sustainability and secure their capacity to deliver better care.



GM Primary Care Blueprint

The Greater Manchester Primary Care Blueprint is a five-year plan for primary care across the city region. It outlines how we intend to organise and deliver primary care under a series of key ambitions across all disciplines and contains nine themed chapters:

- ✕ Demand, access and capacity
- ✕ Integrated working in neighbourhoods
- ✕ Health inequalities
- ✕ Prevention
- ✕ Sustainability
- ✕ Digital
- ✕ Estates
- ✕ Quality, improvement and innovation
- ✕ Workforce

Each chapter was developed in partnership with members of the PCB, locality teams and the NHS GM Primary Care Team.

The blueprint recognises that as a system we are all delivering primary care as business as usual to a high standard every day. It also recognises the need to transform our services to maximise their quality and to ensure their stability and sustainability so that they remain fit for the future for patients and staff.

The document was signed off by the Integrated Care Board in September 2023 and published in October 2023.

A separate document, the Year 1 Delivery Plan, was launched in May 2024 and shows the key actions needed to meet the ambitions highlighted for the year ahead.

The PCB has championed this work with our providers and ensured they were engaged and involved in the development of the blueprint. We also have a presence in the Blueprint Delivery Unit to ensure primary care providers are kept fully aware of the year-one deliverables and can express their views about the challenges and barriers to achieving the outlined ambitions.

Primary care summit

In March, around 300 people from all four disciplines of primary care, and partners with a key role in helping to deliver the blueprint, came together for the Greater Manchester Primary Care Summit 2024.

The summit was jointly hosted by the PCB and NHS GM and allowed providers to hear from key leaders in community pharmacy, dentistry, general practice, optometry, the PCB, NHS GM, and the Voluntary, Community and Social Enterprise (VCSE) sector.

The event showcased examples of best practice via a busy marketplace, provided an update on progress of the blueprint and the year-one delivery plan, and explored several hot topics for primary care via a series of workshops.

Discipline board achievements

The PCB has four primary care discipline boards sitting alongside its governance. Each board is unique and supports the work of its discipline, as well as providing three representatives - and its chair - as members of the PCB.

As we mature, we are looking to establish natural links across the discipline boards to ensure we develop our voice for primary care and understand each other's challenges and successes.

This approach further enables us to speak as one voice across primary care providers.

All boards have begun to develop relationships with their peers on matters such as primary care pressures, Pharmacy First and urgent eye care schemes.

Similarly, they have enhanced their experience and influence at a GM system level and become involved in key discussions. Each had significant input into the GM Primary Care Blueprint.



Community pharmacy

The Community Pharmacy Provider Board (CPPB) has continued to support providers with the pressures relating to finance, workforce and operational matters, as well as raising awareness and promoting collaboration between pharmacies and GPs/secondary care.

Key activity includes:

- Increased **representation and platform** at GM and with MPs to highlight significant financial, operational and workforce challenges faced by the sector to maintain open doors and accessible care to patients
- Working with GM leads to **address medicines stock issues**
- As part of PCB, **strengthened the collective and unified voice of primary care** to help develop the blueprint and Integrated Care System (ICS) operating model
- Launched the first **Pharmacy Excellence** programme in 2024
- Rollout of the **GM Care Record** access for community pharmacy
- Working with NHS GM to implement **MMR vaccination** in community pharmacy
- Provided **clinical training to 600 pharmacists** and locums in GM to support Pharmacy First delivery and readiness
- Secured **IT funding for PharmOutcomes** to support integrated referral systems between GPs, trusts and community pharmacies
- Launched **VirtualOutcomes online training**, enabling access to short modules on demand covering a range of topics
- Funding **Healthy Living Pharmacy** leadership and champion training places, supporting colleagues to achieve Royal Society of Public Health qualifications and accreditation
- Delivery of **Flu and Covid-19 vaccinations** through community pharmacies
- Ongoing work to support development of **GP/pharmacy interface principles, patient-led ordering** and other initiatives in collaboration with NHS GM and the wider system
- Worked with NHS GM to deploy and embed **Pharmacy First** in 95 per cent of community pharmacies between December 2023 and January 2024

Working with NHS GM to:

- Support Pharmacy First **training sessions for more than 350 GPs/PCNs**, plus training webinars and drop-in sessions for community pharmacy
- Deploy and embed **hypertension case finding service, Discharge Medicines Service (DMS), Smoking Cessation Service (SCS), and oral contraception service**
- Deploy **Urgent and Emergency Care NHS 111 Pharmacy First** pathway
- Deliver **webinars** on services that will improve patient care such as SCS, DMS and Pharmacy First
- Support implementation of the **IP pathfinder programme**
- Support development of NHSE **National Early Cancer Diagnosis** pilot in Bolton
- Expand and develop the **Minor Ailments Scheme (MAS)** with extended eligibility across 10 localities to support the GM winter surge plans



Dentistry

The Dental Provider Board (DPB) continues to be proactive in promoting the maintenance and development of NHS dental services in GM. In 2023/24 the board has focused on supporting providers with pressures relating to finance, workforce, and increased workload with the implementation of the Dental Quality Access Scheme.

Key activity includes:

- Successful rollout of the **Greater Manchester Dental Patient Access Quality Scheme**, with more than 200,000 appointments made available during 2023/24
- Addressing health inequalities with the **Greater Manchester Access Plus Scheme**, which continues to improve access and deliver continuation of care to patients who have received urgent care but who require further care and treatment within an NHS dental practice
- Delivering quality-assured initiatives through the **Healthy Living Dentistry (HLD)** project, which now has 60 GM practices involved. Plans are in place with the Local Dental Network to accelerate the number of practices taking part in the scheme, which involves dental practices in national and local health campaigns, often linked to local GPs and community pharmacies
- Initial plans in discussion to replicate the successful referral pathway for Looked After Children to include **other vulnerable groups** such as those with a recent cancer diagnosis who need dental care before treatment. The LAC referral pathway has enabled all looked after children in GM and Cheshire and Merseyside to find a dental home. The service is led by the Greater Manchester Dental Commissioning Team and the Consultant in Dental Public Health, and links with local authority teams supporting healthcare for Looked After Children
- **Child Friendly Dental Practice (CFDP) Scheme** – this service continues to support our specialist community services for children and reduces referrals and pressures into secondary care. The funding obtained to provide fluoride varnish has increased the applications to children and hopefully we will see a reduction in dental cavities in GM



Dental practices



Optometry

During 2023/24 there has been significant progress with key optometry services.

Key activity includes:

- Further extension of the **Glaucoma Enhanced Referral Service** to cover the whole of GM, with more than 3,000 patients seen and more than 40 per cent who have avoided referral to hospital eye services. The glaucoma monitoring service has also expanded to the Wigan locality. As glaucoma accounts for 20 to 40 per cent of outpatient appointments, the development of the glaucoma pathway has seen optometry emerging as a key facilitator of comprehensive glaucoma services
- The **GM Community Urgent Eyecare Service** (CUES) saw more than 55,000 patients over the past year across more than 200 optometry practices via the lead provider Primary Eyecare Services. A recent pilot of NHS 111 redirection into the CUES telemedicine service ensured that 444 patients over the first four months were managed and avoided use of precious GP, A&E and Hospital Eye Service appointments
- We have highlighted what is the 'art of the possible' in primary care optometry within the **GM Primary Care Blueprint**, including how optometry can support the system with wider health initiatives and improve access
- Patients with learning disabilities and/or autism can experience barriers to accessing eye care, yet they are eight times more likely to have an eye condition. GM optometry has **established a single point of access** to help patients and their carers to access the service. This has been implemented in collaboration with Seeability, the leading charity for supporting patients with learning disabilities or autism, who may also have sight loss
- The **Electronic Eye Care Referral System** (EeRS) implementation has continued to demonstrate success through 2023/24. EeRS is now used by 99 per cent of GM optometry practices, processing 60,644 referrals that would have previously been processed through GP practices. The arrangements for this have now been extended for a further year
- Development of the **Optometry Excellence Programme**, including wide engagement with optometry practices to finalise the programme's aims and objectives

340+
Optometry practices



General practice

The General Practice Provider Board (GPB) believes its primary aim is to collectively provide a common point for involvement and support for all providers of NHS general practice in their various organisational forms and levels, including practices, Primary Care Networks (PCNs), federations and Local Medical Committees (LMCs) across all 10 localities of GM.

Key activity includes:

- Taken part in several workshops and sessions to **develop a shared understanding** of the daily pressures around the current GP model of care, including the response for capacity and access delivery across PCNs, and discussions around estates, digital and workforce. We have reviewed these in a strategic context and across neighbourhoods and localities, and discussed possible solutions
- As part of the board's transformation, we have completed a series of tasks to ensure we are **appropriately constituted**. With the support of the Association of Greater Manchester LMCs, we have run elections for and appointed PCN, practice nurse and practice manager representatives, as well as a deputy Chair. We have confirmed our terms of reference and clarified how we also engage and work positively with the Urgent and Out of Hours GP Providers
- Developed work plans so we can support locality GP Boards as well as ourselves. We are proud all localities now have locality GP Boards. We have offered organisational support to help them achieve their full potential and become **strong, influential locality GP Boards**. This has allowed our locality GP providers to have a clear place to start to act as a conduit upwards from our member practices. This has meant their experiences and great work to date is

shared for other localities to learn from and understand, and to allow information to flow in reverse. It has also allowed neighbourhood and locality general practice voices to be heard within GM primary care workstreams and influence both what the GPB does and how the GM Integrated Care System (GM ICS) perceives general practice

- We are leading on our use of the **allocated ARRS budget**
- Deployed funds to each locality GP Board so they could **engage more proactively in their locality system governance**, enabling them to work closely on things like winter planning and delivery, and the primary/secondary care interface
- Led on work at GM for additional winter pressure monies for 2023/24, which resulted in around **53,000 additional urgent GP appointments** in surge hubs
- Objectively raised the **inequity for funding in GM general practice** compared to other northwest Integrated Care Systems (ICs), as well as between localities. This has been influential in our joint leadership with NHS GM in redesigning the Quality Contract in the BeCCoR work
- Responded to **national consultation** on general practice payment incentives, and the NHSE vaccine strategy on behalf of general practice, as well as engaged at a GM level on the issues around staff immunisation and PPE, as the national measles incident developed
- Matched the **skill sets and capacity of individual members** to help with issues facing Greater Manchester Association of LMCs and Greater Manchester Alliance of Federations
- Contributing to the **Digital First Primary Care programme** with HInM

400+
GP practices



Primary care excellence

The long-established GP Excellence Programme continued to provide a blend of training and development opportunities to general practice staff and PCNs across GM throughout 2023/24. The past year has also seen the launch of excellence programmes in two additional primary care disciplines, optometry and pharmacy, plus the rollout of the Greater Manchester Dental Patient Access Quality Scheme.

GP Excellence

Responding to ongoing challenges facing primary care, we have taken proactive and reactive action to ensure maximum uptake of offers. Delivery of programmes has been aligned to practices and individuals within the four pillars of the GP Excellence Roadmap – rescue, resilience, improvement, excellence.

The team has:

- Commissioned five **financial health check webinars**, delivered by the Royal College of General Practitioners (RCGP). This was in response to feedback raised by the General Practice Provider Board (GPB) about the financial difficulties faced by general practice, such as rising utility costs, cost of living, and increase in the minimum wage
- Invited a practice manager and GP partner from 36 practices to a **succession planning webinar** by the RCGP. Attendees received a toolkit to rate their performance and a one-hour bespoke session with a RCGP specialist advisor
- Co-delivered a **complaints training webinar** with NHS GM's Complaints and Liaison team and the Parliamentary and Health Service Ombudsman. The two-hour interactive webinar took 136 attendees through the steps required for complaints handling, as well as covering the common mistakes made
- Collaborated with the GM workforce team to plan and deliver the monthly **GM Practice Manager Forum**. Average attendance each month is between 70 and 100 people and features guest presenters
- Supported delivery of the **clinical podcast programme** via Primary Care Knowledge Boost. In October 2023, it achieved an impressive one million downloads since its launch in 2019, with average listening figures of between 5,000 and 10,000 per episode
- Piloted a **responding well to conflict training** package. Training is divided into two sessions; the first is aimed at frontline staff and their managers and provides context around why conflict occurs, why it appears to be increasing, de-escalation methods and what to do when things go too far. The second module helps managers support their staff when they experience abuse and the policies they should have in place to deal with the issue efficiently and effectively.
- Organised a PCC **whistle-stop tour of primary care finance webinar** for PCNs as part of the PCN Development Programme
- Commissioned a series of one-hour **masterclass webinars** to provide practice managers with practical support in year-end planning and preparation, creating a business plan, business continuity, new contracts, and responding well to conflict – supporting your team
- Commissioned an update of the **'CQC maintain your rating' evidence checklist** to support changes to the new regulatory framework. The checklist was shared with all GM practices in advance of pending CQC inspection visits
- Facilitated **two away-day sessions** to help a PCN work strategically to identify their priorities, improve working relationships and design delivery plans for programmes
- Provided **bespoke support to practices** with a CQC rating of 'requires improvement', 'in special measures', in receipt of a breach notice, at risk of closure, or at risk of 'requires improvement/special measures' at next inspection
- Provided **mentoring, coaching and training** to individuals and groups on a range of topics

Pharmacy Excellence

The Pharmacy Excellence Programme was launched at the end of 2023/24 in partnership with Community Pharmacy Greater Manchester (CPGM) and Captivating Training Solutions.

All community pharmacies in Greater Manchester can register for the programme via a dedicated website, ReviveRX, which can diagnose a pharmacy's issues via a series of questions.

Each pharmacy will receive an operational 'health report' and a bespoke training programme designed to equip them to reach their full potential. As a result, they should enhance efficiency and improve patient care.

The programme has been designed in response to years of turbulent times experienced by community pharmacies, including underfunding, medicine shortages, rising costs and overworked teams.

Examples of training topics include: strategic staffing solutions and skills audit; talent management and flexible roles; boosting team cohesion and wellness recovery action plans; and looking at the seven principles of 'lean' waste management.

Dental Patient Access Quality Scheme

More than **50 per cent** of NHS dental practices in GM committed to seeing new patients in 2023/24 as part of the Greater Manchester Dental Patient Access Quality Scheme.

As a result, more than **200,000 appointments** were made available, providing access to more than **105,000 patients** new to practices and more than **95,000 patients** requiring urgent dental care.

However, more than **20,000 patients failed to attend** appointments and therefore limited access for other patients. There are plans to sustain similar scheme arrangements in 2024/25 and the scheme has been ratified for the first quarter.

The Dental Provider Board is grateful to its primary care colleagues who have supported the scheme since its inception. The scheme demonstrates how we can develop positive outcomes when **working in collaboration with our commissioning colleagues**, who must be applauded for their vision in trying to make things better for patients in GM.

Central government was keen to understand our scheme and used it as the framework for their own initiative rolled out in March. We believe that our scheme is more **innovative and sustainable** than the national scheme.

Practices again have been offered a quality premium payment of six per cent of their total contract value. In return, they will continue to provide access to urgent and new patients at a level that is proportionate to the size of their whole contract value. The quality scheme has provided much-needed **financial support** for general dental service practices and has **greatly improved access** for NHS patients.

This scheme continues to illustrate what commissioners, providers and partners can achieve by working together to find solutions to address local health needs.

Optometry Excellence

The Optometry Excellence Programme has started to move from the planning to the delivery stage. The programme has four defined workstreams:

- ✘ **Rescue and resilience** – focusing on health and wellbeing, and workforce
- ✘ **Practical support** – focusing on supporting practices with the elective reform and recovery pathway, glaucoma referral filtering pathway and the independent prescribing pathway. Also, practices will be supported to reduce health inequalities through the Pride in Practice initiative and People with a Learning Disability (PwLD) pathway
- ✘ **Optometry referrals improvement programme** – focusing on quality improvement, including data analysis of referrals and trends with a focus on health inequalities. A ‘dashboard’ will be created to enable practitioners to review their referral habits comparatively to their peers enabling self-review, personal development and quality improvement. A digital enablement officer will be engaged to support optical practices, practitioners and secondary care providers with the EeRS referral platform. This will include assisting practices and practitioners with connectivity or networking issues that may prevent or hinder data transfer from other diagnostic equipment within a practice. This should improve the quality of referrals, when available and funded
- ✘ **Sustainability** - the digital enablement officer will also work with the sustainability programme, focusing on enabling greener provision of optometry services and financial sustainability of the sector

In the second half of 2023/24, the optometry workforce was widely engaged to ensure the plan was in line with what they required.

Health and wellbeing

The health and wellbeing programme has further developed its reach into frontline services to **support all primary care staff**, resulting in lots of positive feedback. As well as providing wider wellbeing support and signposting to resources, the programme delivers **tailored training and support** to practices and individuals who need it.

Activity includes:

- Supported practices to meet the **Quality Outcomes Framework (QOF) Quality Improvement (QI) workforce wellbeing module 2023/24**, by improving wellbeing, resilience and risk of burnout, creating a compassionate and inclusive culture in general practice
- Supported practices with the **Care Quality Commission (CQC) Workforce Wellbeing and Enablement Quality Statement**. The CQC inspection focus on wellbeing extends to primary care staff teams just as much as patients
- Collaborated with GP Excellence programme to **record a podcast** explaining QOF QI workforce wellbeing module
- Conducted **staff wellbeing surveys** with localities to establish baseline wellbeing
- Conducted PCN workforce wellbeing **peer review** meetings and **education events** with recommended improvement plans
- Launched a pilot scheme to establish **wellbeing champions** within PCNs
- Supported a PCN to meet **Workforce Health and Wellbeing KPIs** for 2023/24 and established KPIs for 2024/25

- Co-produced **workforce wellbeing poster** for all primary care providers
- Supported **engagement with practices** – primary care occupational health survey and Freedom to Speak Up Guardians survey
- Contributing to the development of **Freedom to Speak Up Guardians** scheme for GM
- Completed **‘train the trainer’** coaching to deliver a new programme of wellbeing training opportunities for the primary care workforce



Occupational health

We were involved in securing the NHSE requirement for occupational health services for needlestick and blood borne viruses (BBV) for all GM primary care providers. This is an extension of the national requirement to deliver the service for general practice and dental services only.

We are also involved in ongoing discussions for the delivery of wider occupational health services for primary care against the national specifications. In addition, the PCB is committed to continually reviewing the services and influencing the development of more convenient delivery points over time.



Supporting our workforce

Building on the work we did last year, knowledge about our HR support offer has increased and we've been able to help managers with some of the thorny HR issues that can cause real difficulties for individuals and teams.

Many providers contract externally for HR services, but the opportunity to grasp what the alternative courses of action could be isn't always available. In several cases, we have been able to support with early interventions which have saved time – and money – for employers, not only resolving the issue but enabling better understanding for future action.

We also represented the PCB on the Primary Care Blueprint Workforce Chapter as part of the triumvirate model and we have held five workshops engaging those involved with workforce support, including social care and the VCSE. This has encouraged greater sharing of resources and plans to deliver against the three key elements of the workforce chapter – recruitment, retention, development and education.

Also in line with the workforce chapter is the increase in organisations signing up for the GM Good Employment Charter - we now have GEC supporters and members in all of the primary care disciplines.



Additional Roles Reimbursement Scheme (ARRS)

Despite the lack of clarity nationally about how Additional Roles Reimbursement Scheme (ARRS) funding models were to be deployed this year, we have continued to build on the success of last year across primary care with support for employers on everything to do with recruitment and deployment to maximise the contribution these roles can bring to patient services.

The ARRS senior oversight group has provided leadership, focusing on ensuring consistent and regular communications to PCNs and tighter monitoring of spend in alignment with finance colleagues at NHS GM and locality levels.

There has been better access to workforce data about roles that are difficult to recruit to and shared learning about how the ARRS roles can bring new ways of working with our population, along with closer working with our finance colleagues to support better use of the monies available.

With around 1,921 whole time equivalent (WTE) ARRS roles in place across GM, 2023/24 has resulted in a predicted spend of £73.2m from the maximum allocation of £74.8m – the best GM spend to date since ARRS was introduced.

We have worked with NHS GM to help develop a public-facing campaign to raise awareness of ARRS roles available and how they can support patients, called 'Who's who at your GP practice'.



Greener primary care

We have been working in partnership with NHS GM to support environmental sustainability in primary care focusing on provider engagement, high-quality low-carbon asthma care, sustainable travel and ensuring sustainability was prominent in the blueprint.

In 2023, an initial version of the Healthier Greener Travel toolkit was developed after NHS GM secured funding from NHSE to support sustainable travel in primary care. The toolkit was piloted by 40 providers and included a site audit, culture survey, staff and patient travel surveys, and a travel plan template. Five providers were successful in securing further funding for interventions including new bike shelters, e-bikes for staff use, and installing lockers. The toolkit is being reviewed for broader release in 2024/25.

The 10-step plan for greener primary care is hosted on the PCB website and suggests ways of getting more involved in sustainability in the primary care workplace. The website is currently being refreshed to include more resources.

The PCB has supported engagement with dental, optometry and community pharmacy to find volunteers for a fully funded carbon footprinting pilot, where sites could find out their carbon emission 'hotspots' and how to address them. The results of the pilot have enabled the NHS GM sustainability team to start to build a picture of where hotspots are, and more work is needed to develop this in the future.

The work to support high-quality low-carbon asthma care has continued, focusing on those who are over-reliant on reliever inhalers and encouraging the move to dry powder inhalers where appropriate. The carbon footprint of inhaler prescribing across GM has dropped by 206 tonnes of carbon dioxide equivalent emissions (CO₂e) from January 2023 to January 2024 – the equivalent of taking more than 1,300 cars off the road in just one year. There is still unwarranted variation in inhaler prescribing across localities and there are plans to work closer with locality medicine optimisation teams and local PCN pharmacists to reduce emissions further across GM.



Making an impact with PCB programmes

The PCB worked with partners to fund and deliver support and training to **hundreds of colleagues** working in Primary Care Networks (PCNs) throughout 2023/24.

✘ More than 300 people from general practice attended the **PCN Development Programme** over three sessions held at The Studio in Manchester.

Each session delivered a series of workshops designed in response to the needs expressed by PCN managers, clinical directors, practice managers, ARRS colleagues, LMCs and federations.

Content was in line with the Greater Manchester Primary Care Blueprint, the Integrated Care Partnership (ICP) Strategy and the national Fuller Stocktake Report.

✘ Participants of the **PCN Leadership Programme (Progressing PCNs)** received targeted and developmental support that will benefit them as individuals as well as their PCN.

Progressing PCNs was a six-month programme dedicated to supporting clinical directors and PCN managers with leadership skills. The programme was a mixture of online and face-to-face workshops.

The course content included specific tools to help participants improve skills such as conflict resolution, leadership confidence, self-awareness and collaboration.

In total, 52 colleagues across 24 PCNs took part in the programme which was delivered in partnership with the NHS Confederation.

Participants developed and refined their skills in strategic PCN leadership, explored their personal leadership strengths, identified areas of personal development, developed critical thinking skills and explored the PCN team context from multiple perspectives to enable strategic decision-making.

✘ The PCB's **Proactive Care Programme**, delivered in conjunction with Peak Health Coaching and the national CLEAR programme, focused on helping PCNs develop specific proactive care approaches for three cohorts: frailty; dementia and high-intensity service users.

Also delivered over six months, a total of 20 PCNs took part in structured workshops, networking sessions, a learning network and PCN participation.

As a result of the programme, all participating PCNs designed proactive care approaches for their selected cohort and have begun to implement them.

They identified specific patient groups using data analysis, changed operating protocols from reactive to proactive, and used the ARRS workforce, such as health coaches, social prescribers, care coordinators, clinical pharmacists and paramedics.

A new cohort of the Proactive Care Programme takes place in 2024/25.

✘ We also partnered with Health Integration Partners to provide a bespoke programme of support to each of the 10 **GM place-based GP Boards**, also known as **locality GP Boards**, and the **GM General Practice Provider Board (GPB)**.

The aim was to equip the boards with the perspectives, plans and skills to thrive as effective and sustainable organisations for leading quality and transformation as part of the health and care community.

The programme was designed to deliver support that is practical and hands-on, bespoke to each board's needs, using in-situ coaching rather than classroom teaching to help the board develop fresh insights, stronger plans and deeper connections.



Digital First Primary Care

The PCB has supported Health Innovation Manchester (HInM) in their Digital First Primary Care (DFPC) Programme to:

- improve patient access to GP services so patients can easily access the advice, support and treatment they need using digital and online tools
- improve staff ways of working
- optimise capacity management in general practices and PCNs.

Over the last 12 months, the HInM programme team has continued to build strong relationships with general practice, PCNs and leaders across the region, advancing digital access to primary care services in GM. As part of the whole DFPC team, 17 Primary Care Digital Facilitators are collectively supporting PCNs and practices to implement improvements by:

- providing hands-on advice, guidance, 1-2-1 coaching and training to support local digital transformation initiatives
- working in partnership with local authorities and the VCSE sector to promote the NHS App across GM, by supporting face-to-face engagement events in communities
- delivering a shared goal of promoting digital inclusion and encouraging patients to take an active role in their care

Primary Care Digital Facilitators have contributed towards some excellent outcomes by working together and supporting each other to improve the digital front door in general practice.

Key highlights during 2023/24 include:

- 36 practice support sessions for Cloud-based Telephony and Virtual Contacts
- 26 NHS App promotion events
- Practice website improvement activity
 - 425-plus practice website improvement audits completed
 - 248-plus took part in improving practice website journey with recommendations
 - 144-plus websites improved in line with national guidelines
- NHS App usage increased
 - 76 per cent increase in logins from January 2023 to January 2024
 - 15,000 appointments booked or cancelled in January 2024
 - 173,000-plus repeat prescriptions ordered in March 2024



Closing statement

The past year has highlighted our success as a much-needed link between primary care providers and the Integrated Care Board – NHS GM.

We will continue to represent and champion the needs of our providers in 2024/25 and continue to work in partnership with NHS GM to support delivery of the primary care blueprint and its priorities.

In our commitment to deliver the GM strategy, we will continue to drive our work to commission pathways of care and develop specifications that will enable the 'left shift' of services from hospital into community and primary care.

We will also work with Health Innovation Manchester to continue delivery of Digital First Primary Care, and the GM Training Hub to improve digital skills within the workforce.

In addition, we intend to build on our expertise to drive innovation, quality improvement, leadership, and primary care transformation via our varied programmes of support at system, place and neighbourhood level.

The workforce will also benefit from the excellence programmes in all disciplines, as well as ongoing support from health and wellbeing, HR and communications functions.

There will also be exciting opportunities for us to seek out new partnerships and develop relationships with GM partners; firmly establishing us as the collective voice for primary care.

For more information about **Greater Manchester Primary Care Provider Board:**

 gmpcb.org.uk

 uk.linkedin.com/company/gmpcb

 @GM_PCB

 info.gmpcb@nhs.net

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