



Programme of support to general practice

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Introduction to our programme of support

We recognise that no two practices are alike and as such we offer a flexible range of options to practices. Each element of support can be commissioned separately and in stages.

Diagnostic review

Some practices find it helpful to have an external assessment and review as a starting point. This is particularly useful where there are differing views within the practice as to how to take the practice forward, or if the practice does not have a clear development plan of how to ensure the practice remains viable. We provide more information about this element on pages 5 & 6.

Action planning

Where a diagnostic review is provided, we also include the option of a follow up visit to develop an action plan with the practice team. More detailed information about this can be found on page 7.

Hands on support

Often, a practice will have identified a clear need, or set of needs, where they would benefit from hands-on support to develop one or more particular aspects of their team or service. We set out on pages 8-10 the different elements of support we offer.

The list of support is not exhaustive. Our team has a wealth of skills and experience and we can develop bespoke support where required.



Diagnostic review and baseline assessment

Diagnostic review and baseline assessment

The practice will undergo a baseline assessment comprising of:

- Preparatory work, including review of existing externally available information, which includes a scoping call with the practice to gain some initial information about the issues the practice would like the assessor to focus on
- A full day practice visit – talking to practice staff, gathering evidence
- Within two weeks the practice receives a written report

Format of the review

The reviewer will interview available practice staff and the practice manager. The aim of the interview will be to ascertain practice strengths, weaknesses and overall staff morale. Interviews will be targeted to explore the findings from our preparatory research, but within a set structure covering the following areas:

- Services to patients
- Practice organisational structure, infrastructure and governance
- Practice performance
- Implementing the 10 high impact changes
- SWOT analysis
- Recommendations for the future

Once the review is complete the reviewer will prepare a written report outlining suggested next steps for the practice to take which will be provided to the practice for consideration.

Scope of diagnostic review

Diagnostic - scope of the review in detail

Service to patients

- Patient access
- Making appointments
- Number and type of appointments
- Patient care & treatment
- Confidentiality
- Other services

Infrastructure

- Health and safety compliance
- Maintenance regimes for premises & equipment
- Premises suitability & space utilisation
- Infection control measures
- Office equipment
- Telephone system
- IT systems
- Medical equipment
- Availability
- Effectiveness/calibration

Practice organisational structure

- Management structure and governance
- Financial management
- Staffing levels and recruitment
- Staff banding/grading
- Staff skills
- Staff training

Practice performance

- Patient survey/friends and family test
- Quality and outcomes framework
- Immunisation/vaccination take-up
- Compliments/complaints
- Prescribing
- Incident reporting

Action planning

Planning

It can be helpful to ask our assessor to return to the practice and develop their recommendations for change into an action plan. This is particularly relevant where the practice team may not be in agreement about how to take the practice forward.

A return visit to the practice is to meet with those who will be taking forward the recommendations proposed in the diagnostic review. The purpose of the visit is to develop a plan to implement the recommendations the practice would like to pursue. The plan is structured as follows:

- Issues to be resolved – these link to issues raised during the diagnostic and the recommendations for change (but can also include other issues the practice would like to resolve)
- Proposed action steps
- Identification of resources which need to be allocated to the action steps (human resource, financial resource, or external resources where these are available)
- Create ownership for action steps
- Identification of required outcomes and success measures
- Target completion date

Once the planning visit has been completed, the assessor will write up the action plan and share this with the practice.

Hands on support

PCC provide hands on support for practices to develop their resilience in a range of ways:

Specialist advice and guidance

- Practice mergers – where appropriate we can advise on the merger process as well as on less formal routes to improvement through collaboration
- Premises advice
- Capacity and demand management audit tool and implementation guidance (includes a day's support from a patient access subject matter expert)
- Practice finances, income and expenditure reporting, budgeting and forecasting
- Support with reviewing clinical and administrative skill mix and making changes to job roles and responsibilities
- Support with CQC inspection preparation tailored to individual practice needs
- Support with operational issues and challenges

Coaching and mentorship

- Provided by experienced executive coaches who have experience of working with primary care professionals, clinical and non clinical. Four sessions of coaching to take place initially. Up to three different individuals can be coached in a day, or individual sessions can be arranged
- One to one peer mentor support for newly appointed practice managers for the first 6-12 months of their tenure, provided by experienced practice managers



Hands on support

Practice management capacity support

- Project management for short-term specific projects requiring additional capacity or skills for a set period of time, eg in the lead up to a practice merger
- Short term practice management capacity where there is a gap, eg providing cover where the practice manager is off sick or the practice suddenly finds itself without a manager

Change management and improvement support to individual practices or groups of practices

- Strategic business planning support and guidance (with the option for us to facilitate this with the practice leadership team)
- Customer service training for reception teams - three separate half day sessions:
 - Effective communication
 - Care navigation and signposting
 - Smarter working
- Introduction to Plan-Do-Study-Act (PDSA) cycles and how to use this simple but effective tool to make small changes that have big impacts
- Access to our Confident Practice Manager programme (see page 10 for further details)
- Team building support and development, using a range of tools including Belbin team roles and Myers Briggs Type Indicator (MBTI)
- Leadership team development (aims, vision and ways of working) - particularly relevant to newly formed teams, or post merger
- Facilitation of practice away days
- Facilitation of pre-merger exploratory discussions
- Support to review emerging new models of care

Confident Practice Manager- for primary care managers

The Confident Practice Manager programme is designed for those who aspire to improve in their leadership role in practice management. It brings together like-minded individuals in a safe and stimulating environment to learn together and share experiences, supported by experienced executive coaches who provide context and with expert input on a number of areas relevant to participants. It aims to give managers knowledge and confidence to become more effective and higher achieving, equipping participants with resources to push on to the next stage of leadership and development of general practice.

It has been designed to resolve the dilemma that practice managers are under huge workload pressure but need time and space to develop the capabilities to take themselves and their practices to the next level. It also recognises that the need for change in many practices is urgent, so there is not the luxury of endless time to spend developing leadership skills away from work. The programme is equally relevant to federation and alliance managers.

- The role of the practice manager in the changing NHS
- Understanding people and leadership styles
- Influencing skills
- Leading general practice through change
- Facilitation skills - making the most of meetings
- Working with and developing your patients and community
- The coaching approach
- Review, continued application and development

The nine-month programme (comprising eight half-day sessions) is available on our national event programme for individual managers to sign up to, or we can run bespoke programmes in your area for a group of practices at dates and times to suit you. You can access the full prospectus here:

https://www.pcc-cic.org.uk/sites/default/files/articles/attachments/confident_practice_manager_prospectus_october_2017.pdf

Primary Care Commissioning CIC

PCC is a not-for profit company that provides trusted, practical support to commissioners and providers of health and social care including training, development and advisory services. Our mission is to promote all aspects of service development and improvement with a focus on quality, efficiency and health outcomes. We provide expertise and project management to help organisations manage change programmes and address particular challenges.

Our trusted, practical support to commissioners and providers includes training, development, advisory services, events and networks that:

- Promote collaboration between commissioners, providers and patients in the design and delivery of services
- Support the development of integrated care systems to meet the changing needs of the NHS
- Help organisations to develop the knowledge and skills needed for continual improvement
- Enable relationship building and sharing of good practice.

We support the NHS to improve its use of resources and apply the same standards to our own organisation, focusing on value for money, sustainability and the use of local suppliers wherever possible. Our staff have first-hand experience of contracting, commissioning and primary care management.

The PCC adviser team and our network of associates include acknowledged national experts in their fields. PCC is chaired by Professor David Colin-Thomé, former national director of primary care.

We can provide references, testimonials and further company information upon request.



What our customers like about us

PCC conducts an annual survey of customers and routinely evaluates consultancy and other project work. The latest survey (autumn 2017) indicates a high level of customer satisfaction with a Net Promoter Score of +40, putting us in the top quartile of UK small/medium companies .

Our customer evaluations and testimonials confirm what PCC clients most value about our service:

- Our knowledge of local context, including customer challenges and service priorities
- Our long-standing relationships through our network of local advisers
- The ability to access our wider network of associates for project and programme support
- Our practical support for planning and decision-making in primary care
- Our knowledge of regulation and contracts
- Our understanding of the strategic context and the role of primary care in wider system change
- Our ability to help organisations to avoid risks and resolve contractual issues without recourse to costly legal advice
- Our networks with other organisations and key stakeholders
- Our connections with policy-makers and influencers that give us access to the latest intelligence
- Our highly regarded programme of learning and training events and workshops.



Feedback from practices who have worked with us

Diagnostic review and baseline assessment, Walsall

PCC successfully completed a holistic diagnostic review of the practice, looking at services to patients, practice organisational structure, infrastructure (management and governance) and practice performance.

- “We really found the diagnostic assessment and report helpful. The assessor was so easy to talk to and put everyone at their ease. The recommendations made in the report really identified what support we need, and we look forward to working with PCC on the next stage of this programme.” – Helen Walton, practice manager

Practice mergers, North Warwickshire

PCC associate Frances O’Sullivan recently supported two practices in north Warwickshire to merge, creating the largest practice in the area.

- “Having an identified project manager gave a focus to the work and Frances was able to co-ordinate the actions in the project plan. She also arranged weekly tele-conferences – and identified people from key agencies who it was useful to have joining in particular calls. I think Frances’s primary care management experience was crucial” – Jenni Northcote, chief strategy and primary care officer with NHS Warwickshire North Clinical Commissioning Group
- “Although the practice had been proactively holding weekly planning meetings, Frances was invaluable in highlighting areas and risks that needed action. She identified key people within NHS England and PCSE and generally kept the momentum going when we were juggling so many tasks” – Elizabeth Gilbey, practice manager

Coaching assignment: general practice, Norfolk

Helen Northall provided individual coaching to a practice manager who gave her top marks in every category of the coaching evaluation. The individual also said:

- “The coaching gave me the confidence to know that I am driving the practice in the right direction, with all the changes that I have made since taking up the post and will continue with my vision!” – Practice manager

