

**15 January 2020**

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### **Introduction**

1. The RCPCH notes NHS England and Improvement's (NHSE/I) draft service specifications<sup>1</sup> for the Direct Enhanced Services (DES) to be delivered by Primary Care Networks (PCNs). PCNs were established under the five-year GP Contract framework agreed in January 2019.
2. The draft DES specifications outline the details of the following services, to be implemented from April 2020:
  - Structured medication review and optimisation
  - Enhanced health in care homes
  - Anticipatory care
  - Personalised care
  - Supporting early cancer diagnosis
3. We note that two further specifications are still to be developed and will be implemented by PCNs in April 2021:
  - Cardiovascular disease prevention and diagnosis
  - Tackling Neighbourhood Inequalities.

### **Feedback**

4. We have reviewed the draft specifications for implementation in April 2020 and have the following comments.
5. When the NHS Long Term Plan was published in June 2019, we were pleased to see the priority placed on children and young people's health. In our view, the Plan presented several measures which can make a real difference to the health and wellbeing of children.
6. We also welcome the introduction of PCNs and the opportunity to offer 'more personalised, coordinated care' to local populations. We understand it has been estimated that there will be, on average, 10-12,000 children and young people (aged 0-19 years) in each PCN.
7. Given the priority and emphasis placed on transforming children and young people's health in the NHS Long-Term Plan it is surprising and disappointing that there is no reference to children and young people's health in these draft service specifications. We are concerned that this could limit the impact that these new services have on achieving the goal of more personalised and coordinated care for the whole population.

8. For example, the Anticipatory Care service builds on population health management approaches that model and identify those with complex needs. The current draft specification does not provide us with the assurance we need to be confident that these segmentation models will successfully identify those children and young people with complex needs who would benefit from this service.
9. We encourage NHSE/I to take this opportunity to ensure these service specifications can offer more personalised care to children and young people in their local area. Each of these service areas apply to children and young people in some manner; children and young people may be prescribed multiple medicines or have long-term conditions, they may be eligible for social prescribing or personal health budgets, or they may be living in care homes. The current drafting of specifications does not reflect these circumstances, particularly where they relate specifically to children and young people and this is a huge cause for concern. For example, we would expect that
- in Structured medication reviews, the specification would refer to the roll out of the Stopping Over Medication of People with a learning disability or autism and Supporting Treatment and Appropriate Medication in Paediatrics (STOMP-STAMP) programmes.
  - the Anticipatory care DES, with its aim of delivering better interconnectedness between all parts of the health system, would build on the RCPCH/RCGP/RCN Facing the future: Together for Child Health<sup>ii</sup> standards for unscheduled care services. These standards are focused on helping to reduce unnecessary attendances at emergency departments and admissions to hospital in a local area. The standards provide a framework to support joint working by service providers, commissioners, planners and users, and feature good practice examples from across the country. Such an approach would complement the draft specification's focus on individual patients.
10. Finally, we note that the 'wide-ranging process of evidence gathering and engagement' that NHSE/I has undertaken to develop the draft specifications described in paragraph 1.6 did not include children and young people, their representatives, or community paediatricians. This omission is disappointing and unfortunate, and appears counter to the commitments in the NHS Constitution. We strongly encourage NHSE/I to address this as these specifications are finalised, and in the development process for future DES specifications.

## References

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<sup>i</sup> NHS England and NHS Improvement. 2019. Network Contract Direct Enhanced Service: Draft Outline Service Specifications. Available at: [https://www.engage.england.nhs.uk/survey/primary-care-networks-service-specifications/supporting\\_documents/Draft%20PCN%20Service%20Specifications%20December%202019.pdf](https://www.engage.england.nhs.uk/survey/primary-care-networks-service-specifications/supporting_documents/Draft%20PCN%20Service%20Specifications%20December%202019.pdf)

<sup>ii</sup> Royal College of Paediatrics and Child Health, Royal College of General Practitioners and Royal College of Nursing. 2015. Facing the Future: Together for Child Health. Available at: <https://www.rcpch.ac.uk/resources/facing-future-together-child-health>