

# Trafford Overview & Scrutiny Committee

New Models of Care Update

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## Trafford New Models of Care Progress and Way Forward

# Vision and Objectives

NMoC aims to radically change the way in which Primary care is delivered in Trafford to meet the increasing and varied demands of its growing and ageing population across each of its four diverse neighbourhoods. The new system will produce better outcomes starting with prevention and concluding with end-of-life care, it will relieve system and financial pressures and create a collaborative environment where people want to work whilst maintaining a sense of practice identity. The new service will also facilitate closer working with community, social, mental health and secondary care providers and partners.

## Our Vision:

To provide a sustainable primary care service through a common ethos, single system, owned and run by Trafford GPs, delivered through our four neighbourhoods whilst maintaining strong practice identity.

## Our Objectives:

### 1. Deliver improved outcomes

- Increase the number of years of healthy living.
- Improve all cancer, diabetes, cardio-vascular and respiratory mortality rates to at least nationally and locally agreed targets.
- Improve the level of physical inactivity in the Trafford population.
- Decrease variation in outcomes across Trafford's four neighbourhoods.

### 2. Ensure a sustainable system resilient to population growth

- Improve GP retention rates.
- Increase self-care of patients.
- Reduce Walk-in-Centre activity back down to originally contracted levels and reduce A&E and NEL activity.
- Reduce acute referrals.
- Shift some outpatient activity out of a secondary care setting into primary care.

### 3. Improve quality and experience

- Improve GP job satisfaction and morale.
- Create a safe and sustainable working environment for all Trafford healthcare workers.
- Provide more training, education and knowledge sharing opportunities at all levels of the workforce.
- Significantly improve the level and consistency of care provided to vulnerable population groups.
- Deliver primary care in fit for purpose premises.
- Minimise variation in the quality of care across Trafford's four neighbourhoods.

### 4. Contribute to closing the financial gap

- Deliver primary care back-office efficiency savings.
- Reduce locum costs.
- Reduce secondary care spend.
- Reduce prescribing costs.



# Progress

- Prospectus development
- Bid specification development
- Trafford Locality Development Bid
  
- Partners
- RCGP
- Nuffield
- Manchester Business School

# National/GM Picture

- Sustainability + Transformation Plans (STP)
  - Multispeciality Community Provider(MCP)
  - Local Care Organisations (LCO)
  - Joint Commissioning
- 
- At scale / At Risk?
  - How?....Not if!

# Overview of the Trafford NMoC Programme

Trafford NMoC will provide primary care through a single system with a new contractual and organisational form, delivered at a neighbourhood level. To enable primary care service delivery to be planned differently under NMoC, five workstreams have been created which separate out the key components of traditional care delivery. Each workstream has an established programme team, with a clinical lead, and is designing new models of care for that component.

Five service model workstreams...

1

## Proactive Care

- Immunisation programme
- Cancer screening programmes
- Exercise Referral Scheme

2

## Domiciliary Care

- Multi-disciplinary team providing nursing home care across Trafford
- Subsequently rolled out for all homecare

3

## Urgent Care

- Interim practice led urgent care
- Neighbourhood hubs delivering urgent care in the longer term

4

## Planned Care

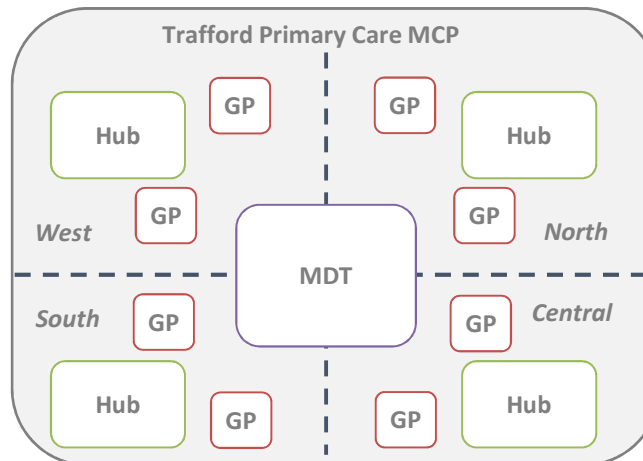
- Classical GP planned day
- Long-term condition management
- Embedded pharmacists

5

## Specialised Care

- Outpatient clinics in diabetes, gynaecology, ENT and dermatology

...delivered through a single system with a new contractual and organisational form, at a neighbourhood level...



- A single GP-led organisation for Trafford
- 32 practices rationalised down to fewer fit-for-purpose delivery sites
- 4 neighbourhood hubs to deliver Urgent Care and other primary and community services.
- A Multi-Disciplinary Team serving the Domiciliary needs of each neighbourhood

...supported by an augmented workforce with new skills recognising new system needs



Rebalancing the nurse : GP ratio closer to 50:50



New MDT team capable of dealing with all domiciliary care across Trafford



Specialisation in some of the GP workforce to shift activity out of acute setting



Increased access to practice pharmacists and an enhanced central Medicines Management Team



Practice managers retrained as organisation management team



A more compact administrative function

New quality standards and outcome measures for Trafford

## Enablers

- **Trafford Care Coordination Centre** – a joined up patient care pathway across the borough of Trafford
- **Estates** – consolidation and relocation of existing practices and development of neighbourhood hubs
- **Technology** – a single clinical and document management system and virtual desktop interface

# Quality Standards and Outcome Measures

High quality standards are paramount in providing the best possible patient care and the NMoC will design standards that are both measurable and achievable and share the key features of the Greater Manchester primary care standards. Quality standards and outcome measures will recognise aspects of QOF which are valuable and enhance patient care, whilst producing new outcome measures that recognise specific neighbourhood quality requirements that are locally defined and delivered.

A set of quality standards and outcome measures will be defined for the Trafford single system and captured in a quality dashboard in real time to enable review and management of performance standards. The following table provides illustrative quality standards and outcome measures for each of the NMoC workstreams:

	Example Quality Standards	Example Quality Outcome Measures
<b>Proactive</b>	Targets for childhood immunisations, flu vaccinations, cervical screening and breast and bowel screening.	<ul style="list-style-type: none"> <li>• Reduced variation and improved uptake rates for the national screening programmes, measured against defined targets at neighbourhood level.</li> <li>• Improved measurable population physical activity levels.</li> </ul>
<b>Urgent</b>	Each neighbourhood would be expected to provide an appropriate number of same day appointments, as stated in the GM standard.	<ul style="list-style-type: none"> <li>• A defined minimum number of appointments delivered by primary care.</li> <li>• Appropriate same-day access for children under 12.</li> <li>• A measurable reduction in unplanned hospital admissions.</li> </ul>
<b>Domiciliary</b>	All patients receive proactive care, including an annual assessment and five review contacts (using a defined template) as a minimum.	<ul style="list-style-type: none"> <li>• Reduction in unplanned admissions for domiciliary patients, including falls.</li> <li>• Reduction in the number of people who reside in care homes dying in hospital.</li> </ul>
<b>Planned</b>	A number of measures from QOF for longterm condition management will be included.	<ul style="list-style-type: none"> <li>• Completion of a defined single assessment Long Term Condition (LTC) annual review for 90% of the population.</li> <li>• A level of engagement with the TCCC to work together to improve outcomes through risk stratification.</li> </ul>
<b>Specialised</b>	The locality would be expected to provide certain outpatient appointments, such as Diabetic clinics, in a community setting.	<ul style="list-style-type: none"> <li>• Reduction in outpatient appointments for certain specialities such as diabetes, gynaecology, ENT and dermatology.</li> </ul>

In order to ensure the system delivers the highest standards of efficiency and quality of care, a supportive system of performance management will accumulate all data collected through the TCCC, that provided through the quality dashboard, and other system performance data. This will enable real time feedback to clinicians and managers to actively performance manage against agreed targets and standards.

# Measuring Success

*In order to enable commissioners and the new primary care MCP to understand whether NMoC is delivering the transformational change required, a number of key success criteria are being developed which will form the basis of any new contract.*

The following measures have been developed as part of NMoC design work to date. These will be refined and added to throughout the period to new organisation go-live in April 2018.



## Financial Outcomes

NMoC is expected to deliver significant financial savings once it is fully operational:

- Trafford will bid for and spend a multi million pound sum over four years with an expected return over five years of approx £1.50 for every £1 invested.
- Benefits and efficiencies in the four years to 20/21 include:
  - Savings in acute hospital activity total £15.1m, and
  - Efficiencies through doing things in a more cost effective manner, such as prescribing waste, total £10.4million.



## Activity Reductions

The benefit savings will be delivered through the following target reductions in secondary care activity:

- 20% reduction in ambulance conveyances, A&E attendances and NEL inpatient admissions for care home residents and those receiving adult social care home care packages.
- 15% reduction in A&E attendances and emergency admissions for COPD and diabetes.
- 5% reduction in all A&E and 8% reduction in all walk in centre attendances
- Shift in outpatient activity across the following specialisms, equivalent to 20,2621 outpatient appointments and 4,544 outpatient procedures:
  - 8% in Trauma & Orthopaedics.
  - 6% in Ophthalmology.
  - 15% in ENT.
  - 20% in Gynaecology.
  - 50% in Dermatology.
  - 85% in Diabetic Medicine.



## Population Health Outcomes

Trafford will deliver their share of population health improvement objectives set by Greater Manchester:

- More people will be supported to stay well and live at home for as long as possible.
- Fewer people will die early from cancer, respiratory disease and cardio-vascular disease.
- Improved level of physical inactivity in the Trafford population.
- Decreased variation in outcomes across Trafford's four neighbourhoods.



## Quality and Experience Measures

Patients and the primary care workforce have told us that they value the following measures of success:

- Improved GP job satisfaction and morale.
- A safe and sustainable working environment for all Trafford healthcare workers.
- Provision of more training, education and knowledge sharing opportunities at all levels of the workforce.
- Significantly improved level and consistency of care provided to vulnerable population groups.
- Primary care delivered in fit for purpose premises.
- More services delivered close to home in an out of hospital setting.



# Next Steps

- Bid
- Legals
- Governance
  - NMoC
  - LCO
- Early Wins