

# Trafford Transformation

Health Scrutiny Committee

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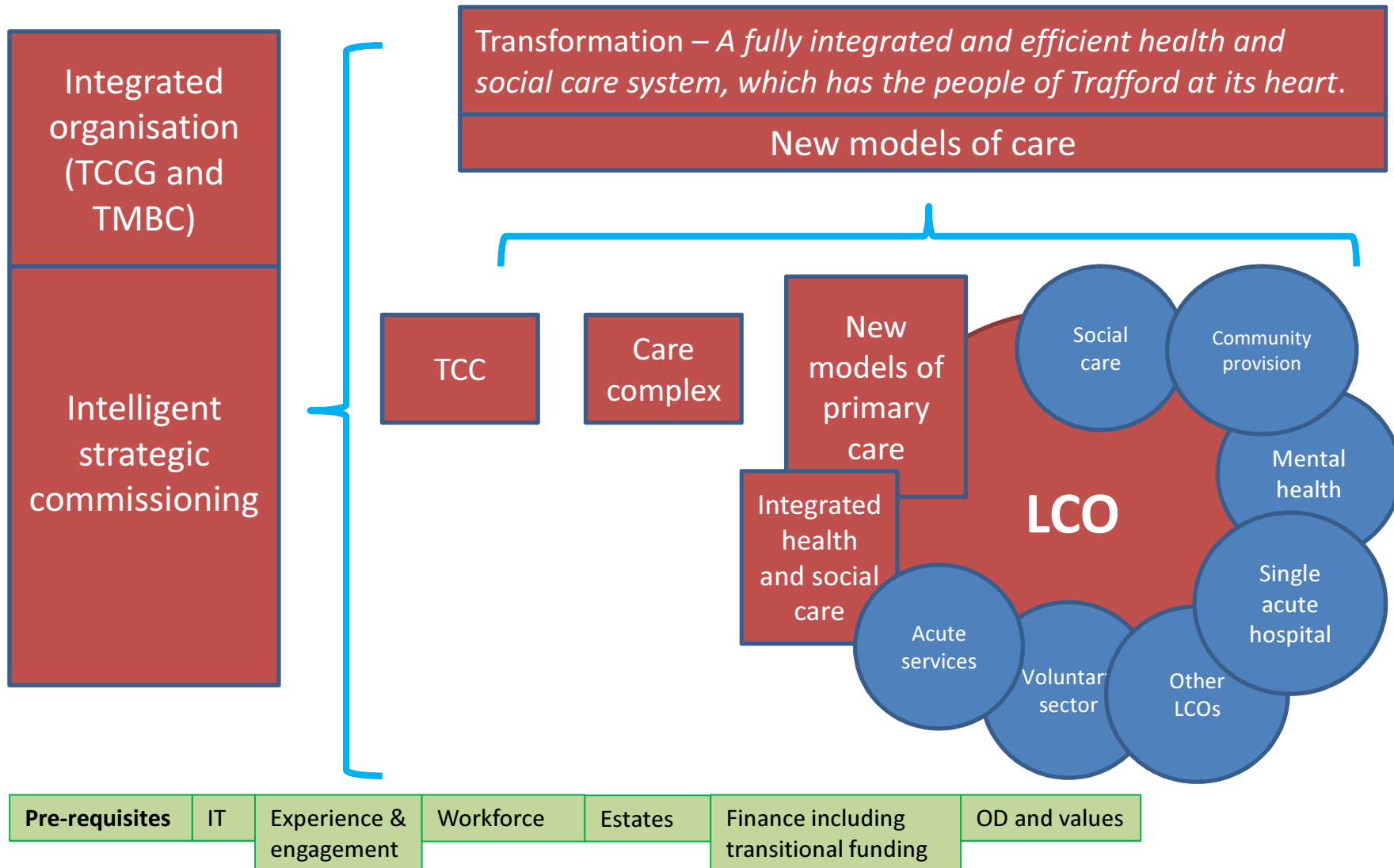
**TRAFFORD**  
COUNCIL

**NHS**

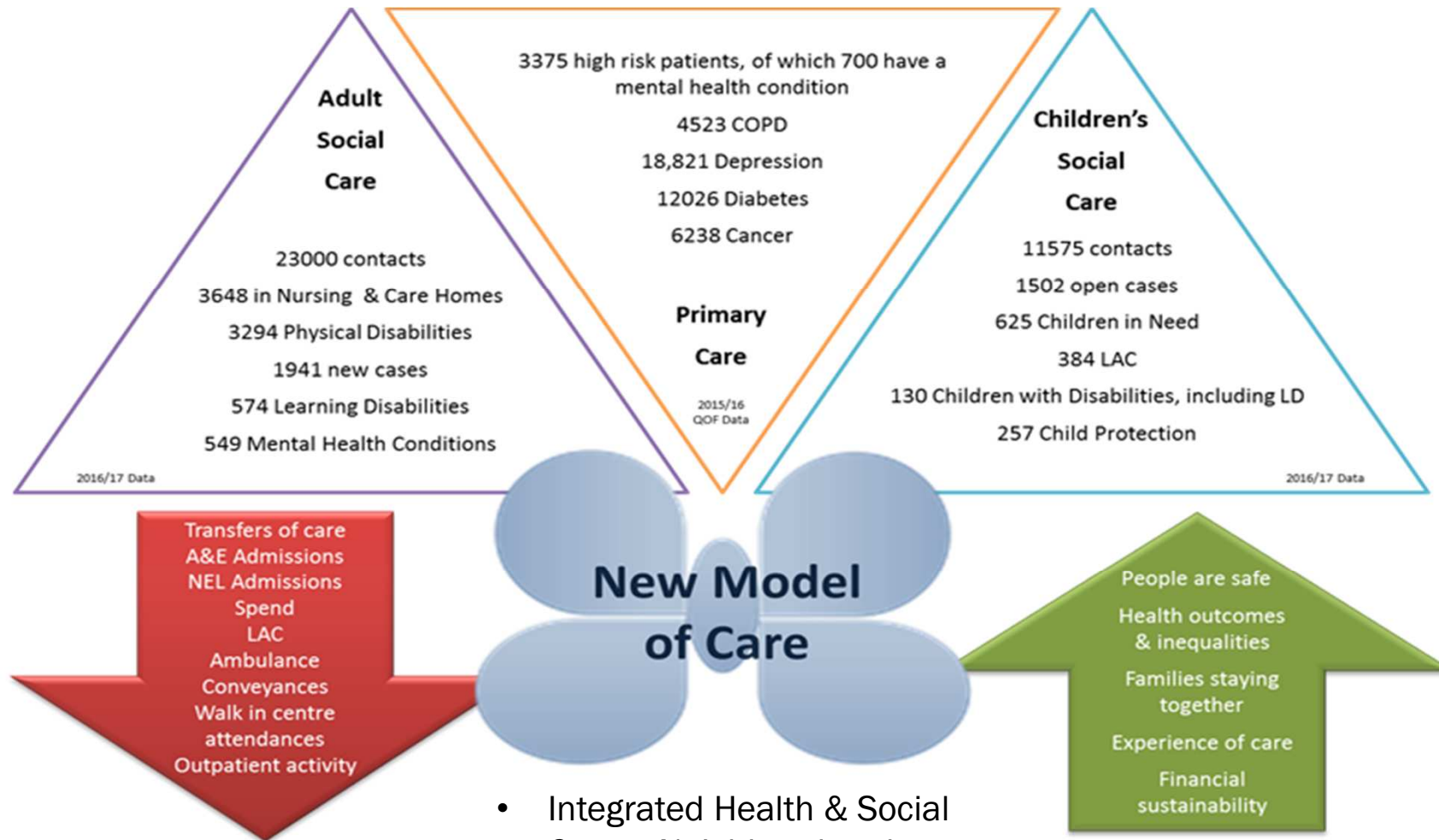
*Trafford*

*Clinical Commissioning Group*

# Trafford map



# Why a New Model of Care?



- Integrated Health & Social Care – Neighbourhood Model
- Primary Care
- Care Complex
- TCC Optimisation

# Content of the transformation

Transformation Fund bid made on 30 June 2017

Award of £22m made on 13 October 2017 over three years

## **Integrated organisation**

Trafford Council and the CCG will come together as an integrated organisation in a phased way to cement our integrated commissioning arrangements whilst working to put in place a single commissioning function by April 2018.

Consultation with staff and GP practices (as members of the CCG) is planned to commence on 30 October.

## **Local Care Organisation development**

The establishment of the LCO provision in Trafford is an integral part of the new operating model for the Trafford Health and Social Care system. The LCO will be developed in partnership with community, acute, mental health, social care and voluntary sector providers.

# Integrated Health & Social Care

- **System redesign & new operating models for social care and community health services, pathways, workforce and interventions, to deliver:**
  - Evidence based operating model(s) – asset & evidenced based
- **Early Help Provision Review**
  - A wholesale review of commissioned prevention and early help provision will be undertaken alongside mapping of non-commissioned provision and an analysis of need across the all age continuum.
- **Wholesale caseload reviews and reassessments in adult and children's social care**
- **Implementation of a 'Risk Based Reassessment' approach**
  - This will form part of the system wide identification and assessment of people at risk and may be supported in future by TCC.
- **Supported Living Review**
- **Care Closer to Home Service remodelling**
  - This aspect of the programme will redesign a range of services which currently support adults following hospital discharge or work to prevent admission following a health crisis.
  - In addition, the home care market will be reviewed. It is proposed there are 2 tiers of support within the new model: 'wellbeing support at home', which will offer home care and an asset based approach to connect people to community resources, employment support etc.; and health and wellbeing support at home' which will offer the same support plus help with managing long term conditions.

# Trafford Co-ordination Centre

- **Referral management** – a single point of contact for all referrals, where referrals are assessed for quality and appropriateness by administrative and clinical teams.
- **One single point of access for Trafford residents and partners** - to access 'credible health and social care information' and signpost them to the correct services in Trafford for their urgency and needs.
- **Risk stratification** - using risk stratification evidence (to identify as well as manage patients) this will support those residents who are at highest risk of A&E attendance with access to health and care services; the aim being to keep them as well as possible and supported in their own home avoiding unnecessary attendance and admission to acute hospitals.
- **Care coordination active case management** - of a patient's health and social needs will co-ordinate their appointments, review them to ensure they are receiving the right care, at the right time, in the right place and support them when they are having difficulties or are in crisis.
- **ICT integration** – completion of the systems integration for all relevant partner services and development of a Clinical Portal to improve quality of care by providing access to full patient history.
- **Trafford directory of services** – the directory (via a clinical portal) has the potential to be a 'single point of access' for information about relevant services and will include health, social, voluntary and independent sector services which are available for people in Trafford. It will also provide decision support for GPs and practice staff to enable them to make high quality, fully worked up, referrals to the right place.

# Care Complex

- Trafford will be developing a 'Care Complex'.
- This is community based provision for patients with urgent and long term conditions.
- In addition, it will also offer a range of opportunities to support residents to develop expertise and confidence in managing their own conditions and those of others.
- Scope:
  - Intermediate care facility
  - Complex nursing home beds
  - Palliative care beds
  - Specialist rehab beds
  - Respite
  - CHC beds
- A strategic outline case (SOC) has been developed and approved by the CCG's Governing Body on 5 September 2017
- Next step is the development of an outline business case (OBC)

# New Model of Primary Care

- A **single clinical model** for Trafford, to improve co-ordination and collaboration, reduce fragmentation of care and variation across our neighbourhoods. This workstream will also include the implementation of **new quality standards**, aligned to the revised GM medical standards for primary care
- Our **prevention** workstream will focus on improving the health and wellbeing of our population and our neighbourhood approach will enable us to target the most deprived areas and including targeted health campaigns, screening checks and brief interventions. More social prescribing e.g. via Trafford's leisure offer and a digital platform to support lifestyle and behaviour change as well as reviewing our face to face and telephone lifestyle and behaviour change offer.
- The **planned care** workstream will improve access to GP appointments, standardise the GP day and focus on long term condition management. Working with Associate Health Care Professionals (AHPs), mental health and community staff to manage patients in the community will require a skill mix within the workforce; a degree of specialisation of workforce teams, and flexibility of geographical deployment of clinical and managerial resource. It will result in a significant reconstruction of the GP day allowing for longer appointments and better access to same day appointments.
- The **urgent care** offer will establish an urgent care team in each neighbourhood with a complementary skills mix, which is expected to include a higher proportion of nurses to GPs than the current practice-based system uses.
- The **domiciliary care** workstream will create a dedicated multi-disciplinary team for patients who are house-bound or in residential and nursing care. Teams will include specialist nurses, pharmacists, social care provision and access to specialist geriatric and psycho-geriatric support.
- The **specialised primary care** workstream aims to shift activity from a secondary setting to primary care by providing more outpatient services in the community, such as clinics, procedures and diagnostics.
- **Medicines optimisation** will improve and support the management of patients who are using multiple medications. The team will support care homes, GP practices and community pharmacies and there will be dedicated support for mental health. The benefits aligned to this workstream are significant both for overall economy and patient outcomes including reduction in primary care prescribing spend and reduction in GP/A&E attendances in relation to medicines errors or confusion.



# New Model of Primary Care

- Trafford's **Primary Care Mental Health & Wellbeing Service** will offer the following:
  - Professional and self-referral access for people aged 14+ who have, or are suspected of, having a mental health problem living in Trafford or have a Trafford GP
  - A bridge between primary, secondary, third sector and social care services
  - Support to people with chronic health conditions to stay in work
  - Support to unemployed people with mental health difficulties to access the work place
  - Mental health assessments led by a senior Nurse Practitioners and a Consultant Psychiatrist with decisions made as to the most appropriate treatment service and referred on accordingly
  - A wellbeing service which will work alongside clinical and social services to enhance people's wellbeing, helping them to reconnect, manage stress, promote independence, reduce isolation and generally live a healthier lifestyle.
  - NICE evidence-based psychological therapies will be available for people who experience emotional difficulties including anxiety and low mood. This includes guided self-help, psycho-educational courses, counselling, psychotherapy and cognitive behavioural therapy (CBT)
  - IAPT services ultimately embedded within primary care and providing support for people experiencing psychological distress as a consequence of physical ill health as well as people with common mental health problems
  - Recovery Support - there will be clinical and social support for people who have a long standing but stable mental health condition.
  - Expert clinical support and education to primary care staff including advanced diploma level training for GPs, to enhance immediate interventions but also develop greater system knowledge, skills and resilience to enhance overall outcomes, particularly those relating to early identification, diagnosis, treatment and prevention.

# GM Theme Alignment

## Theme 1: Radical upgrade in population health prevention

- Primary Care – Prevention workstream

## Theme 2: Transforming community based care & support

- Integrated Health & Social Care – Neighbourhood Model
- Primary Care - Mental Health Service
- Primary Care – Domiciliary Care
- Urgent Primary Care
- Primary Care - Specialised
- Care Complex

## Theme 4: Standardising clinical support and back office services

- Integrated organisational arrangements between Trafford Council and CCG
- Single Commissioning Function
- GP back office efficiency programme
- Primary Care – Medicines Optimisation
- Primary Care – Planned Care
- TCC

## Theme 5: Enabling better care

- Workforce Development Strategy
- One Trafford Estate Strategy
- Trafford Digital Strategy

Our proposals do not directly deliver against Theme 3: Standardising Acute and Specialist Care

# Trafford Transformation Programme Structure

## New Model of Care

## Single Integrated Organisation

