New models of care programme for PACs and MCPs

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New Care Models has grown from concept to national programme very quickly

- October 2014, Five Year Forward View is published
- January, invited individual organisations and partnerships to apply to become ‘vanguard’ sites
- March, first 29 vanguards selected
- September, all 50 Vanguards identified
- November, published comprehensive directory of services for local engagement.
- December, published updated support package, including learning from first 29 vanguards, and new workstreams to support UEC & ACC vanguards
- December, Primary Care Home sites announced
- Over £132m funding allocated to the 50 vanguards, who contributed over £110m themselves, in 2015/16
- Over £112m has been allocated to the vanguards for 2016/17
- More than 1000 general practices are involved in the PACS, MCP and Care Homes vanguards,
- Covering more than 5 million people across England

Our values: clinical engagement, patient involvement, local ownership, national support

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2015/16 was a year of design, set-up and delivery

- Learning from previous national programmes including the Pioneers, identified clear replicable models, tools, and methods that promote health and wellbeing.
- Helped vanguards to do things in common, solving common issues.
- Developed local leadership, supported to generate and sustain enthusiasm for new models via open dialogue with their local communities.
- Supported the vanguards to systematically identify the local and national barriers to implementation and then co-produce the solutions.
- Shared solutions throughout the NCM programme, and launched a Clinical Associate scheme, to increase awareness and adoption across existing networks.

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50 vanguards selected

5 new models of care with a total of **50 vanguards**:

- 9 Integrated primary and acute care systems
- 14 Multispecialty community providers
- 6 Enhanced health in care homes
- 8 Urgent and emergency care
- 13 Acute care collaboration

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PACS are **whole system care models** that join up primary care, hospital, community, mental health and social care services to improve the health and wellbeing of the whole population.

**Vanguards making it happen**

**Northumberland Accountable Care Organisation’s** new specialist emergency care hospital provides A&E consultants 24/7 and specialty consultants 7 days, 12 hours a day. It is complemented by 3 primary care hubs based in 3 local district general hospitals, staffed by a mix of hospital doctors, GPs and emergency nurse practitioners.

Early evaluation has shown the model **reduced emergency admission rates by 30%** in 2015/16 c.f. 2014/15, and delivered an **estimated £6.64 million of savings** (FYE).

**Northumberland’s** care model is being supported by the formation of an **Accountable Care Organisation**, which would bring together all providers in Northumberland, with a focus on **health outcomes**; being **mutually responsible** and working together, removing perverse incentives in the current system.

A partnership between the **CCG and Local Authority** will take the role of **Strategic Commissioner**. This will use a single contract; set strategy and health outcomes; and allocate a capitated budget to the ACO.
Integrated primary and acute care systems (PACS) vanguards

Core components of a successful PACS vanguard are emerging

- Targeted population health
- Enhanced primary care
- Integrated community care teams
- Integrated access to acute and emergency care services
- Improved access to specialist and elective care
- Self-care, prevention and person-centred care
- Third sector and community engagement and activation

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These **14 vanguards** are focusing on taking services traditionally provided in **hospitals** into the **community**, bringing care **nearer to patients’** homes

**Vanguards making it happen**

Using ‘Consultant Connect’, **Stockport MCP**’s GPs can, during patient appointments, call and get instant treatment advice from a specialist at the local hospital, and check whether a referral is necessary.

- **connects GPs to a ‘rota’ of consultants** and if the first is unavailable, the system automatically loops to the mobile phone of the next specialist.

- **dramatically reduced referral time** for GPs to consultants, **from 3-4 weeks to near-instant** telephone access, benefiting the patient with timely care or advice.

- **consultants** are able to spend **more time with patients** that need their care, as they avoid unnecessary in-person consultations.

- **prevented hospital referrals** in 70 per cent of recorded cases since launching for haematology and endocrinology enquiries.

- It has been extended to paediatrics and there are plans to add further specialties.

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Multispecialty community providers (MCPs) vanguards

Core components of a successful MCP vanguard are emerging

- A population health and care model focused on proactive and preventative care tailored around the needs of the individual
- Empowering patients and local people to support each other and themselves in their health and care
- Multi disciplinary health care professionals working within an organisation that has accountability for the delivery of health and care services for their population
- Contracting and payment systems that incentivise and enable the delivery of services for population health

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Six vanguards are working to improve the quality of life, healthcare and planning for people with long term conditions living in care homes

Vanguards making it happen

Airedale and partners enhanced health in care homes vanguard is providing a secure video link for residents to senior nurses, so patients can remain in the care home.

- **24/7 video link** to care homes enables access to trained nursing staff; access to advice and guidance; or remote assessment using the video link. Airedale and partners vanguard supports over 7,000 nursing and care home residents living in 248 homes across Yorkshire and Lancashire.

- Their care homes have reported a reduction in hospital as place of death for palliative care patients; reductions in A&E admissions/non-elective hospital admissions; reduced cost of Emergency Department visits; and reduction in inappropriate GP call out.

- Last month, the centre received over 1500 calls, more than half of which occurred out of hours. Of the calls received, more than 1300 resulted in the patients being able to remain in their place of residence.

- **plans to expand** telehealth to provide virtual appointments, repeat prescriptions, 1-1 therapy and group therapy sessions

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### Enhanced health in care homes vanguards

**Core components of a successful enhanced health in care homes vanguard are emerging**

<table>
<thead>
<tr>
<th>Component</th>
<th>Description</th>
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<tbody>
<tr>
<td>Enhanced primary care support for care home residents</td>
<td>Multi-disciplinary team in-reach support</td>
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<tr>
<td>High quality end of life care and dementia care</td>
<td>Re-ablement and rehabilitation to promote independence and living at home</td>
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<tr>
<td>Joined up commissioning between health and social care</td>
<td>Workforce training, development and shared planning.</td>
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<tr>
<td>Data, IT and technology – shared data, records and new technology.</td>
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Addressing the key enablers of transformation

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1. Designing new care models
2. Evaluation and metrics
3. Integrated commissioning and provision
4. Governance, accountability and provider regulation
5. Empowering patients and communities
6. Harnessing technology
7. Workforce redesign
8. Local leadership and delivery
9. Communications and engagement

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Expansion of online services and service redesign makes the most of new technology.

Quality will be improved by harnessing digital technology, including fully integrated datasets, real time business intelligence with predictive analytics, mobile technologies, wearables and apps.

Modality MCP, recognising the high-level of smartphone users and broadband transactions (80%) in Birmingham, developed an app where people can book appointments, send messages to clinicians and receive real-time feedback. This is helping individuals with long term conditions avoid A&E or hospital by “sending a quick message to their doctor”.

Modality’s call centre handles up to 1300 calls per day, most patients are now given advice or treatment without visiting a surgery. Around 90% of Skype consultations and call-backs by GP partners are closed without a surgery visit.

This is part of Modality’s work to improve access, which has seen:
• A 72% fall in “did not attends”
• A 10% rise in activity – meeting demand within existing resources
• Average remote consultation times falling to under five minutes
• 70% of patients say the new system has improved access

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Multi-disciplinary teams deliver care, with redesigned jobs that are more rewarding, sustainable and efficient.

New roles such as health coaches, physician assistants and care navigators, pharmacists in community hubs or primary care, and community paramedics will be widespread.

Mid Nottinghamshire Better Together PACS’ is integrating primary, community health, and social care. PRISM (Profiling Risk, Integrated Care and Self -Management), multispecialty teams are providing preventative care to patients deemed to be at high risk of future admission.

Teams typically consist of: two community matrons; a district nurse; occupational therapist; physiotherapist; mental health worker; social worker; healthcare assistants; voluntary/third sector workers; and a ward coordinator/Manager

PRISM has helped to avoid around 1,500 hospital admissions since April 2015. The vanguard’s proactive interventions (mainly PRISM) have resulted in a reduction in inappropriate patient attendances of 5.4% on last year for 18-79 year olds; and by 20.5% on last year for patients aged 80 years and above.

Connecting Care Wakefield’s work includes a multi-disciplinary team identifying care needs which, if not met, may lead to residents needing hospital care. The vanguard has seen:

- admissions reduced by 27% compared to the matched control of a reduction of 19%
- reduction in A&E attendance by 16% compared to the matched control of a reduction of 10%
- ambulance call outs reduced by 16% compared to the matched control of an increase of 26%

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The MCP and PACS models are built on the foundation stone of general practice

New care models only get off the ground if they are based on strong and trusting local relationships and by engaging people in the pursuit of the triple aim.

Stockport Together MCP ensures that each GP practice provide an enhanced level of service to their ‘fair share’ of care home beds across the borough, in no more than 2 care homes. The enhanced service includes weekly contact, a weekly ward round, care plans and more engagement with care home staff.

Feedback from practices and care homes is positive. Between November 2014 and October 2015, admission rates from care homes reduced by 202 throughout the year, equating to an approximately £375k potential saving for the year of.

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Tower Hamlets Integration Provider Partnership, is a partnership between a Community Interest Company (owned by 37 practices in the London borough), two local Trusts, and the council. It was formed with the purpose of developing an integrated approach to communities.

Other members include police, the CCG, public services, voluntary and community groups, faith communities, local businesses and residents. It engages with wider partners including patients and carers, housing and education organisations through its ‘Stakeholder Council’.

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How the national health bodies will continue to support the vanguards in 2016/17

<table>
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<tr>
<th>MCP, PACS and care homes framework documents</th>
<th>Multi-year MCP and PACS contract for populations and services within care models based on the registered list</th>
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<th>Effective gain/risk share approach and P4P that aligns financial incentives across the local health system</th>
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<td>Common approaches to data and LPF analytics that enable population health approaches based on evidence-based segmentation and targeted interventions.</td>
<td>Standard models for one of a set number of organisational forms that have been tested with vanguards</td>
<td>National and local metrics that measuring progress and evaluating success against the triple aims of the 5YFV</td>
<td>A set of solutions to key workforce challenges around recruitment, MDT working and skills development</td>
<td>A place-based regulatory and assurance framework, co-produced with vanguards</td>
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New contracts will bring together health and social care into a single contract enabling the full integration of services around the patient

Joined up commissioning and shared contractual mechanisms will promote integration and population health.

South Somerset Symphony is developing a joint venture between primary care and the hospital, able to hold a single budget, and which will shift resources to where they are required.

The joint venture will manage a new operating company, which will own participating general practices. The operating company is already live, as a subsidiary of the local NHS Trust, and has taken over control of its first 3 practices. The aim is to expand this to 9 local practices. The joint venture will be supported by the development of an innovative commissioning approach by Somerset CCG, Somerset County Council and the Area Team.

The joint venture will support the sustainable delivery of the vanguard’s new care model, including its:

- **complex care service**, which is providing intensive, personalised support for more than 135 of South Somerset’s most complex patients. The service has reported a 37% reduction in hospital admissions for that group.

- **enhanced primary care model**, serving 36,000 patients in the first 5 practices. Eight other practices are to introduce the model, which will bring the total to 92,000 – over 70% of S. Somerset’s registered patients.
With MCPs, we are developing and testing contracting, commissioning and procurement arrangements to enable their care models.

- The **MCP contract** will, for the first time, bring together **primary care**, other **out-of-hospital** NHS services and **social care** into a **single seamless contract** enabling the full integration of services around the patient.

- We are **working intensively with six sites** - Whitstable, South Hants, Sandwell, Dudley, West Wakefield and Greater Manchester - to develop the contract for use from April 2017. Key next steps for April 2017 roll-out are:
  - Publish the **MCP framework**;
  - Settle the core elements of the MCP **service specification**;
  - Complete the technical work on the new **payment mechanism and incentives**;
  - Work with vanguards to finalise the detail of **GP participation** in MCPs;
  - Develop with MCPs a light touch approach to implementing the **public contract regulations**;
  - Finalise arrangements for **assurance and regulatory oversight** for new MCPs.

**Vanguards will be supported by products and practical support**

- **Whole population budget** handbook, with methodologies for baseline calculation and projection, gain/risk share, and deductions where patient choice is exercised
- **Financial risk management** methodology and principles

**Similar work will also support PACS, Care Homes and ACCs**

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Success of the new care models programme will see improved health and care for people in the vanguards…

- The new care models are already showing better communication with patients, clinicians and the public, improved patient experience and easier access to services.

  Tower Hamlets’ Community Renal Service e-clinic has seen 50% of referrals managed without need for hospital appointment.

  Average wait for appointment in 2015 was 64 days; using e-clinic, average wait for advice was 5 days.

- They are helping save money by reducing the number of unnecessary hospital admissions, and are better coordinating care focused around patients.

  Connecting Care Wakefield’s work includes a multi-disciplinary team identifying care needs which, if not met, may lead to residents needing hospital care.

  The vanguard has seen:
  • admissions reduced by 27% compared to the matched control of a reduction of 19%
  • reduction in A&E attendance by 16% compared to the matched control of a reduction of 10%
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...and widespread adoption of the new care models for the benefit of populations across England.

- We expect to see **50% population coverage by 2020-21**.

- The aim is to encourage vanguards to **share their learning** and best practice among themselves and with other health and care organisations and develop frameworks for others to use nationally.

- We will **co-produce the common methodologies and products** for each of the key technical enablers, working with our strongest systems to **shadow test and simulate** the entirety of the new care model in 2016-17, for wider implementation from 2017-18.

- The **next cohort of MCP and PACS** will be identified through the **STP process**. Likely candidates will rise out of the **ambitions of local health economies**, the **plans submitted by the STP footprints**, and the **emerging evidence** on the effectiveness of the different care models.
Further information…

More details can be found on the NHS England website:

www.england.nhs.uk/vanguards

Or join the conversation on Twitter using the hashtag:

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