NHS Five Year Forward View

Multi-specialty community providers

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NHS Five Year Forward View

• Published in October 2014

• A shared vision across seven national bodies

• New care models programme key to delivery

• Focuses on both NHS and care services
The challenges we face

1. Health and wellbeing gap
2. Care and quality gap
3. Funding gap
   - Radical upgrade in prevention
   - New care models
   - Efficiency and investment
Five new care models

Multispecialty community providers
*moving specialist care out of hospitals into the community*

Enhanced health in care homes
*offering older people better, joined up health, care and rehabilitation services*

Integrated primary and acute care systems
*joining up GP, hospital, community and mental health services*

Acute care collaboration
*local hospitals working together to enhance clinical and financial viability*

Urgent and emergency care
*new approaches to improve the coordination of services and reduce pressure on A&E departments*
### What they are

• **Fully integrated provider of out-of-hospital care** with a clear and robust governance structure, and its own organisational capability.

• **Built around the registered list**, focused on population health and self care, to enable greater scale and scope of services that dissolve traditional boundaries between primary and secondary care.

• **Making the most of digital technologies**, with joined-up electronic health records for its registered population, risk stratification and patient population segmentation, and targeted services for different groups of patients.

• **New skills and roles** for expanded multi-disciplinary community-based teams, including for example pharmacists, social workers and nurse leaders.

• Based on **population sizes of at least 30,000 - 50,000**.

• Responsibility for managing **new capitated contracts** for population health and care.
Our core values

- Clinical engagement
- Patient involvement
- Local ownership
- National support
37 vanguards developing their visions locally

### Integrated primary and acute care systems (PACS) vanguards
1. Wirral Partners
2. Mid Nottinghamshire Better Together
3. South Somerset Symphony Programme
4. Northumberland Accountable Care Organisation
5. Salford Together
6. Better Care Together (Morecambe Bay Health Community)
7. North East Hampshire and Farnham
8. Harrogate and Rural District Clinical Commissioning Group
9. My Life a Full Life (Isle of Wight)

### Multispecialty community providers (MCPs) vanguards
10. Calderdale Health and Social Care Economy
11. Erewash Multispecialty Community Provider
12. Fylde Coast Local Health Economy
13. Vitality (Birmingham and Sandwell)
14. West Wakefield Health and Wellbeing Ltd
15. Better Health and Care for Sunderland
16. Dudley Multispecialty Community Provider
17. Whitstable Medical Practice
18. Stockport Together
19. Tower Hamlets Integrated Provider Partnership
20. Better Local Care (Southern Hampshire)
21. West Cheshire Way
22. Lakeside Surgeries (Northamptonshire)
23. Principia Partners in Health (Southern Nottinghamshire)

### Enhanced health in care home vanguards
24. Connecting Care – Wakefield District
25. Gateshead Care Home Project
26. East and North Hertfordshire Clinical Commissioning Group
27. Nottingham City Clinical Commissioning Group
28. Sutton Homes of Care
29. Airedale and partners
What will success look like?

• Nationally replicable models
• More accessible, more responsive and more effective health, care and support services
• Fewer trips to hospitals
• Care closer to home
• Better co-ordinated support
• 24/7 access to information and advice
• Access to urgent help easily and effectively, seven days a week
Common challenges across all vanguard sites

- Leadership and organisational development – including how we learn from international partners

- Workforce – including the need for new and extended job roles

- Commissioning and contracting models – including organisational boundaries which make it hard to design care around patients

- Evaluation – are new ways of working improving the quality of care patients receive?

- Information management and technology – including how we maximise new technology
Site visits – characteristics of multispecialty community providers (MCPs)

- Different stages in the design of the model

- Characteristics include:
  - model designed around the registered list
  - care designed around complex patients,
  - enhanced primary care,
  - community integrated teams,
  - specialist care in the community,
  - improved access to specialist care and personalisation of care

- Most intend to use multi-disciplinary teams, will require information hubs, provide tools for self-care, promote public health and use technology to support health management
MCPs have already started taking action

**Better Local Care**
(Southern Hampshire)

- Have placed community psychiatric nurses and community therapists in primary care and have not referred anyone to acute mental health care in 7 weeks

**Vitality**
(Birmingham and Sandwell)

- All patients get a digital appointment with a clinician. 60% are completed without need to attend surgery

**Whitstable Medical Practice and partner practices**

- A paramedic practitioner is attached to a group of practices to improve communication and reduce hospital admissions

**West Cheshire Way**

- Have added clinical pharmacists to an integrated community team and introduced a Wellbeing facilitator employed by Age UK

**Better health and Care for Sunderland**

- Introduced a recovery at home service with a 24/7 telephone number from September

*All these need to continue to get proof of concept and evaluate patient experience*
Support package launched

- Support package published in July for the first 29 vanguards

- Developed following extensive engagement, including two-day visits to all sites

- Led by vanguards alongside national experts, the support package will help them implement change effectively and at pace

- It is also intended to maximise sharing of learning and practice across vanguards and with the wider NHS and care system

- Four design principles – we solve problems through joint national and local leadership; we create simple replicable frameworks; we encourage and support radical innovation; we work and learn at pace
Addressing the key enablers of transformation

1. Designing new care models and enabling spread
2. Evaluation and metrics
3. Integrated commissioning and provision
4. Empowering patients and communities
5. Harnessing technology
6. Workforce redesign
7. Local leadership and delivery
8. Communication and engagement
Some of the issues we are addressing for MCPs

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<th>Indemnity</th>
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<td>• How to provide cover for clinicians who are working across populations rather than with a registered population - to allow patients to access a number of primary care sites and facilitate seamless out of hours care.</td>
<td>• Developing models for a new style of services so that a new organisational form can take on integrated primary and secondary care services.</td>
<td>• Working with the Royal Colleges to design new training pathways for clinicians working in new roles:</td>
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<td>• For example, extended General Practice, nurse practitioners, clinical pharmacists in primary care, and extended roles for paramedics</td>
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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:

#futureNHS