



STP Discussion Workshop

Primary Care

in good health

Primary Care – implementing the new care models

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National context

- General Practice Five Year Forward View
- Next steps in the Five Year Forward View introduces the concept of locality working in general practice
- Clear messages on expectations for primary care at scale, extended and 7-day access with targets for 50% population by March 2018 and 100% by March 2019
- Clear messages on extending skill mix in primary care, e.g. mental health therapists, clinical pharmacists, housing and advice staff and occupational therapists
- Vanguards around MCPs (multi-specialty community providers), PACs (primary, acute and community providers) and care homes

Local challenge

- Increasing demand on health services driven by our ability to keep people alive longer
- Increasing age profile, increasing proportion of the population over 65 and over 85
- Over 85s significant proportion with dementia and increasing need for health and care services
- Increasing prevalence of other mental health conditions
- Increasing number of people with multiple-morbidities and more age related conditions

Changing general practice

- The role of a GP is becoming more complex and therefore we have to take a different approach to primary care
- Previously many GPs owned their own premises and had personal liability in partnerships
- Now GP roles are changing and they are looking for portfolio careers, some working in A&E and other hospital specialities as well as general practice
- Patient needs are increasing and changing
- There needs to be a wider group of people caring for individuals
- Because of the increasing demand and changing role there will be a big deficit in primary care in the future

Managing the deficit through workforce

Medical

GP

ANP

Practice Nurse

HCA

Pharmacist

Physicians
Assistant

Physical

Physio

Nurse

GP

EP P/N

Mental

Therapist (CBT)

CPN

GP

Social

Social Prescribing

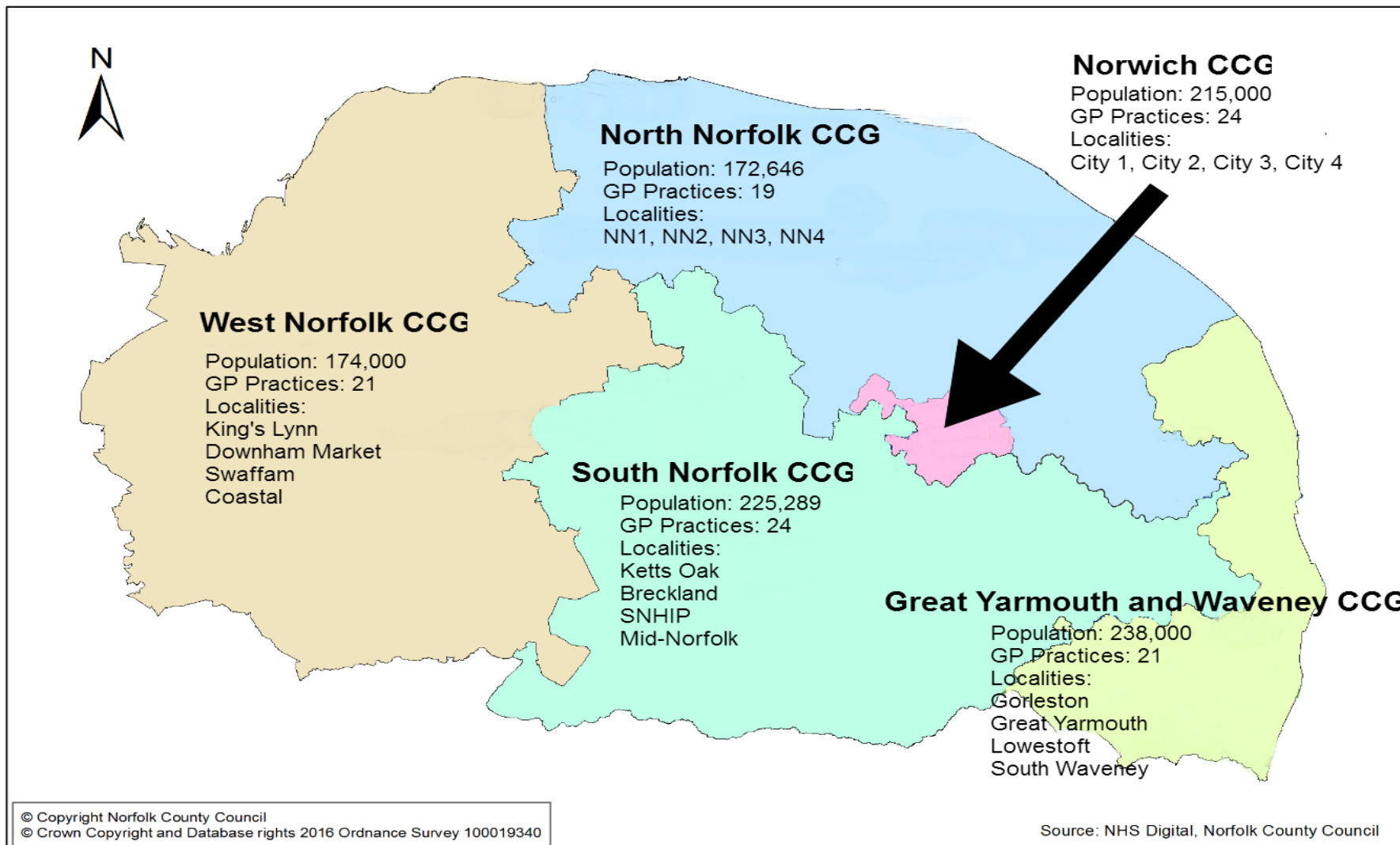
Voluntary Sector
Support

Social Worker

What this means

- a stronger focus on population health, prevention, supporting and mobilising patients and communities;
- more integrated urgent care as part of a reformed urgent and emergency care system;
- integrated community based teams of GPs, nurses, pharmacists, therapists, with access to intermediate beds, in reach to hospitals, eg
 - redesigning outpatients,
 - geriatric care
 - diagnostics

The emerging landscape



Ten high impact actions

1:
ACTIVE SIGNPOSTING



2:
NEW CONSULTATION TYPES



3:
REDUCE DNAs



4:
DEVELOP THE TEAM



5:
PRODUCTIVE WORK FLOWS



6:
PERSONAL PRODUCTIVITY



7:
PARTNERSHIP WORKING



8:
SOCIAL PRESCRIBING



9:
SUPPORT SELF CARE



10:
DEVELOP QI EXPERTISE



Benefits for patients

- Consistency of service provision and quality
- Potential for better access and flexibility on how to access
- Ability to access more services in the community
- Supporting prevention and self-care across the system
- Seamless services to reduce duplication and hand-offs

Risks and opportunities

- The 20 localities are the building blocks of the new care models, there will need to be an STP wide decision on the way forward
- We will need to win over ‘hearts and minds’
- We need to deliver enough of a locality focus to address specific needs whilst delivering consistency so that we can improve efficiency
- There are still some risks around workforce planning
- We have good clinical leadership but to drive these through we need to secure this going forward

Opportunities for Norfolk and Waveney

Community Education Provider Network (CEPN)

The Great Yarmouth and Waveney CEPN was formed 12 months ago and provides a system-wide co-ordinated approach to delivering an integrated multi-professional workforce able to meet the needs of the local population.

This has been achieved through working collaboratively and innovatively to empower staff to deliver transformational change in practice through the best opportunities for education, training and development.

Norwich Medical school

Providing a pipeline of new medical professionals in the area

in good health

Discussion