

Primary Care at Scale Additional Funding

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Primary Care Commissioning Committee meeting

22 March 2018

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Purpose of Paper	
The purpose of this paper is to present to the Primary Care Commissioning Committee for approval Sheffield CCG's proposal to invest a further 50p per head of population to develop and support Neighbourhood Multi-Disciplinary Team (MDT) working.	
Key Issues	
The Neighbourhood way of working is a key priority across Health and Social Care. Neighbourhood leads report that MDT working remains a challenge and this is an opportunity to improve on the current state by further supporting the work to develop Neighbourhood maturity.	
Is your report for Approval / Consideration / Noting	
Approval	
Recommendations / Action Required by the Primary Care Commissioning Committee	
The Primary Care Commissioning Committee is asked to: <ul style="list-style-type: none"> Approve the use of the 50p per head of population from NHS England to support the set-up and development of MDTs within Neighbourhoods. 	
Governing Body Assurance Framework	
Which of the CCG's objectives does this paper support? <ul style="list-style-type: none"> To improve patient experience and access to care To improve the quality and equality of healthcare in Sheffield To ensure there is a sustainable, affordable healthcare system in Sheffield 	
Are there any Resource Implications (including Financial, Staffing etc)?	
<ul style="list-style-type: none"> NHS England payment of 50p per head to be utilised for the development of Multi-Disciplinary Team Working. 	
Have you carried out an Equality Impact Assessment and is it attached?	
Please attach if completed. Please explain if not, why not	
Not required at this point.	

Have you involved patients, carers and the public in the preparation of the report?

Patient, carers and the public are involved at neighbourhood engagement level and in relation to the Active Support and Recovery initiatives.

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1. Introduction / Background

Sheffield is making excellent progress in developing its ambition to become a person-centred city. It has already made significant investment in primary care to support primary care workforce development and delivery of care planning approaches and developing patient activation.

Sheffield has made good progress in developing its neighbourhood model and has 16 neighbourhoods at varying levels of maturity. The recent development of Sheffield's local Neighbourhood Development Tool is designed to ensure a consistent but locally relevant plan for development supported by access to high quality neighbourhood level data.

In 2017/18 Sheffield has also piloted an enhanced case management / virtual ward model in one of its four localities which has shown considerable success and has highlighted the importance of the development of robust relationships across the multidisciplinary team.

2. MDT Working

It is clear that high quality multi-disciplinary team (MDT) meetings are fundamental to enabling the achievement of Sheffield's ambition to deliver care and support closer to home. Whilst some practices have worked hard to prioritise effective MDT development, this is not consistent across the city. Where it works well however feedback from health and care practitioners and patients is very positive. The CCG is keen to replicate this across the city to provide a foundation for further developments.

One of the challenges Sheffield now faces is ensuring that all practices have a commitment to developing relationships with colleagues across professional disciplines and organisations. This fits well with the objectives articulated within the Place Based Plan and the local Primary Care Neighbourhood Development Tool.

The CCG has been allocated non-recurrent funding (50p per head for practices) from NHS England to support the set-up and development of a consistent and robust MDT approach across Sheffield practices and neighbourhoods.

Existing mechanisms are in place to distribute the funding to practices in a timely way and it will be made clear that this is one-off funding to "pump-prime" the set-up and

develop MDTs and regular MDT meetings. The further development of the MDT will become a part of the Neighbourhoods development. This will align with the process the Committee has agreed in relation to the Local Care Networks investment.

3. Proposed Approach

A pro-forma has been created for Neighbourhoods to complete requesting them to indicate the levels of engagement across the Neighbourhood and the patient group which has been identified as the beneficiaries of an MDT style of working. (The Pro-Forma is attached as Appendix 1 for information).

The Neighbourhoods that are allocated the 50ph to operate the MDT approach be required to submit quarterly reports to Sheffield CCG.

4. Action for Primary Care Commissioning Committee / Recommendations

The Primary Care Commissioning Committee is asked to:

- Approve the use of the 50p per head of population from NHS England to support the set-up and development of MDTs within Neighbourhoods.

Paper prepared by: Sarah Chance
On behalf of: Katrina Cleary
Date 13 March 2017

Neighbourhood Multi Disciplinary Team Pro Forma

Sheffield is making excellent progress in developing its ambition to become a person-centred city. We have already made significant investment in Primary Care to support Primary Care workforce development and delivery of care planning approaches and developing patient activation.

We believe that high quality multi-disciplinary team (MDT) meetings are fundamental to enabling the achievement of Sheffield’s ambition to deliver care and support closer to home. Sheffield CCG will allocate a one off 50p per head to pump prime all Neighbourhood practices to show a commitment to developing an MDT approach, working with colleagues across other professional disciplines and organisations.

For your Neighbourhood to be considered for allocation of funding please complete the below pro-forma and return to.....by

Neighbourhood	
Pro-forma completed by	

1 Please list the Neighbourhood practices which are fully engaged in the neighbourhood way of working and intend to engage in the development and implementation of an MDT way of working?

2 Which patient group has been identified as benefiting from an MDT approach within your Neighbourhood? (e.g. frail elderly, children, mental health)

3 What is the Neighbourhoods rationale for choosing this patient group and how will they benefit?

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4 Which organisations (NHS, social, third sector etc.) and/or professionals will be engaged within the MDT and how (frequency etc.)?

5 How will the £ be used and what is the timeline for implementation?

6 How will the learning be shared and discussed across the neighbourhood?

If your Neighbourhood is allocated the 50ph to operate the MDT approach you will be required to submit quarterly reports. The report template will include information on

- The progress the MDT team is making
- The organisations involved
- The successes and challenges
- Patient benefits from working with the MDT approach
- Case study

