Sheffield Accountable Care Partnership

Primary Care Work Stream

Stephen Knight

Primary Care Sheffield

Sheffield City Council

Sheffield Health and Social Care NHS
NHS Foundation Trust

NHS
Sheffield
Clinical Commissioning Group

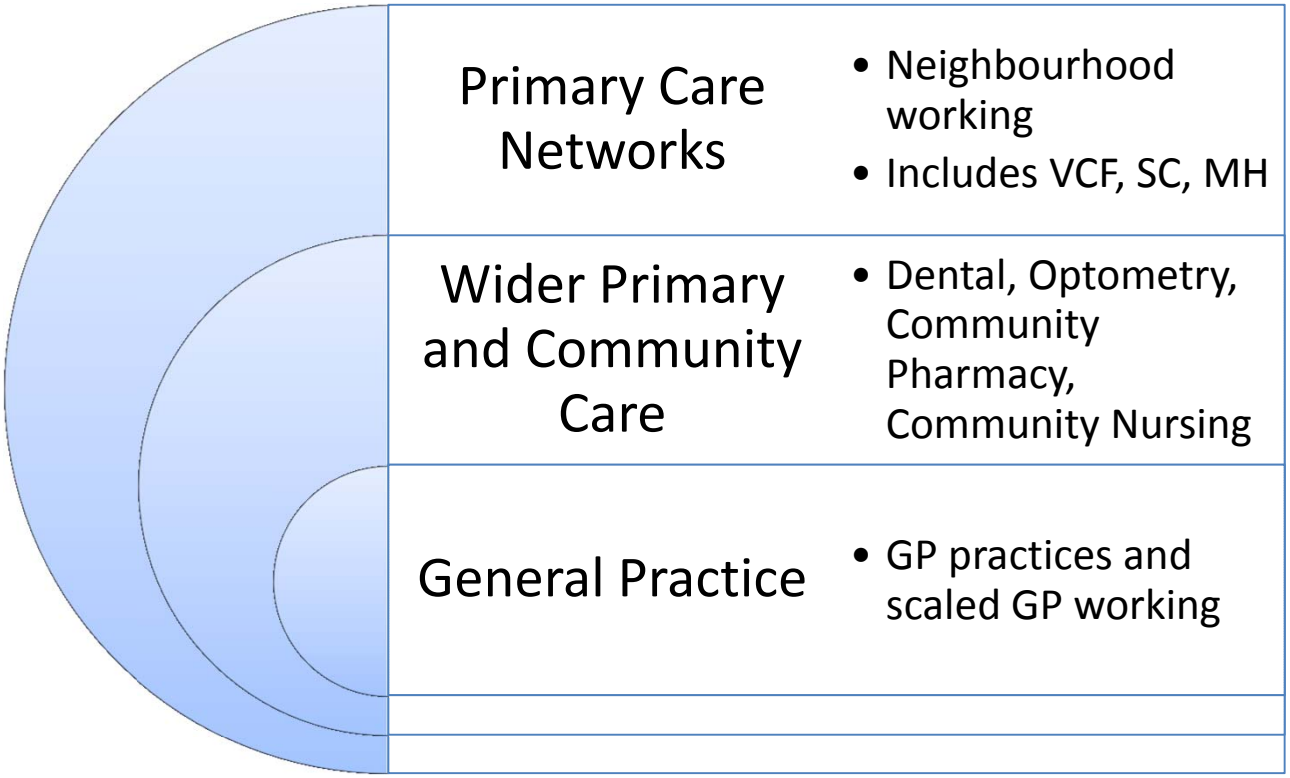
Sheffield Children's NHS
NHS Foundation Trust

Sheffield Teaching Hospitals NHS
NHS Foundation Trust

Limiting the breadth of scope

- Deliver on some things or discuss everything?
- Interdependencies with other work streams: LTC; Elective; Prevention; Urgent Care; Mental Health
- ICS integration with place
- Commissioning resides with CCG / SCC

What is Primary Care?



- Being explicit General Practice and Primary Care.
- Putting General Practice at the heart of Primary Care.
- Integrating Primary Care into the system

Investment in Primary Care is necessary for the whole system.

An increase in GPs per 10,000 population is associated with a significant increase in quality and a reduction in cost per beneficiary. [1]

An increase in one primary care physician per 10,000 population is associated with a 6% decrease in all-cause mortality and a 3% decrease in infant, low birth-weight and stroke mortality. [2]

Each tenth-percentile increase in primary care physician supply is associated with a 4% increase of early stage diagnosis of breast cancer[3]

Health economies that invest in consistent, accessible, high quality Primary Care have a slower growth in expenditure.

Point of delivery (£)	2015-16[4]
Day case	733
Elective inpatient (excluding excess bed days)	3,749
Non-elective inpatient (excluding excess bed days)	1,609
A **YEAR** of care from General Practice	136

1. L Shi et al – Income inequality, Primary Care and health indicators
2. K Baicker and A Chandra – 'Medicare spending, the physician workforce, and beneficiaries' quality of care
3. J M Ferrante et al – Effects of physician supply on early detection of breast cancer.
4. Table values taken from NICE Costing Statement 2015/16

Vision and priorities

To ensure that the people of Sheffield have excellent local, joined-up, sustainable primary and community support to enable them to live their lives to the full.

Developing General Practice at the heart of Primary Care

Integrating wider Primary Care into the system and developing and realising the full potential of the team in its widest sense

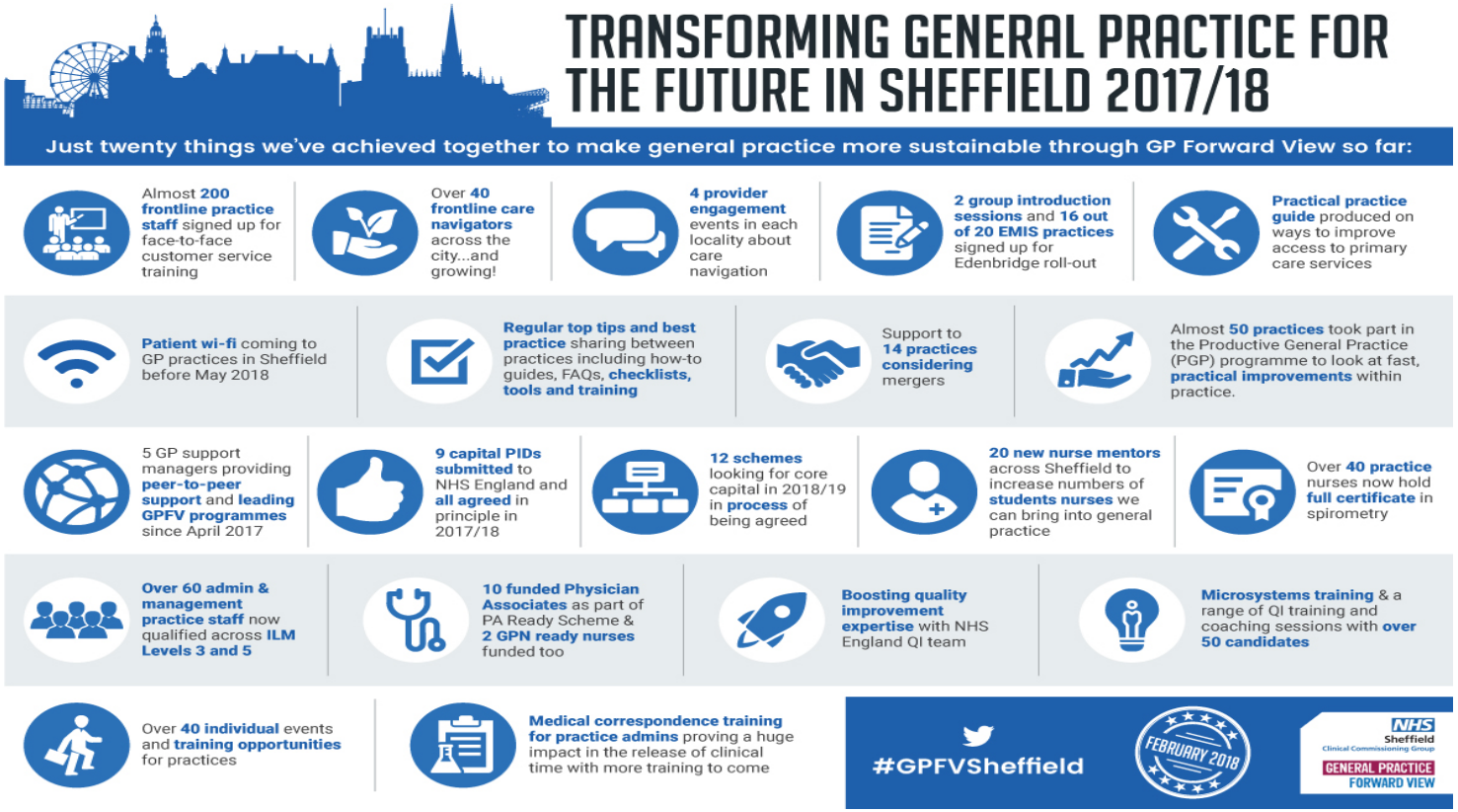
Delivering population Health Management to enable all layers of delivery

Developing a Primary Care workforce for the future

Developing neighbourhood working – 'Primary Care Networks' functioning as integrated, multi-organisational, multi-disciplinary teams

Developing General Practice at the heart of Primary Care

Sheffield Brand of General Practice



PCS — ACP

Neighbourhoods — 10 year plan

GMS / PMS — Nigel Watson report

Resilience, Quality and Consistency

- Define the vision of sustainable General Practice and **what good looks like** including how activity is delivered set within wider primary care with appropriate usage.
- Identify markers of success and the **metrics** to be used in monitoring performance against these markers.
- Influence the Sheffield **GPFV** focus
- Support discussions around contractual models for **incentivising quality** in General Practice, defining a clear model of provision **interlinking the layers of delivery** and the relationships between providers.
- Deliver **practical support** offer to practices around HR, finance etc

Delivering population Health Management to enable all layers of delivery

Population Health Management

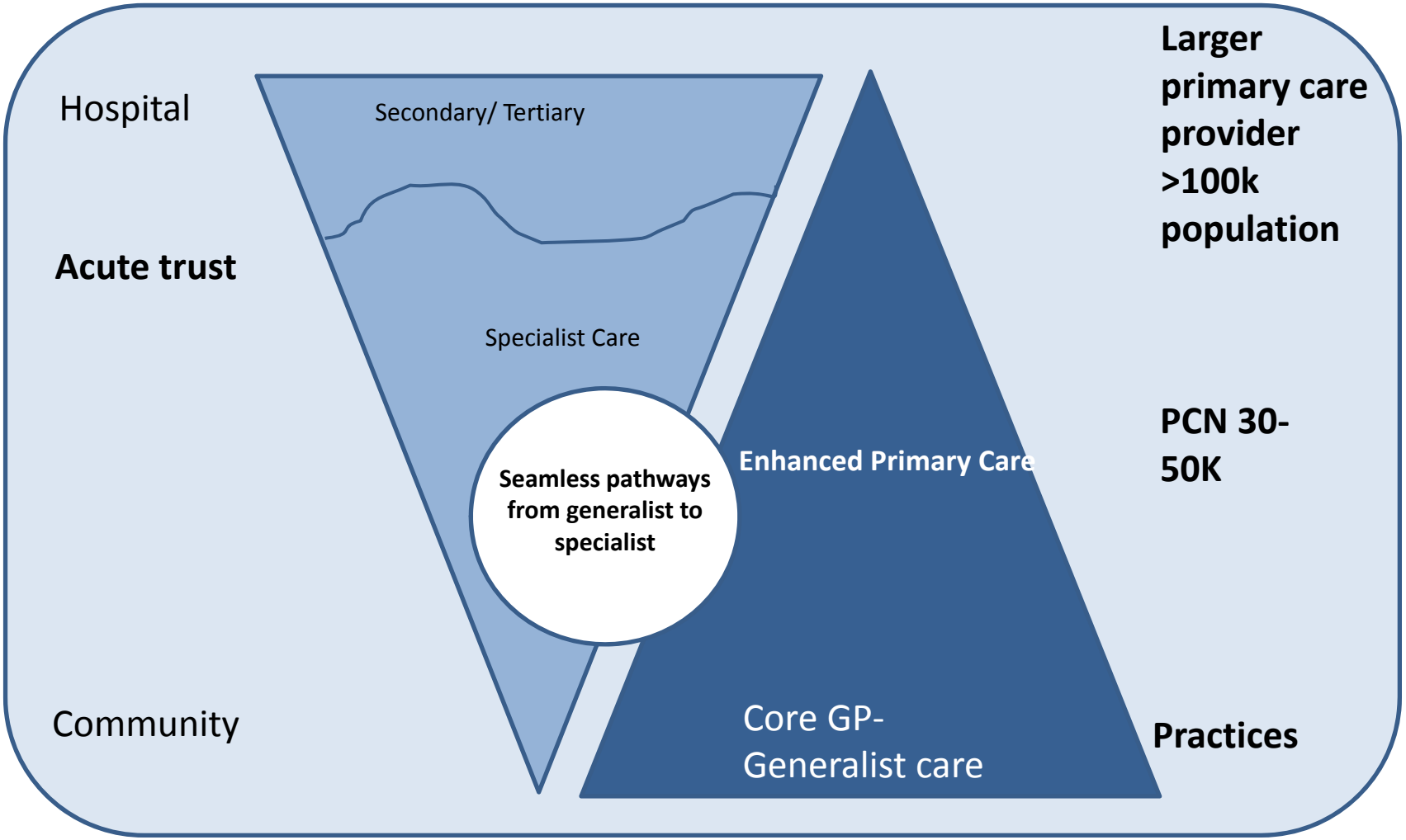
Population Health Management

- Support appropriate working groups to develop practical operational models to create delivery plans.
- Ensure that the priority areas of the ACP are embedded into the population health approach in all levels of delivery.
- Link with the ICS work and identity / define the scope for the ACP
- Use the ‘Infrastructure, Intelligence and Intervention’ methodology to design care models, outcomes and evaluations.

- **Predictive Risk modelling**
- **Population dashboards**
- **Access to analytics capacity**

Integrating wider Primary Care into the system and developing and realising the full potential of the team in its widest sense

Local First: Supporting the shift to a person-centred primary, community and prevention focussed system


Hospital
Secondary/ Tertiary
Acute trust
Specialist Care
Seamless pathways from generalist to specialist
Enhanced Primary Care
Core GP-Generalist care
Community
Larger primary care provider >100k population
PCN 30-50K
Practices

“The art of the possible”

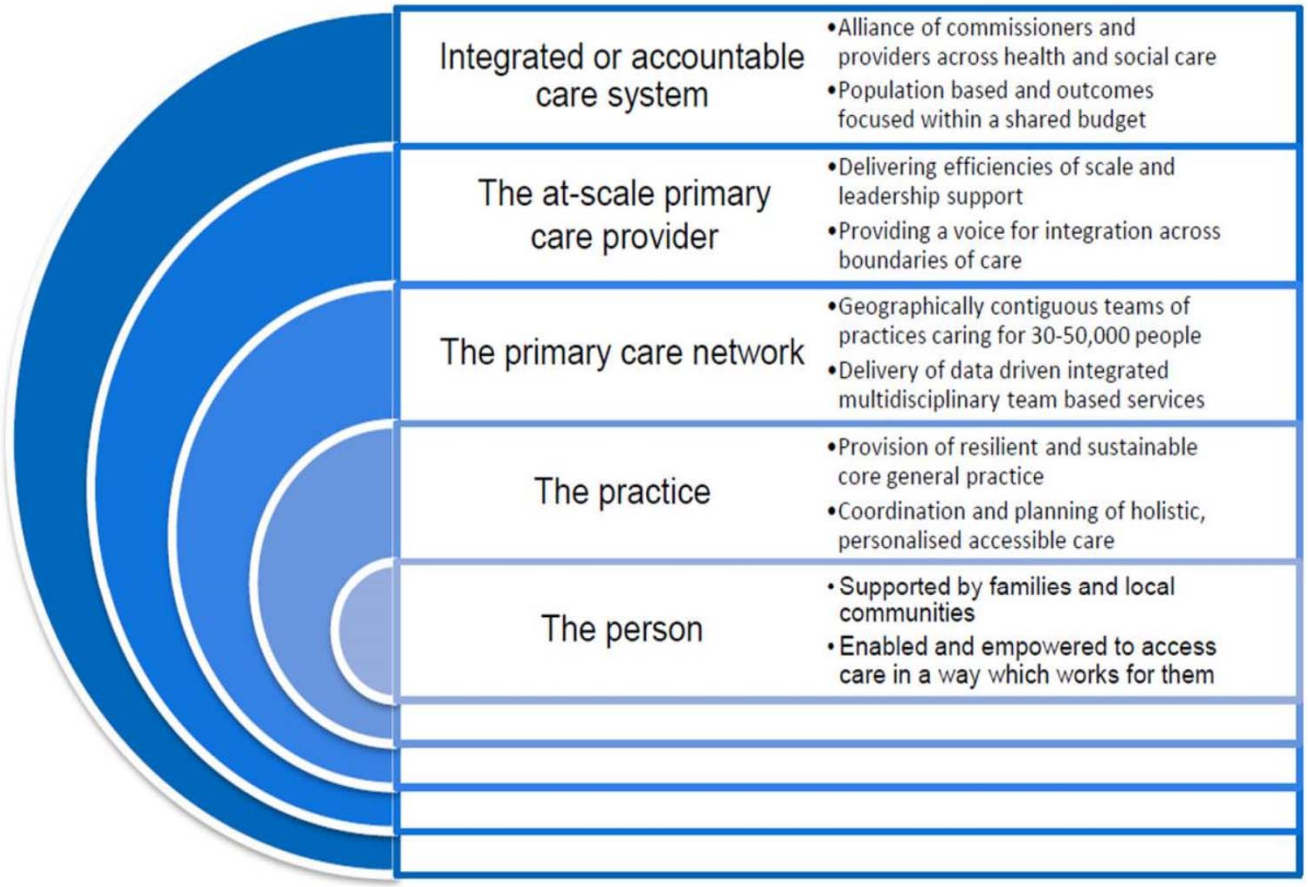
- Define the vision and then prioritise and drive **new models of care**, tailored to population need, where **appropriate generalists activity is moved into primary care** settings.
- Develop a strategic view of the potential scope and breadth of this shift
- Prioritise areas for action, aligned to population need and linked to the 4 objectives of the ACP
- Promote Person Centred and holistic focus, supporting provider relationships and developing seamless pathways of care.
- Produce business cases for the transfer or integration of generalist services to sit within primary care.

Developing neighbourhood working – ‘Primary Care Networks’ functioning as integrated, multi-organisational, multi-disciplinary teams

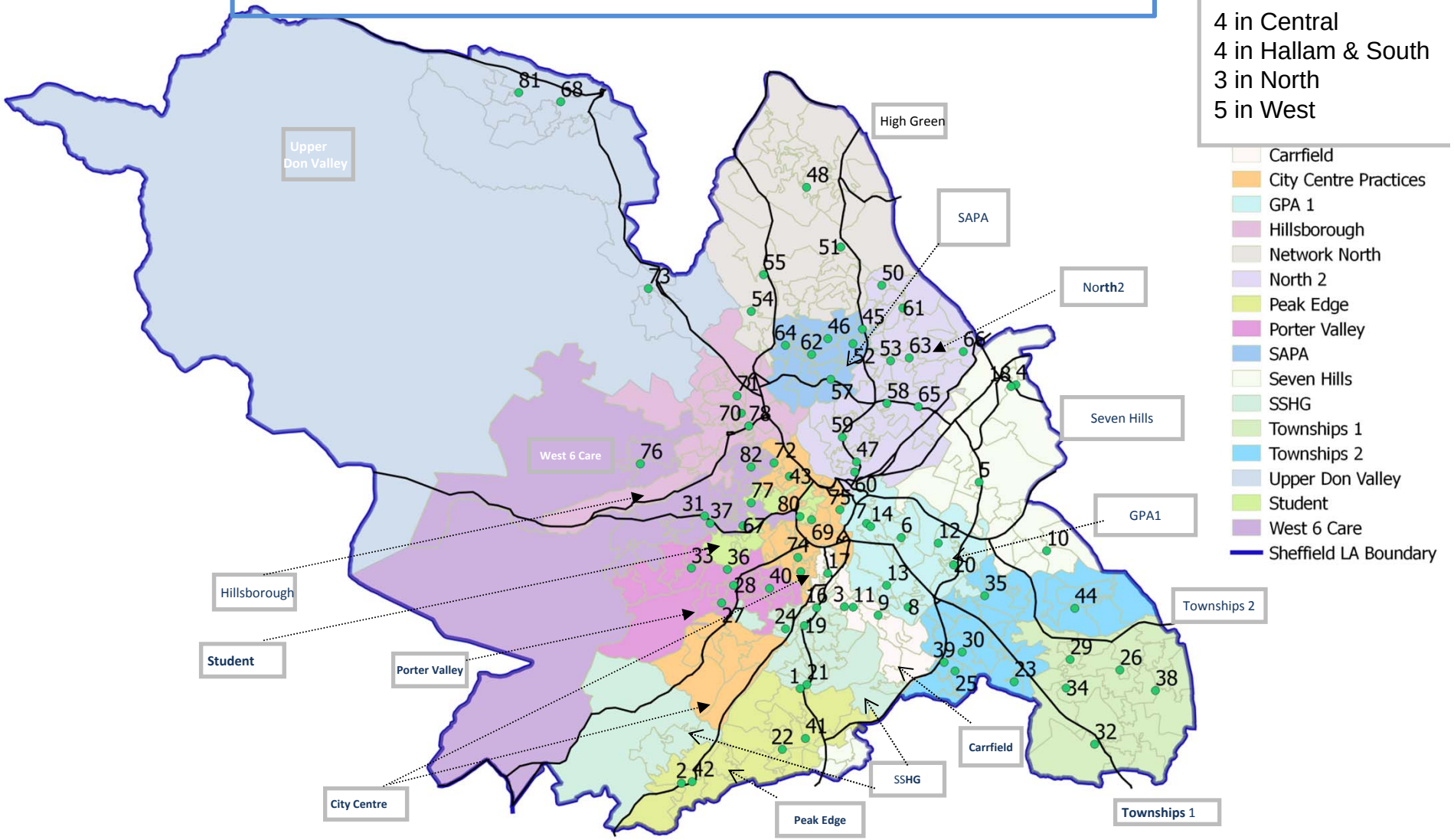
Neighbourhood Delivery

THE MODEL OF CARE

NHS England



16 Neighbourhoods Across Sheffield City



Produced by NHS Sheffield CCG
Information & Intelligence Team
18/05/18

Delivering as integrated, multi-organisational, multi-disciplinary teams

- Plan and deliver a neighbourhood **quality improvement collaborative** with a **phased support programme** commencing with 3-4 neighbourhoods and rolling out to all neighbourhoods across the city.

- Plan the selection criteria for identifying the initial neighbourhoods and the offer of support to each phase of the neighbourhood collaborative.

- Identify areas for delivery and develop the scope and outcome of each area into a **pick-list for neighbourhoods**

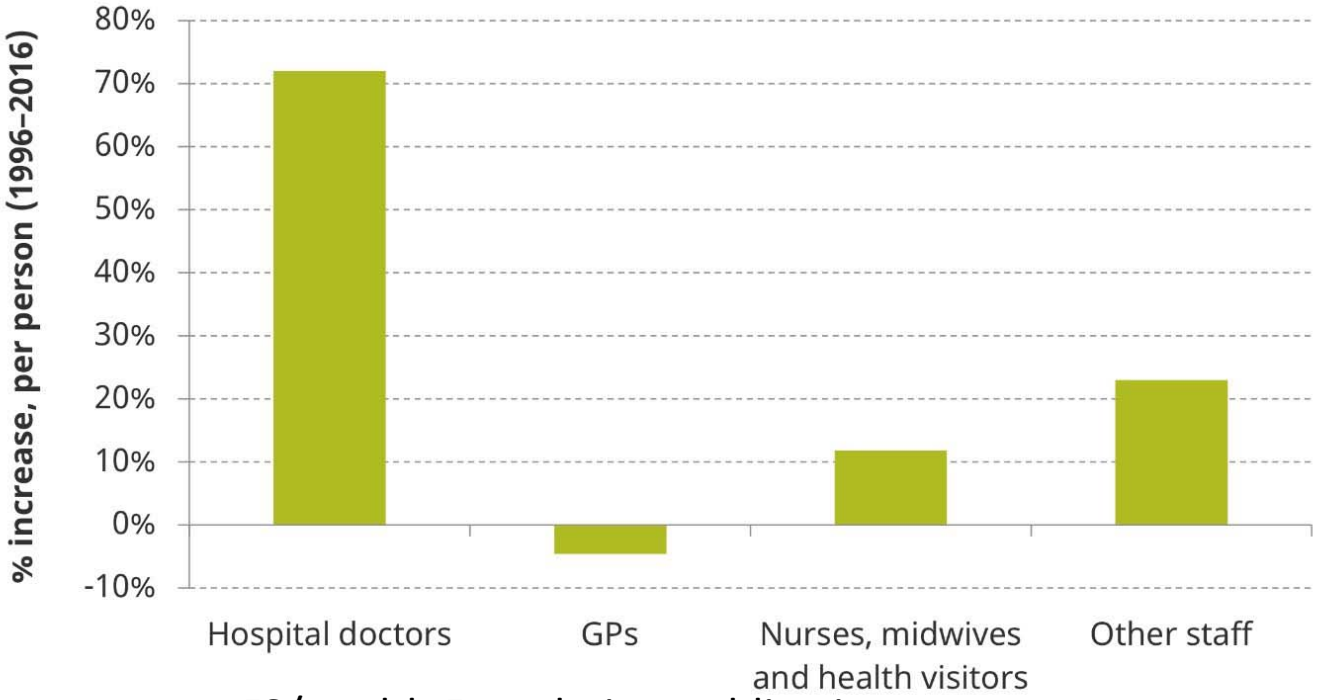
- Identify a **universal offer** of support that runs alongside the afore mentioned approach.

- **Establish metrics** for reporting and evaluating

Developing a Primary Care workforce for the future

Centre of Excellence in Primary Care

Figure 2.8. Changes in size of different NHS staff groups per population, 1996 to 2016



From recent IFS/Health Foundation publication.

Sustainable workforce and robust evaluation

- Develop a **Workforce Strategy** for wider Primary Care
- Develop a **Workforce plan** for wider Primary Care in Sheffield including training
- Develop a **shared approach to non-academic training** as a centre of learning for primary care to share PLIs, MDT training and sharing of best practice.
- Support the development and delivery of the **GPN VTS** scheme and consider how Sheffield approaches post-VTS support for all professions
- Develop a **Primary Care Research and innovation** strategy including evaluation measures for success and appropriate population delivery units
- Develop a **digital research strategy** for Primary Care to support e-consultation, prioritisation models for triage and telehealth and digital interoperability of primary care systems in Sheffield.

Summary

Centre of Excellence in Primary Care

Sheffield Brand of General Practice

Local First: Supporting the shift to a person centred primary, community and prevention focussed system

Neighbourhood delivery

Population Health