

GP Led Commissioning Case Study

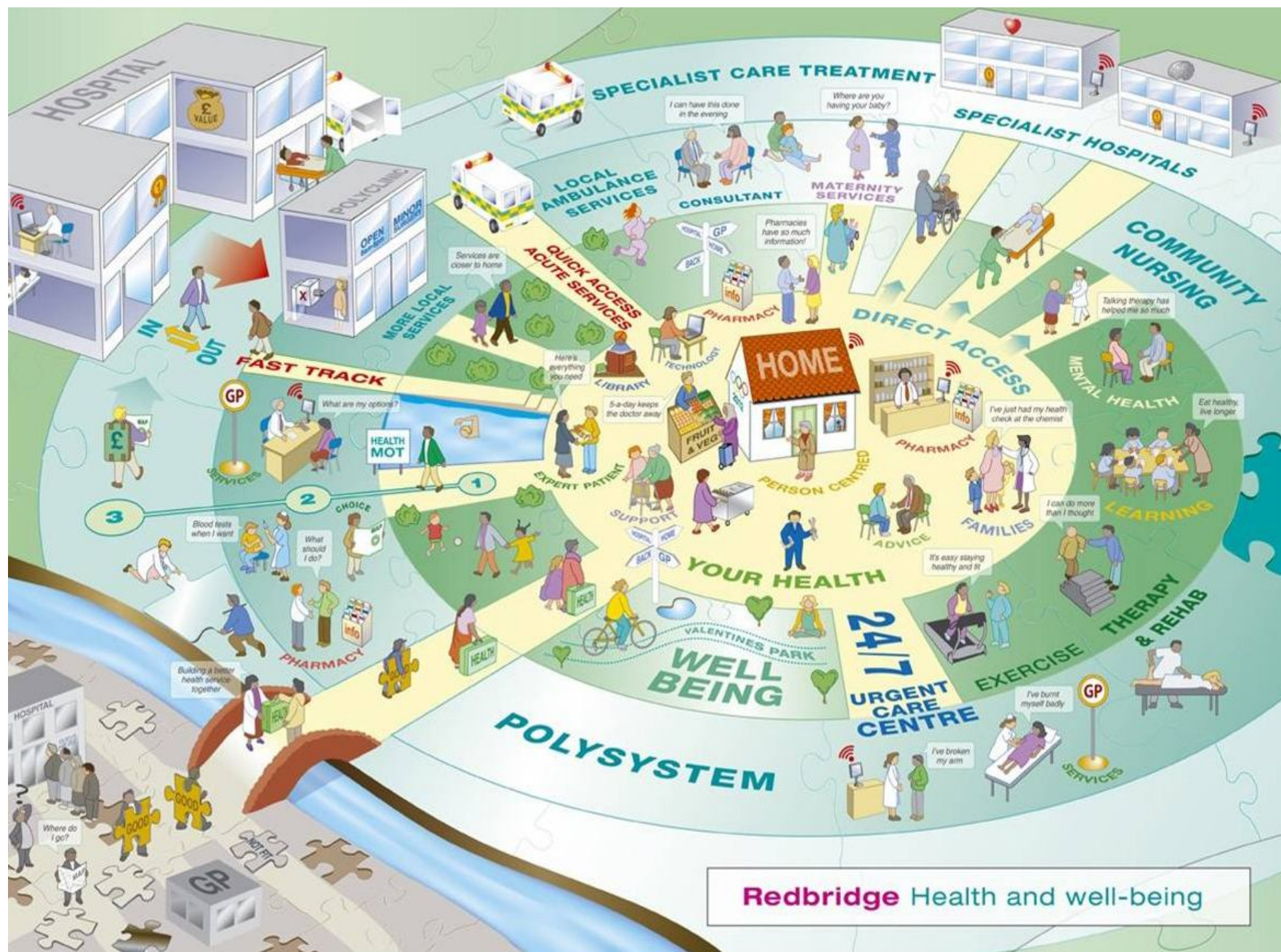
Working with GPs to design properly integrated care

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Talk to us today about
Redbridge healthcare services
on **0800 0926 995** or visit
www.redbridgepct.nhs.uk

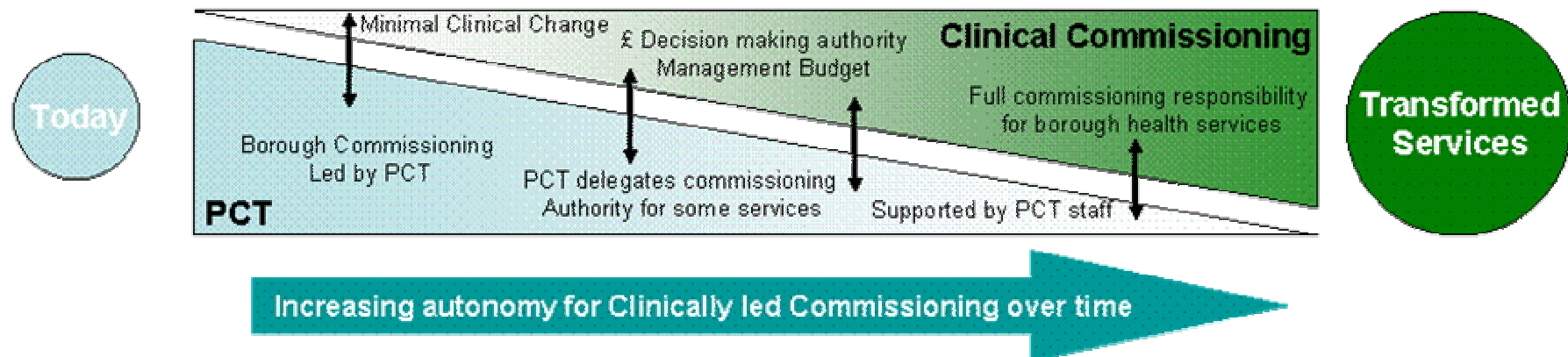
Doctors | Dentists | Physiotherapy | Blood testing | Health centres | Urgent care | Diabetes care | Sexual health
Podiatry | Patient advice | Nutrition | Health visitors | Speech and language therapy | Cancer screening
Immunisations | Family planning | School nurses | Palliative care | Smoking cessation | Children's services



Reshaping commissioning and delivery

Principles:

- Built on strong GP leadership with broad clinical engagement and strong user & stakeholder involvement.
- Embedded and led by local GPs, supported by community health services, acute trusts and local authorities
- Enables increasing autonomy for GP led commissioning.
- Focused on the care management of registered populations to keep them well and healthy.
- Built on a platform of publically available and transparent information that drives improvements and enables patients to make judgements



GP led commissioning & community Involvement



- Alignment of PBC and polysystems
- 5 clinical directors forming Commissioning Board
- Integrated delivery with providers
- Involving local Councillors

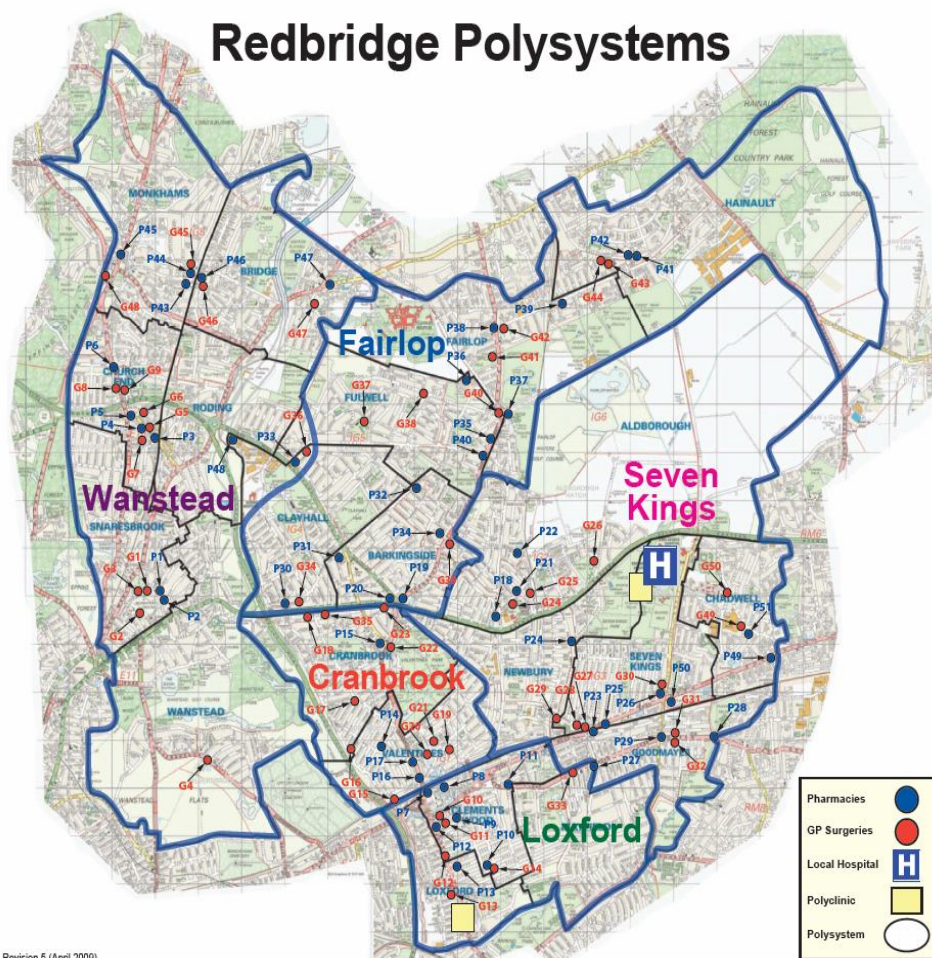


- 5 community panels established
 - Support for service review
 - Monitoring of quality standards
 - Procurement panels

All residents are already a member of a polysystem

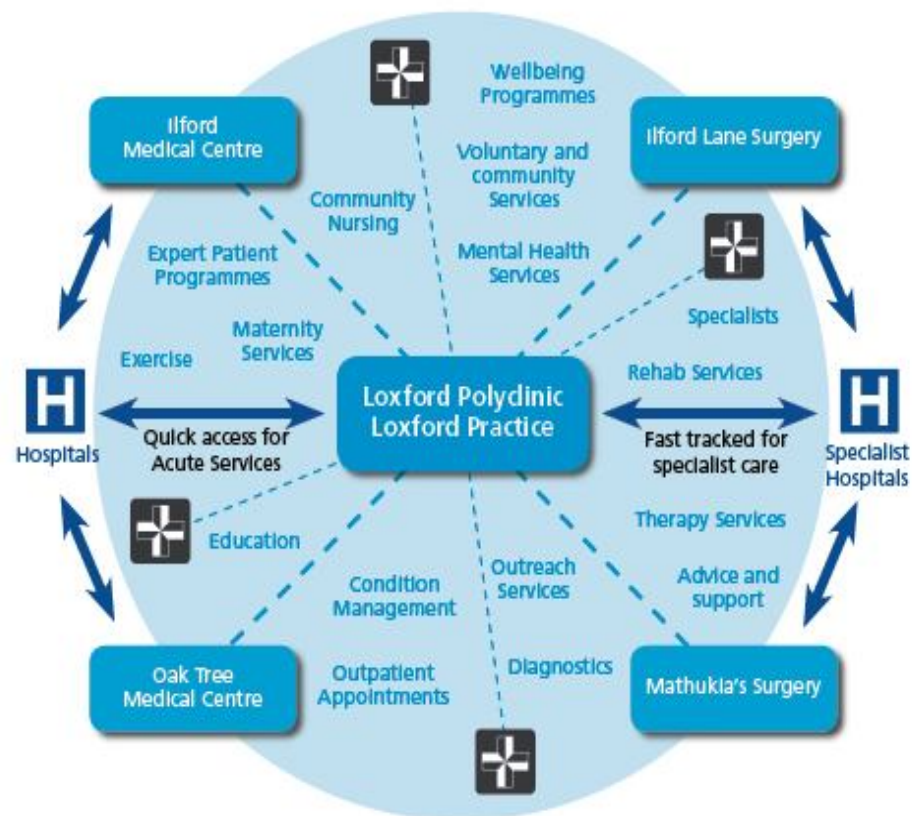
5 established as the engines driving change at the local level – delivering local services that are high quality and productive – brought together to manage change across the borough

Redbridge Polysystems

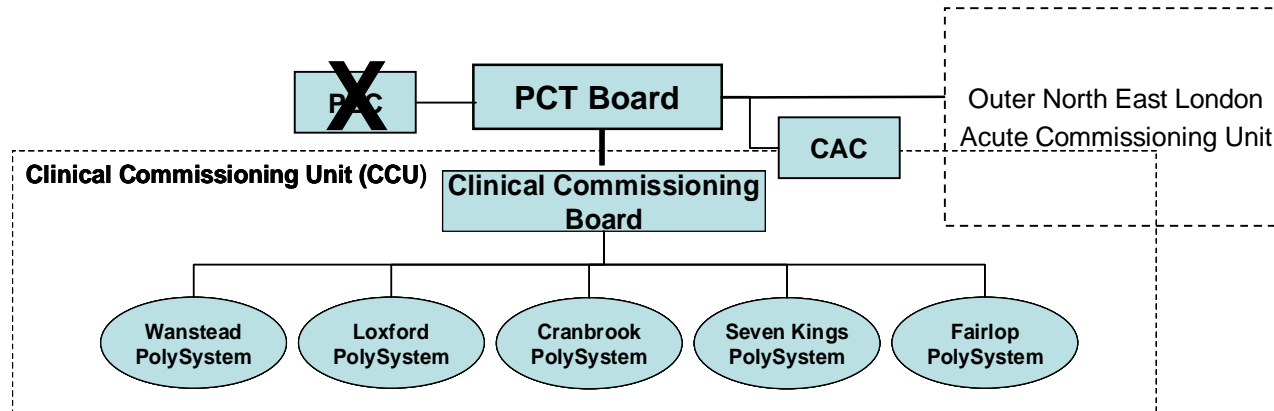


Revision 5 (April 2009)

Loxford Polysystem



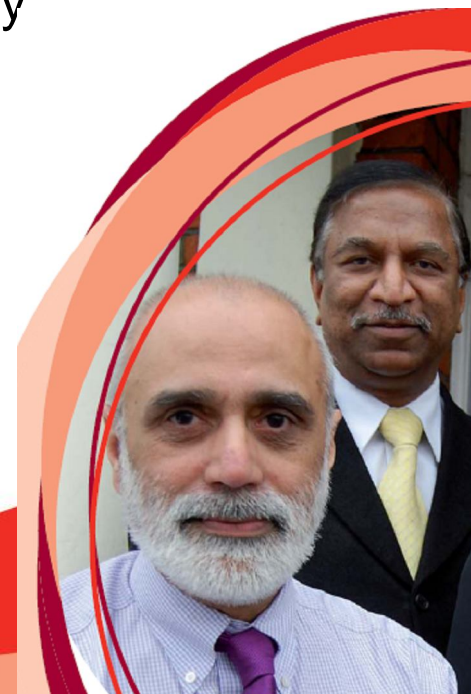
GP led commissioning - governance



- Boroughwide Clinical Commissioning Board
- Accountability for polysystem effectiveness
- Responsible for pathway development
- Manage budget and incentive schemes
- PBC Partner relationship with PCT
- Social Care involvement at all levels

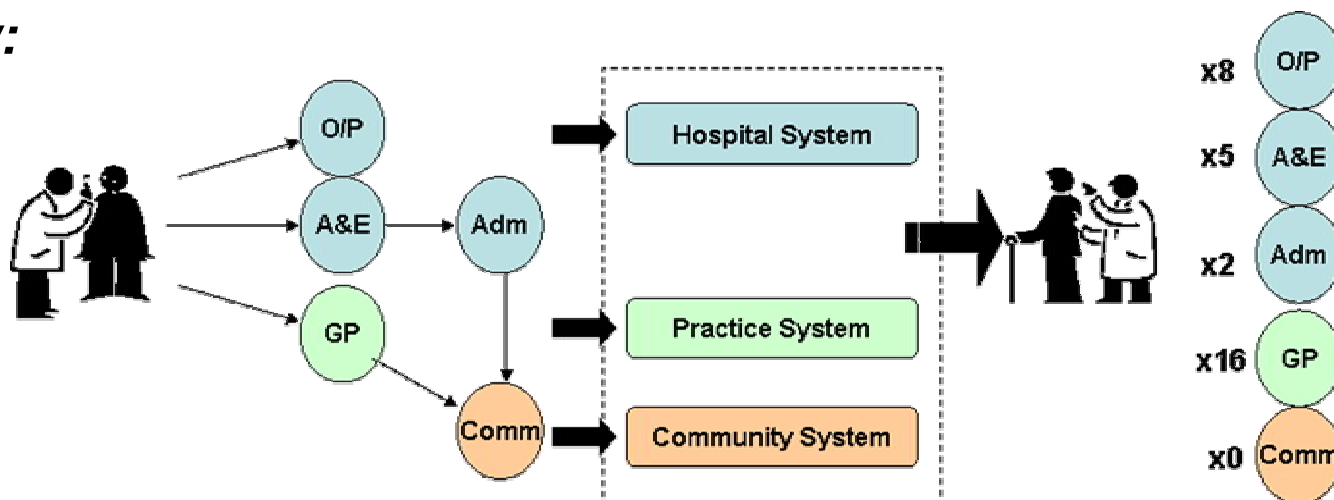
GP led commissioning - delivery progress

- Leadership of 09/10 Delivery Plan and Budget
 - Responsible for 8 vital signs incl chlamydia, breast feeding and immunisations
 - Leading for over 10 redesign projects covering planned, urgent and LTC care
 - Accountable for delivering £6.6m in year savings – referrals, A&E, prescribing
- Development programme for clinical directors and emerging leaders: focus on commissioning and decommissioning currently
- Developing 10/11 priorities and Consortia Pathfinder opportunities



Example project – Integrated Care

Now:



Top 1% of high cost and high risk patients – 2,500 people

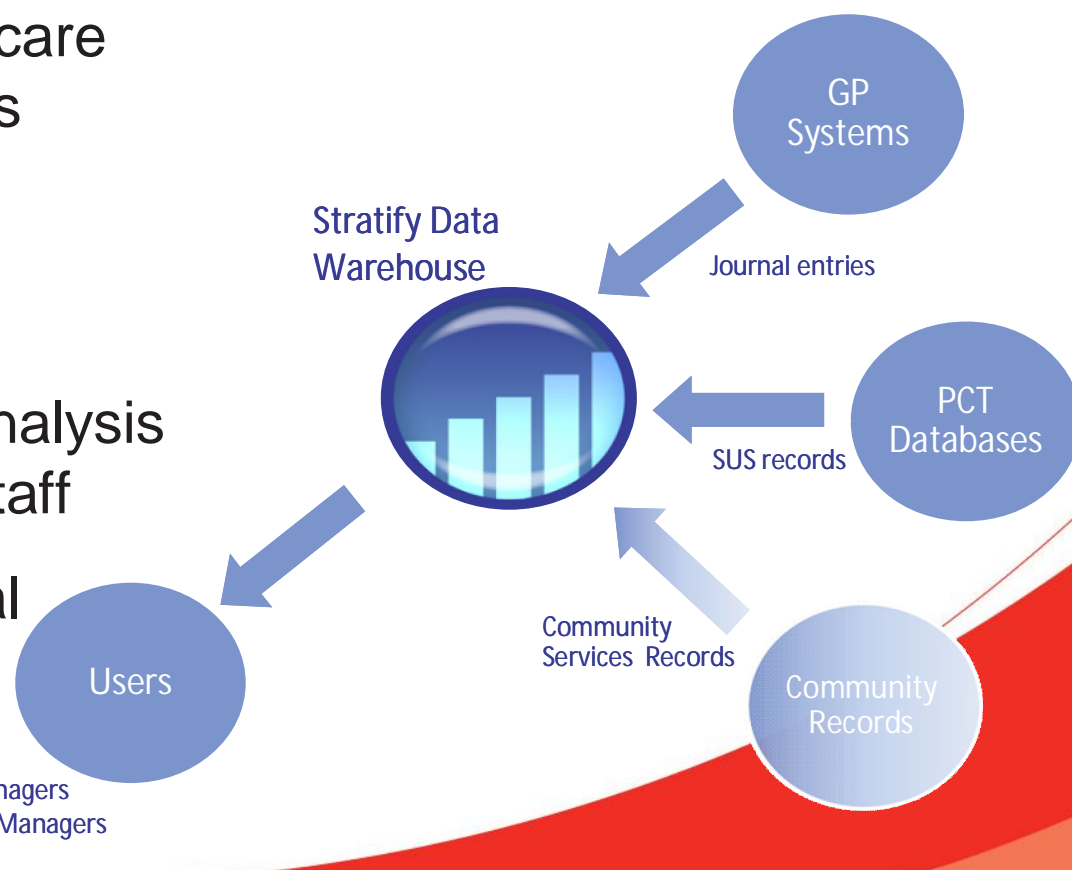
Every year:

- 16 x GP appts
- 8 x Outpatients
- 5 x A&E,
- 2 x hospital admissions
- 0 community nurse

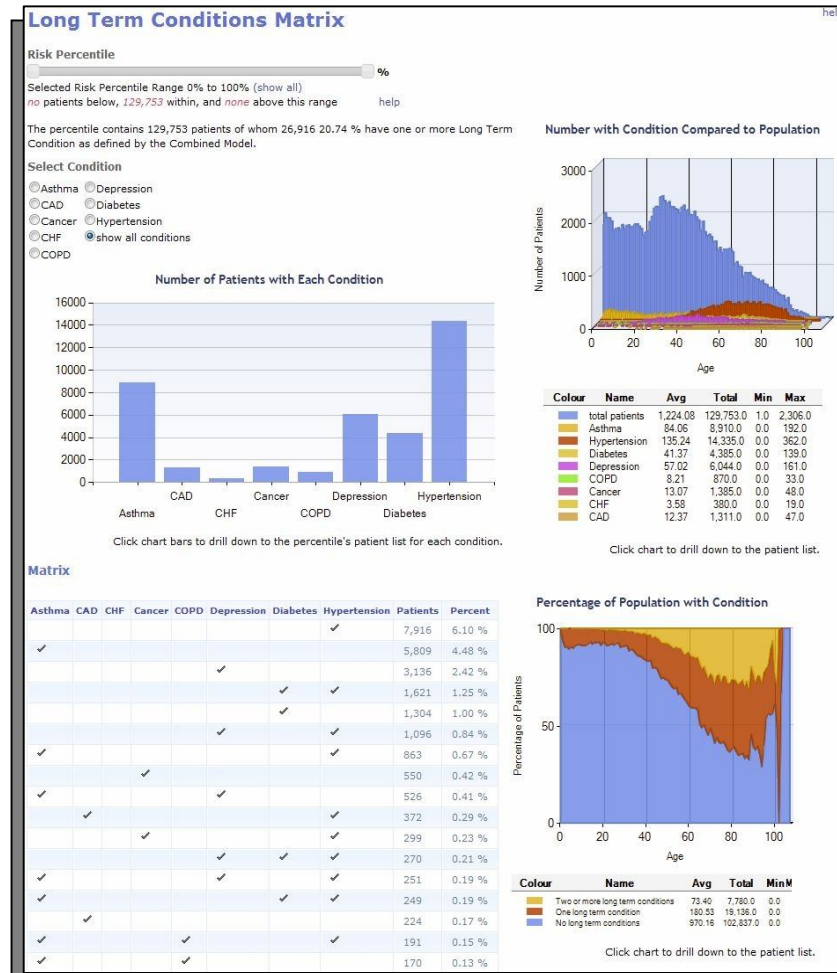
**Uncoordinated care and poor patient experience
costing 15% of annual PBR budget – circa £36m**

Enabled by aligned data

- Encrypted at GP source
- Aligned and patient focused data for primary and secondary care data across the all practices
- Risk Stratification
 - Computes patient risks
 - Provides “risk aware” analysis tools for GP and PCT staff
- Pathway focus and financial tracking

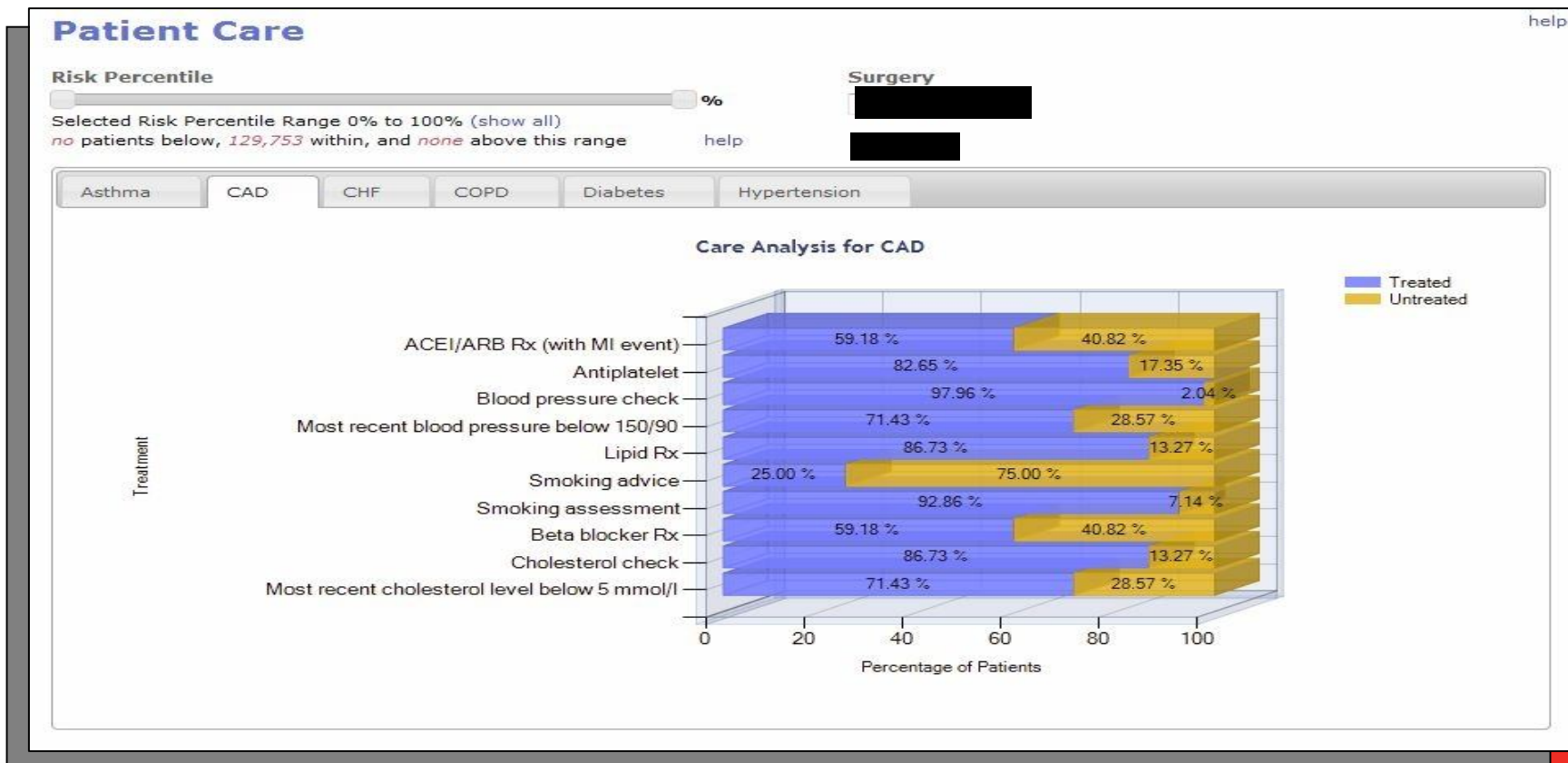


Assessing needs and opportunities



GPs identify need and design care model

Reviewing key clinical care standards



GPs define the minimum level of care and monitor outcomes across the polysystem

Tracking improvements and outcomes

At Risk Patients

Risk Percentile

Selected Risk Percentile Range 0% to 100% (show all)
no patients below, *30,672* within, and *none* above this range

Age Range

Selected Age Range 0 Years to 120 Years (show all)

Long Term Conditions Count

☒ don't care ☐ none ☐ any one ☐ one or more ☐ two or more

Specific Long Term Conditions

Find only patients with *all* of the selected conditions.

☐ Asthma ☐ CAD ☐ CHF ☐ Cancer
☐ COPD ☐ Depression ☒ Diabetes ☐ Hypertension

Sex

☒ Either ☐ Female ☐ Male

Matching Patients

Show: ☒ Patient Details ☐ Long Term Conditions ☐ GP Flags ☐ A&E Flags ☐ IP Flags ☐ OP Flags

Found 1,238 patients matching these criteria. Click any patient ID to drill down to their episode records.

ID	Practice	Age	Sex	A	Registered	Removed	Doctor	Usual Doctor	Practice Percentile	Cohort Percentile	Risk Score	Flag Sum
79	F	R	03/00/1990				G6224268	G6224268	99	99.5	20.691869	2.828554
85	F	R	18/00/2007				G6224268	G6224268	99	99.5	21.383680	2.870202
87	M	R	24/00/2007						99.5	99.5	21.527402	2.878731
87	M	R	07/00/2001				G8136486	G8136486	100	99.5	21.826855	2.896369
86	M	R	12/00/2007				G6224268	G6224268	99	99.5	21.826855	2.896369
91	F	R	24/00/1994				G6224268	G6224268	99	99.5	22.193462	2.917726
82	M	R	13/00/2007				G6224268	G6224268	99	99.5	22.300366	2.923906
77	M	R	22/00/1982				G8240789	G8240789	99	99.5	22.504667	2.935659
80	F	R	09/00/2004				G6224268	G6224268	99	99.5	22.612469	2.941830
31	M	R	18/00/1997				G6224268	G6224268	99	99.5	22.667706	2.944983
72	F	R	11/00/1975				G3284559	G3284559	99	99.5	23.198369	2.975010
77	F	R	20/00/1979				G6224268	G6224268	99	99.5	23.386771	2.985554
77	F	R	01/00/1988				G6224268	G6224268	99	99.5	24.333126	3.037652
76	F	R	22/00/2004				G6224268	G6224268	99	99.5	24.333126	3.037652
48	M	L	14/00/1998		15/00/2008		G3284559	G3284559	99	99.5	24.521821	3.047873
91	F	R	02/00/2000				G8031323	G8031323	100	99.5	25.187737	3.083529
93	F	R	24/00/2007						99.5	99.5	25.939209	3.123023
52	M	R	23/00/1982				G3284559	G3284559	99	99.5	26.861385	3.170487

Export to file

Model Date: 2007-12-31 ID: 36 Published: 04/09/2009 12:00 Notes: Revised V2 to CTV3 Read code mappings for all GP incidents

☐ F86007 ☐ F86008 ☐ F86009 ☐ F86010 ☐ F86012 ☐ F86013 ☐ F86020 ☒ F86022 ☐ F86023 ☒ F86025

☐ F86028 ☐ F86032 ☐ F86034 ☐ F86042 ☐ F86053 ☐ F86057 ☐ F86060 ☐ F86064 ☐ F86066 ☒ F86068

☐ F86081 ☒ F86082 ☐ F86083 ☐ F86084 ☐ F86085 ☐ F86087 ☐ F86612 ☐ F86624 ☒ F86634 ☐ F86635

☐ F86637 ☐ F86641 ☐ F86642 ☐ F86652 ☐ F86655 ☐ F86657 ☐ F86658 ☐ F86675 ☐ F86680 ☐ F86691

☒ F86692 ☐ F86698 ☐ F86702 ☐ F86703 ☐ F86704 ☐ F86707 ☐ F86731 ☐ No Surgery ☐ Y00090 ☐ Y00155

☐ Y00918

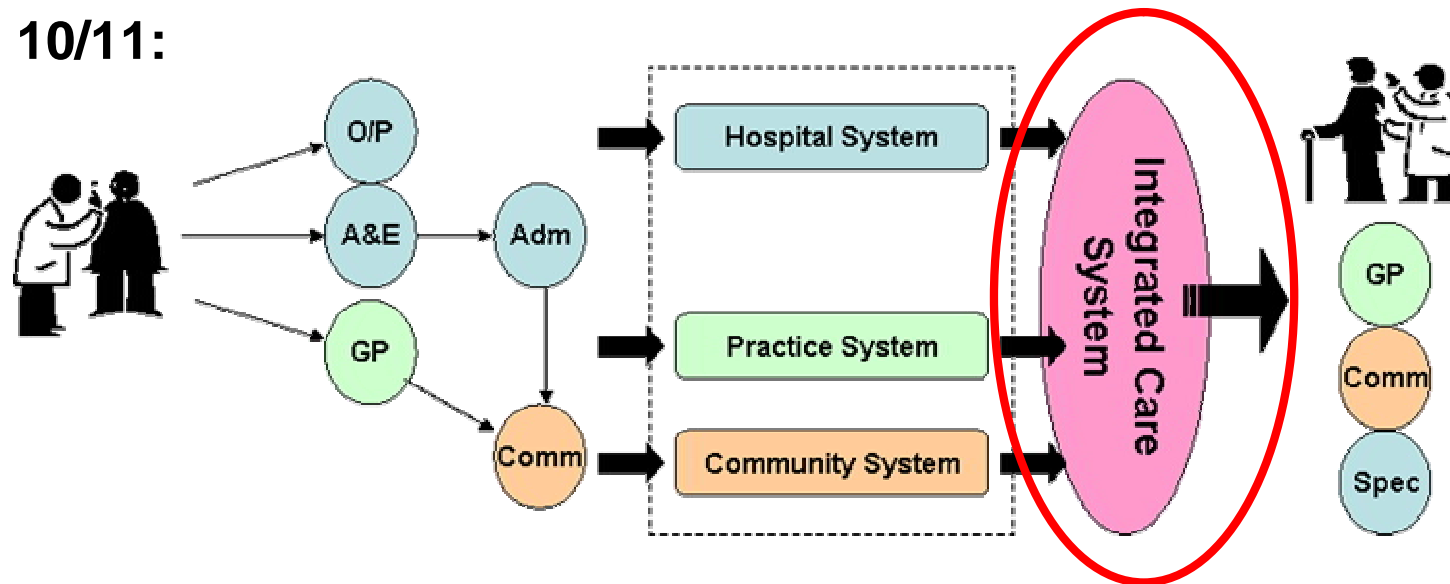
check all - check none

Cranbrook ✓ X Fairlop ✓ X Kings ✓ X Loxford ✓ X Wanstead ✓ X

GPs identify, track and manage high risk individual patients

Example project – Integrated Care

From 10/11:



- Top 1% of high cost and high risk patients – 2,500 people
- Integrated data and information
- Individualised care packages
- Combining primary, community and specialty care
- Tracking care inputs and monitoring agreed outcomes
- Delivering quality, patient experience and productivity improvements

Thank you

