NHS
Redbridge

Nuffield Trust Conference: Integrated care

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Conor Burke, NHS Redbridge

March 2010

Talk to us today about
Redbridge healthcare services
on **0800 0926 995** or visit
www.redbridge.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 | Polysystems
Immunisations | Family planning | School nurses | Palliative care | Smoking cessation | Children's services

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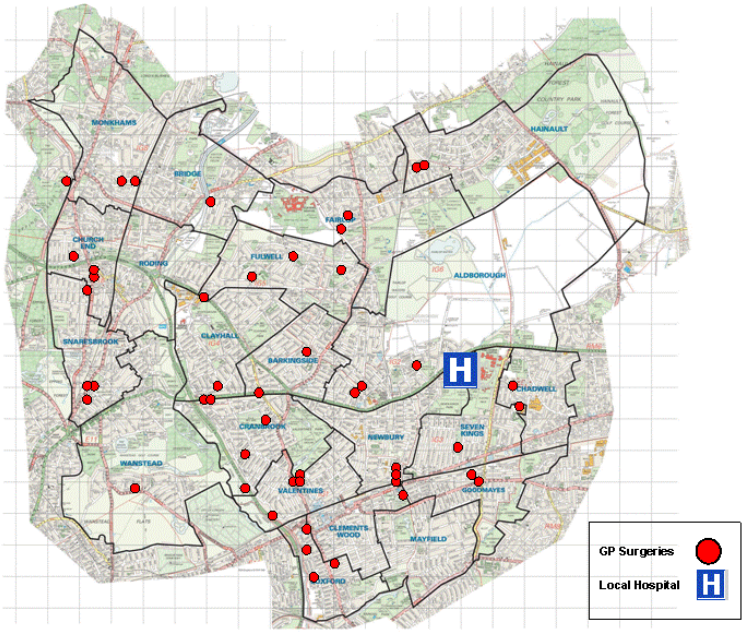
The Landscape

- 50+ GP practices
- 40+ Community Pharmacists
- 300+ Primary Care Professionals
- 2 Large Acute and 1 large mental health Trusts
- Range of community providers
- Voluntary Sector
- Good relationship with LA
- Community & Public
- Diverse Politically



The Challenge

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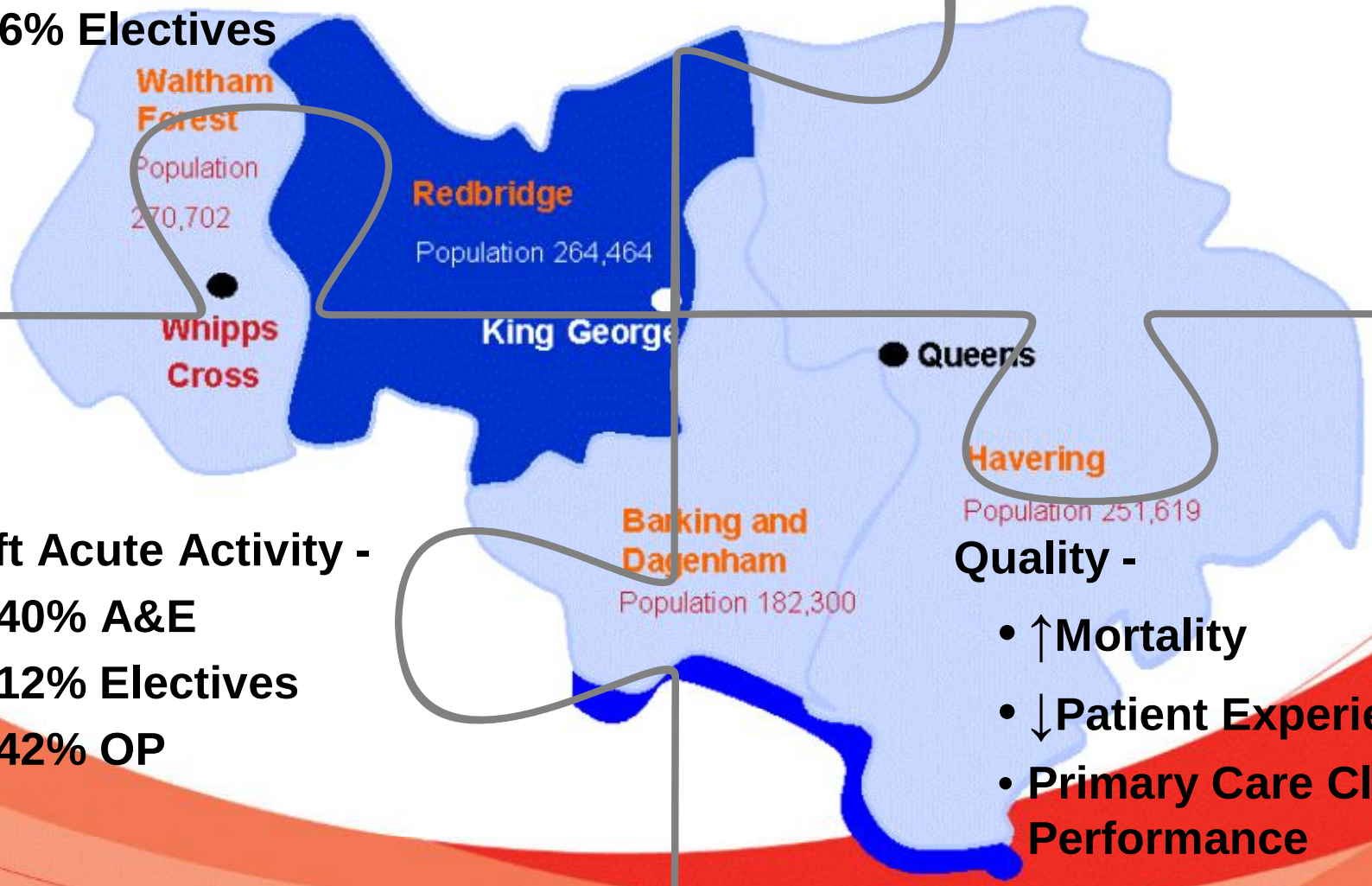
Decommissioning -

- **20% of OP**
- **6% Electives**

Prevent -

- **35% LTC Adms**



Shift Acute Activity -

- **40% A&E**
- **12% Electives**
- **42% OP**

Quality -

- **↑Mortality**
- **↓Patient Experience**
- **Primary Care Clinical Performance**

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Real improvement comes from changing systems, not changing within systems.

Donald Berwick
President & CEO
Institute for Healthcare Improvement

HOSPITAL
£ VALUE
POLYCLINIC
OPEN
MINOR
IN
OUT
FAST TRACK
GP
SERVICES
HEALTH MOT
1
2
3
CHOICE
PHARMACY
MORE LOCAL SERVICES
QUICK ACCESS ACUTE SERVICES
LOCAL AMBULANCE SERVICES
SPECIALIST CARE TREATMENT
SPECIALIST HOSPITALS
CONSULTANT
MATERNITY SERVICES
COMMUNITY NURSING
DIRECT ACCESS
PHARMACY
TECHNOLOGY
LIBRARY
HOME
EXPERT PATIENT
SUPPORT
PERSON CENTRED
ADVICE
FAMILIES
MENTAL HEALTH
LEARNING
THERAPY & REHAB
EXERCISE
YOUR HEALTH
VALENTINES PARK
WELL BEING
24/7
URGENT CARE CENTRE
POLYSYSTEM
I can have this done in the evening
Where are you having your baby?
Pharmacies have so much information!
Services are closer to home
Here's everything you need
5-a-day keeps the doctor away
What are my options?
Blood tests when I want
What should I do?
Talking therapy has helped me so much
I've just had my health check at the chemist
Eat healthy, live longer
I can do more than I thought
It's easy staying healthy and fit
I've burnt myself badly
I've broken my arm
Building a better health service together
Where do I go?
GOOD
NOT FIT
Redbridge Health and well-being

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As an integrated local healthcare delivery network 'PolySystems' will:

Promote the health & wellbeing of all people in the local community

Achieving improved health outcomes overall and for specific communities e.g.

- Childhood obesity
- Teenage conception
- Physical activity

Maximise Independence & quality of life for people with long-term needs

- Reduce emergency admissions
- Care Navigation & Coaching
- Improved care coordination & dmanagement
- Better quality of life measures
- Reduced cost per head

Improve service for people with non-critical acute care needs

- Reduced waiting RTT
- Improved patient satisfaction
- Better value for money
- Increased Access

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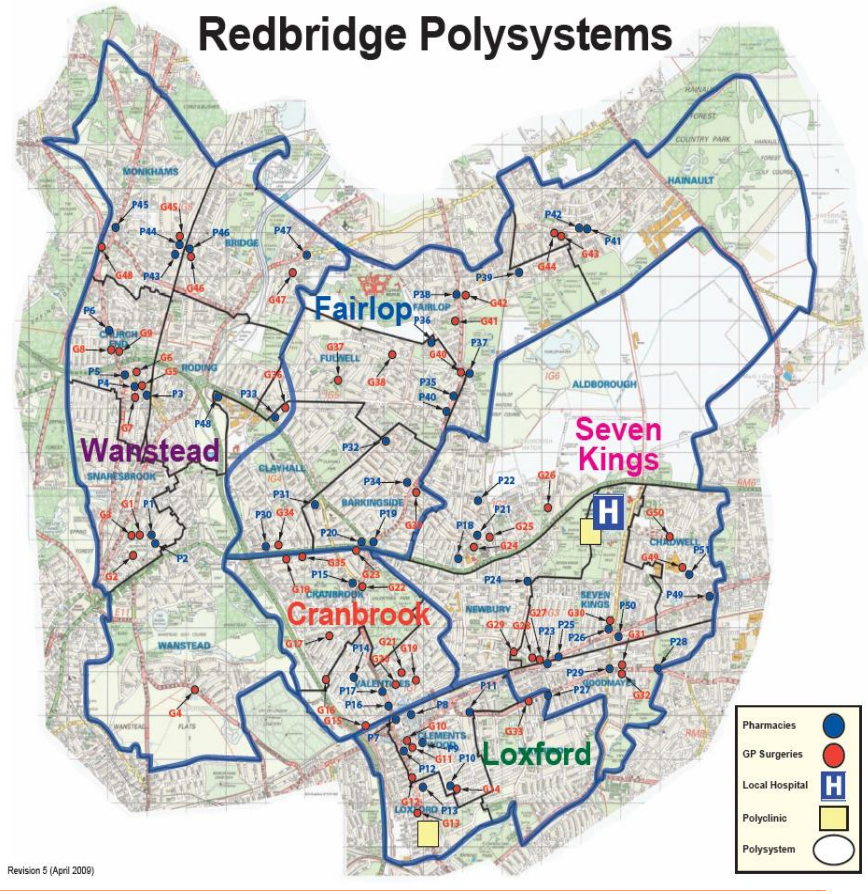
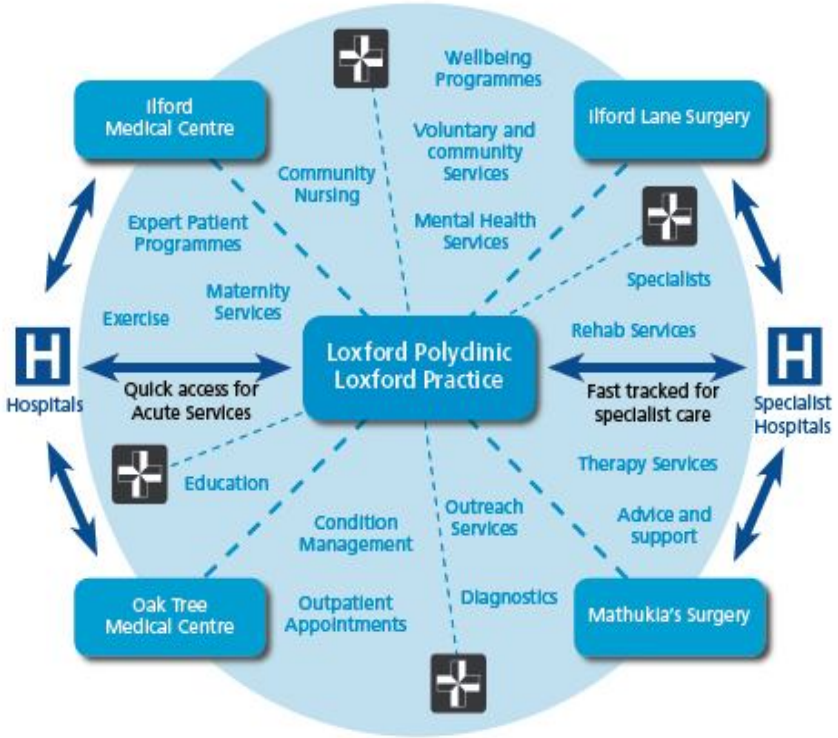
Everybody in Redbridge is already a member of a polysystem

5 established and will become the engines driving change at the local level – delivering local services that are clinically and cost effective.



Loxford Polysystem



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Incentives and Performance

Wanstead Polysystem PbR Spend November 2009

				Market Forces Factor (MFF) Included			MFF Excluded						
Polysystem	Practice Code	Practice Name	List Size	April - May	June	July	August	September	October		November		
				Variance	Variance	Variance	Variance	Variance	Variance		Budget	Variance	% Overspend
WANSTEAD	F86012	Rydal	10115	-£123,239	-£170,557	£23,683	£36,793	£16,837	£90,443		£7,659,087	£235,033	3
	F86013	The Broadway Surgery	5311	-£27,521	-£67,358	£45,494	£72,840	£43,305	£49,201		£3,454,065	£117,105	3
	F86020	Glebelands Practice	5080	£11,014	£6,323	£88,623	£154,013	£154,425	£130,644		£3,983,069	£225,591	6
	F86023	The Evergreen Practice	7474	-£229,514	-£353,927	-£207,020	-£184,742	-£261,439	-£316,665		£5,197,941	-£233,317	-4
	F86032	Wanstead Place Surgery	7225	-£103,881	-£171,880	-£17,011	£14,806	-£75,294	-£60,780		£5,310,941	£86,503	2
	F86053	The Shieling	1381	-£36,194	-£48,814	-£30,937	-£36,536	-£35,296	-£37,796		£1,291,666	£7,941	1
	F86064	The Elmhurst Practice	5089	-£95,107	-£180,651	-£111,435	-£90,130	-£159,621	-£242,551		£3,340,327	-£125,140	-4
	F86066	Southdene Surgery	6738	-£142,426	-£219,936	-£115,379	-£143,622	-£203,929	-£212,526		£4,688,679	-£84,273	-1
	F86641	The Shrubberies Medical Centre	3903	£41,480	£30,124	£57,620	£44,174	£17,957	£9,117		£2,405,190	-£26,544	-1
	F86658	The Siddique Practice	3080	-£25,605	-£90,230	-£30,272	-£32,145	-£61,867	-£54,093		£1,958,159	-£19,072	-1
	F86675	Roding Lane Surgery	2678	£58,404	£43,961	£72,504	£109,457	£97,885	£111,788		£1,783,759	£139,851	8
	F86680	Ferndale Surgery	1924	-£19,393	-£25,698	£609	£7,375	-£701	-£26,162		£1,296,265	£18,970	1
	F86691	Clayhall Clinic	5787	£305	-£92,451	-£5,418	£2,001	-£26,973	-£18,842		£4,206,275	£41,655	1
	F86731	Aldersbrook Medical Centre	3656	-£90,065	-£191,423	-£119,594	-£127,651	-£173,439	-£185,844		£2,439,367	-£143,669	-6
WANSTEAD Total			69441	-£781,742	-£1,522,517	-£348,533	-£173,367	-£668,150	-£754,066		£49,014,789	£260,634	1

Within Budget | Within 5% Overspend | Over 5% Overspend

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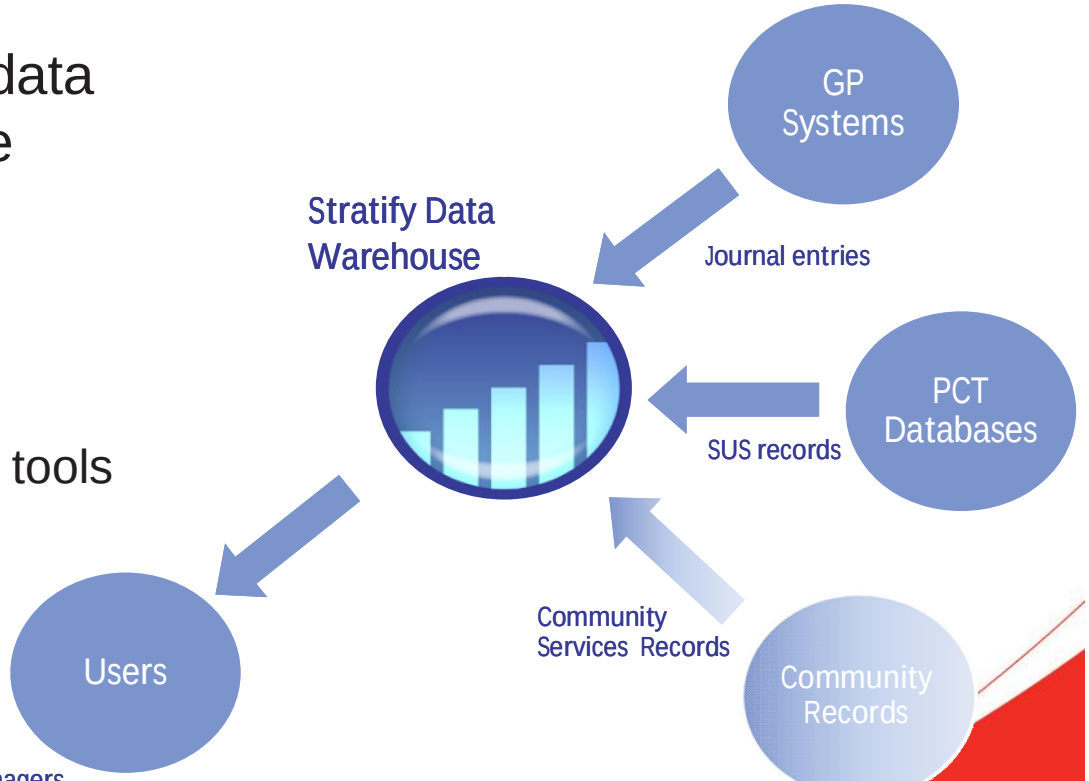
Underpinned by Aligned Data

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



- Practice Managers
- Polysystem Managers
- PCT Staff

www.health-analytics.co.uk

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Information Driving Change at all Levels

Long Term Conditions Matrix

help

Risk Percentile

%

Selected Risk Percentile Range 0% to 100% (show all)
no patients below, *129,753* within, and *none* above this range

The percentile contains 129,753 patients of whom 26,916 20.74
Condition as defined by the Combined Model.

Select Condition

Asthma Depression

Patient Care

Risk Percentile

%

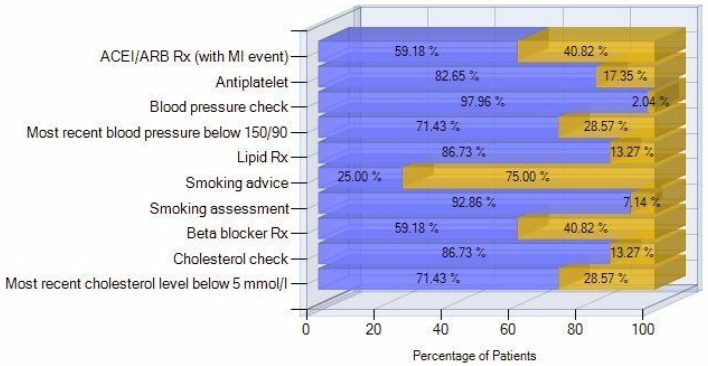
Selected Risk Percentile Range 0% to 100% (show all)
no patients below, *129,753* within, and *none* above this range help

Surgery

[redacted]

Asthma | CAD | CHF | COPD | Diabetes | Hypertension

Care Analysis for CAD



Patient Details

help

NHS Number: [redacted]

Episode List | Scoring | Timeline | Bar Chart

Inpatient Episodes

Show: Incident Primary Diagnosis Secondary Diagnoses

01 records

Spell #	Incident Date	Provider	Episode	Classification	Admission Method	Discharge Method
2918964	18/10/2006	RF4DG	1	Day case admission	Booked	Patient discharged on clinical advice

Outpatient Episodes

Show: Appointment Clinical

03 records

Attendance #	Date	Provider	Commissioner	Referral Source	Priority	Attended or DNA	1st Attendance
10695920	24/01/2006	RF4DG	5NA00	04	Routine	Attended on time or, if late, before the relevant CARE PROFESSIONAL was ready to see the PATIENT	Follow-up attendance face to face
10812844	28/04/2006	RF4DG	5NA00	03	Routine	Attended on time or, if late, before the relevant CARE PROFESSIONAL was ready to see the PATIENT	First attendance face to face
11033021	15/09/2006	RF4DG	5NA00	11	Routine	Attended on time or, if late, before the relevant CARE PROFESSIONAL was ready to see the PATIENT	Follow-up attendance face to face

A&E Episodes

Show: Episode Clinical

03 records

Attendance #	Arrival Date	Arrival	Disposal	Patient Group	Category
051020841	29/11/2005	Other	02	Other accident	First A&E attendance
051028501	02/12/2005	Other	05	Other accident	First A&E attendance
060020531	07/01/2006	Other	02	Other	First A&E attendance

GP Episodes

79 records

Surgery ID	Practice	Incident Date	Read Code	Value 1	Value 2	Item
1452	Y00090	21/05/2004	XaJQx	0	0	Other White background - ethnic category 2001 census
1452	Y00090	20/10/2004	2469.	150	90	O/E - Systolic BP reading

Click chart to drill down to the patient list.

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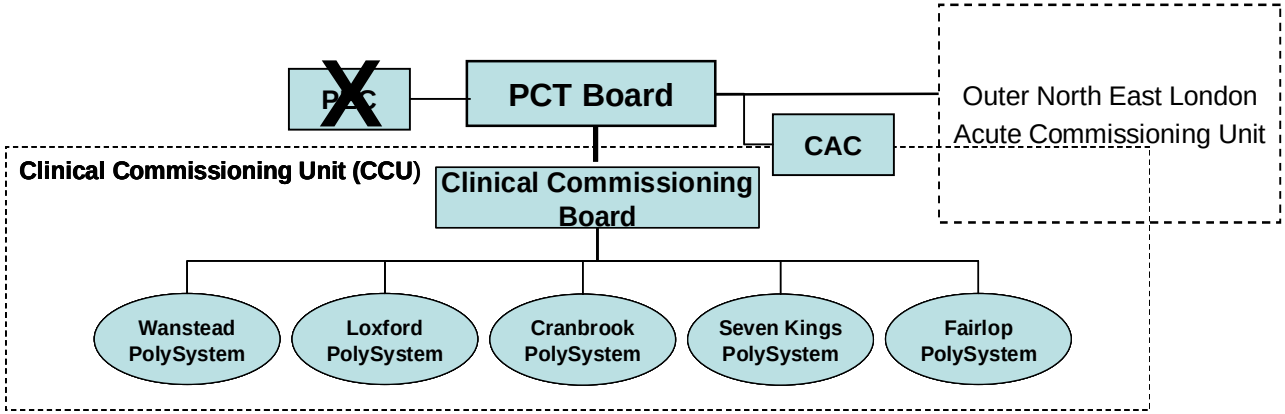
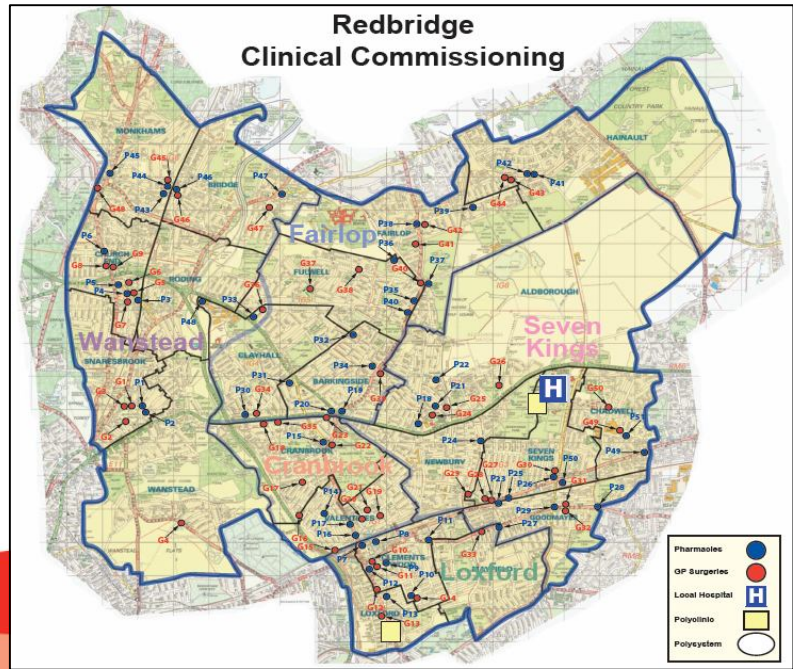
Polysystem Clinical Commissioning - Governance



- Boroughwide Clinical Commissioning Board
- Clinical Director team accounts to PCT Board
- Accountability for Polysystem delivery
- Manage budget and incentive schemes
- PBC Partner relationship with PCT
- Underpinned by Community Engagement Panels
- Social Care involvement at all levels



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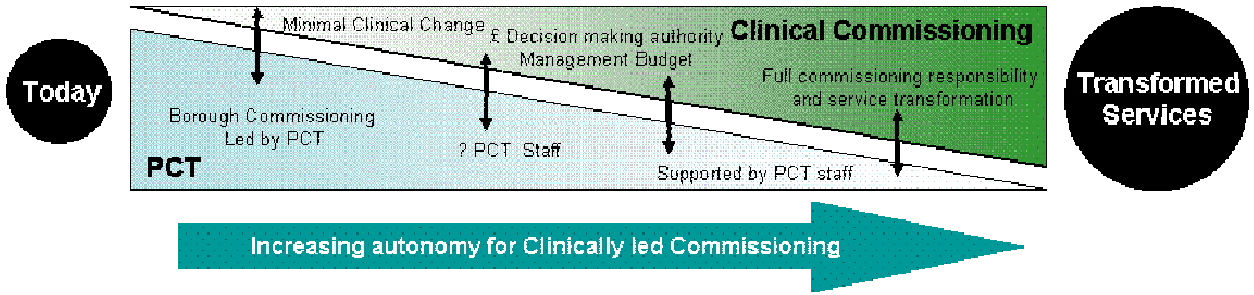
Integrating Design & Delivery

- Polysystems are the 'engine' which drives local change to meet the wider health and healthcare needs of its community.
- Polysystems are accountability for the delivery of high quality and productive services.
- Polysystems are held accountable for delivery and in return will be resourced and supported appropriately to enable change earning increased autonomy overtime.



"Polysystems will only achieve their full potential if they bring together primary, community and secondary care clinicians together with social care and the consumer to innovate by designing and delivering care models that enable system improvement."

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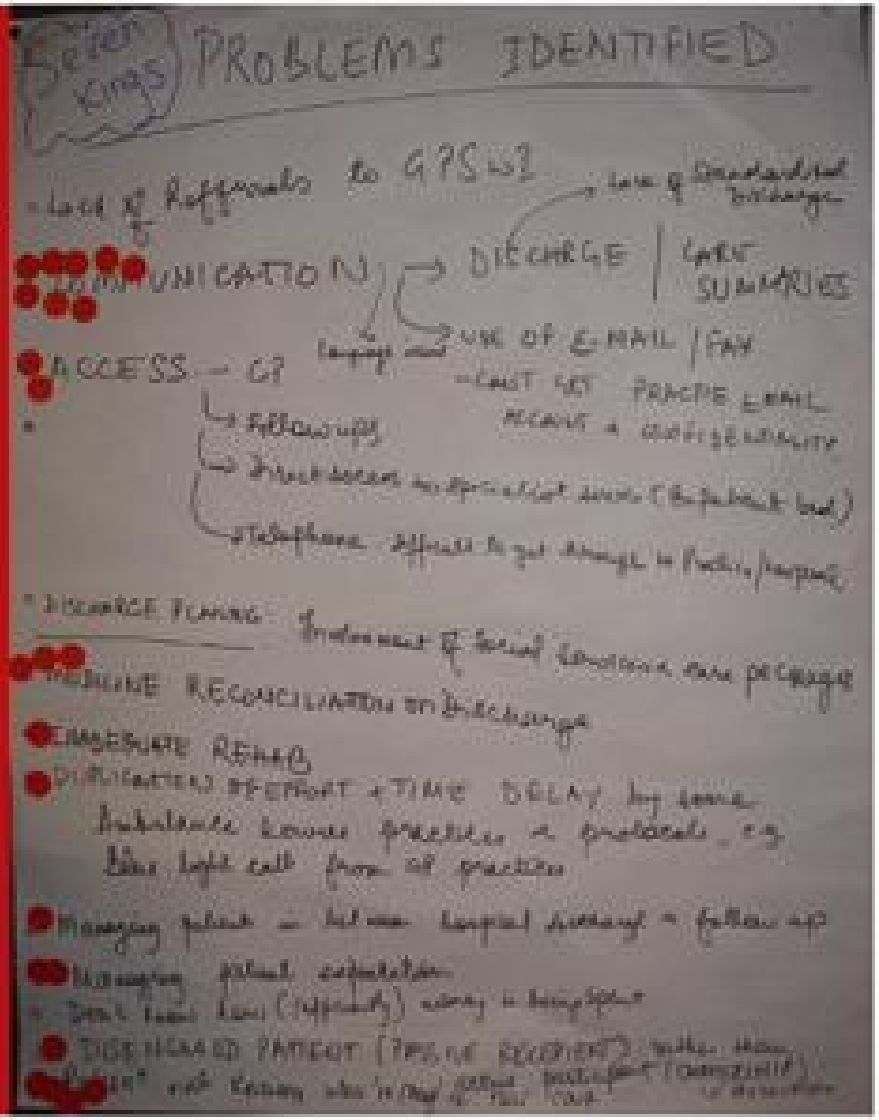
Some problems exist…



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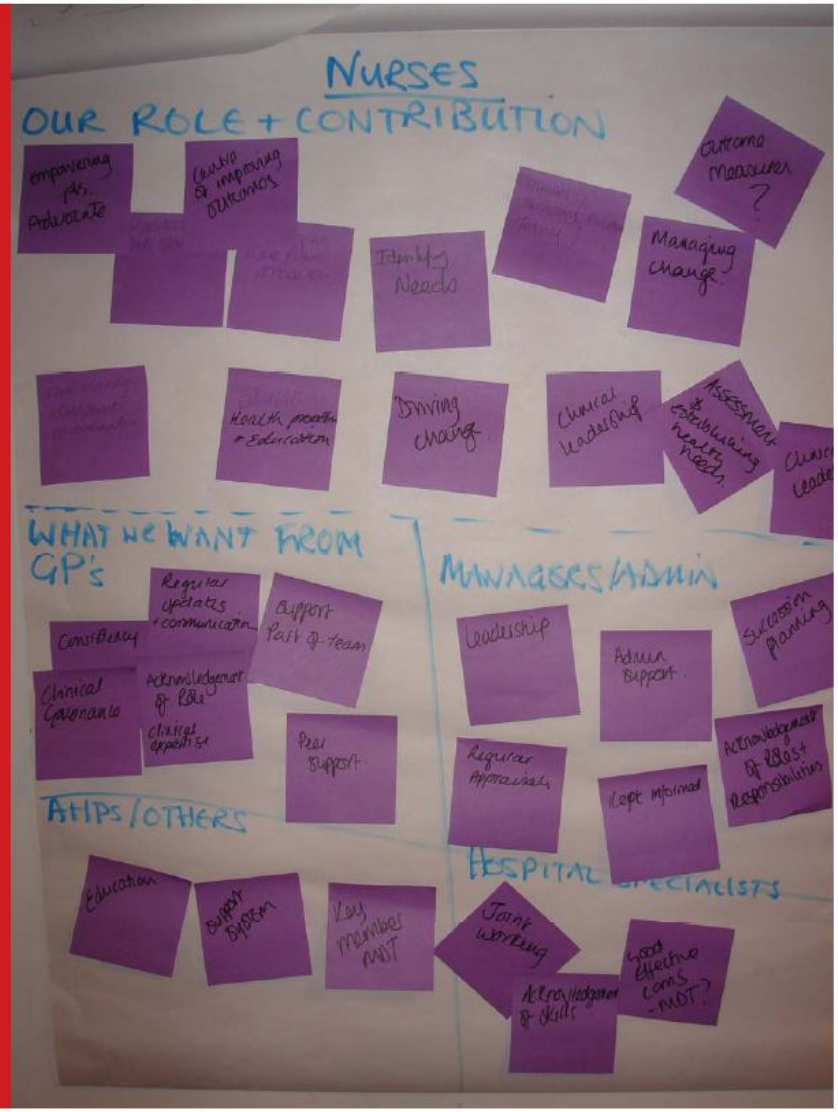
And prioritized them…

IDEA	F	C	E	T
Discharge Summary within 24 hrs / standardised	3	3	2	8
Create standardised Care Plan	3	3	[illegible]	7
GP follow up in 5 days / Plan	3	3	2	8
Cardiac rehab for all high risk patients	1	3	2	6
3 month follow by primary care / CHD team	3	3	2	8
Re-configure Red HF Nurse → CHD Nurse Service	2	3	2	7
Integrated IT access / access!	1	3	3	7
24/7 Helpline for Pts	1	3	2	6
Dietician Appt for every Pt with 1 month [illegible]	1	2	2	5
Standardised education / [illegible] Pack	3	3	1	7
Patient held records (Dept)	2	2	1	5
Cardiac counselling for all PTS	1	3	2	6

We talked about our roles and what we want from others…



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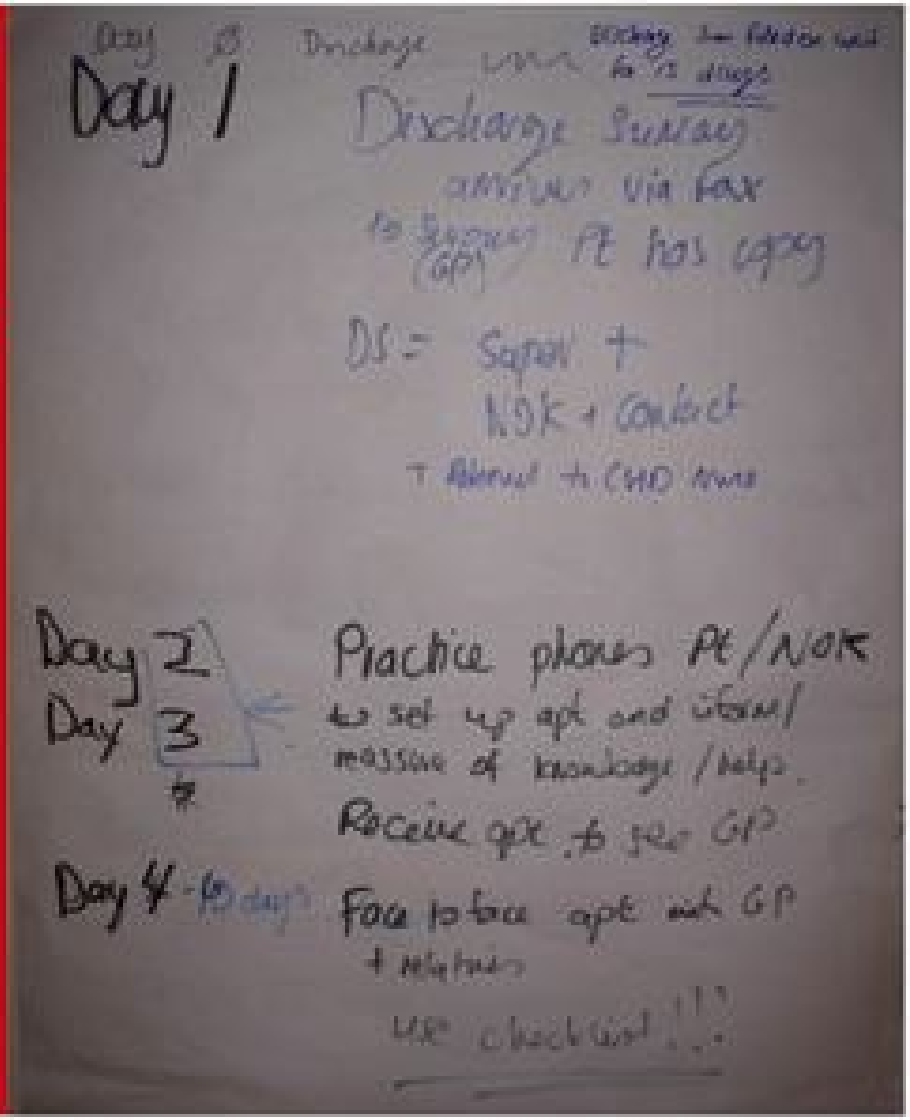
Redesigned CHD Pathway from Hospital Discharge to Day 14…



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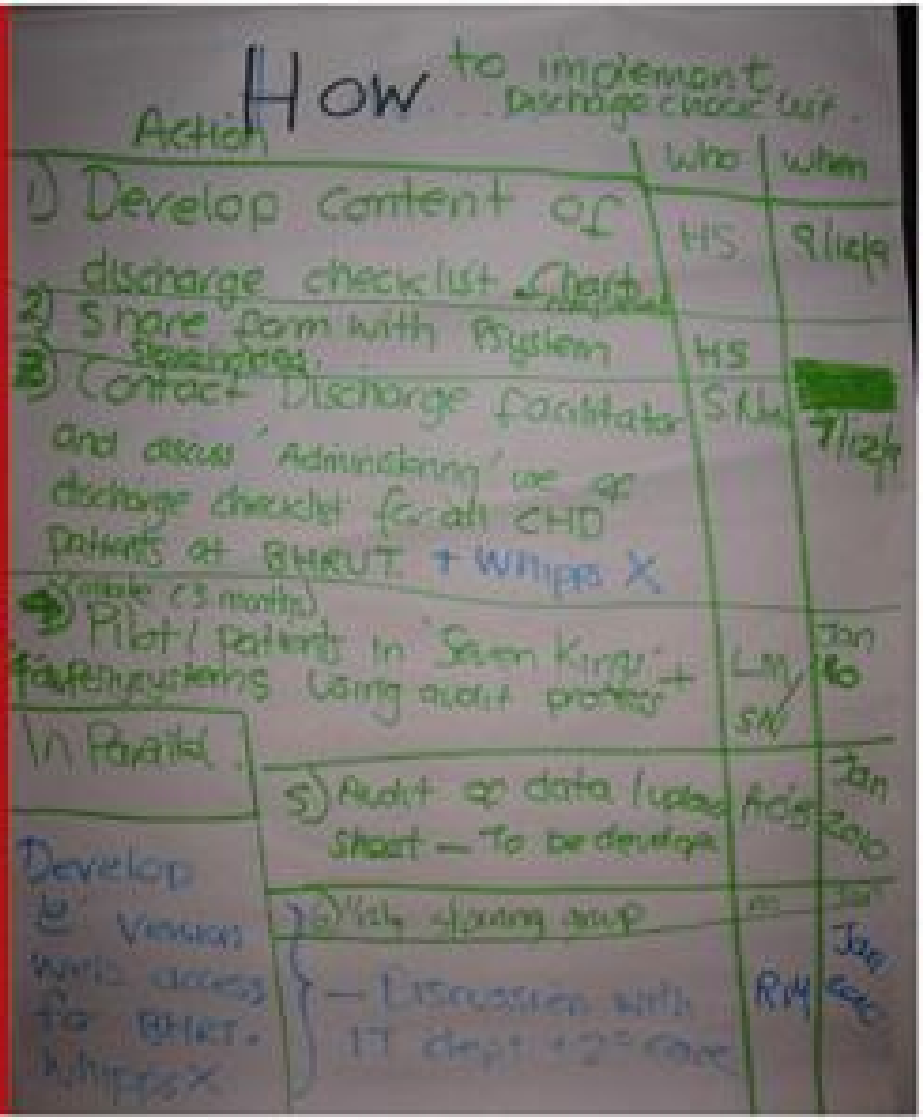
Discharge checklist preliminary implementation plan…



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And so what?

- Whipps Cross fax discharge summaries to practices within 24 hours of discharge
- GP Practices are required to contact the patient within 3 days of discharge
- Patients have a face to face appointment within 10 days at which time the clinician will use a standardised checklist to review patients.
- Clinicians have access to data on a patients treatment, diagnostic results and medication changes via email.

….currently getting it right 50% of the time after 2 months

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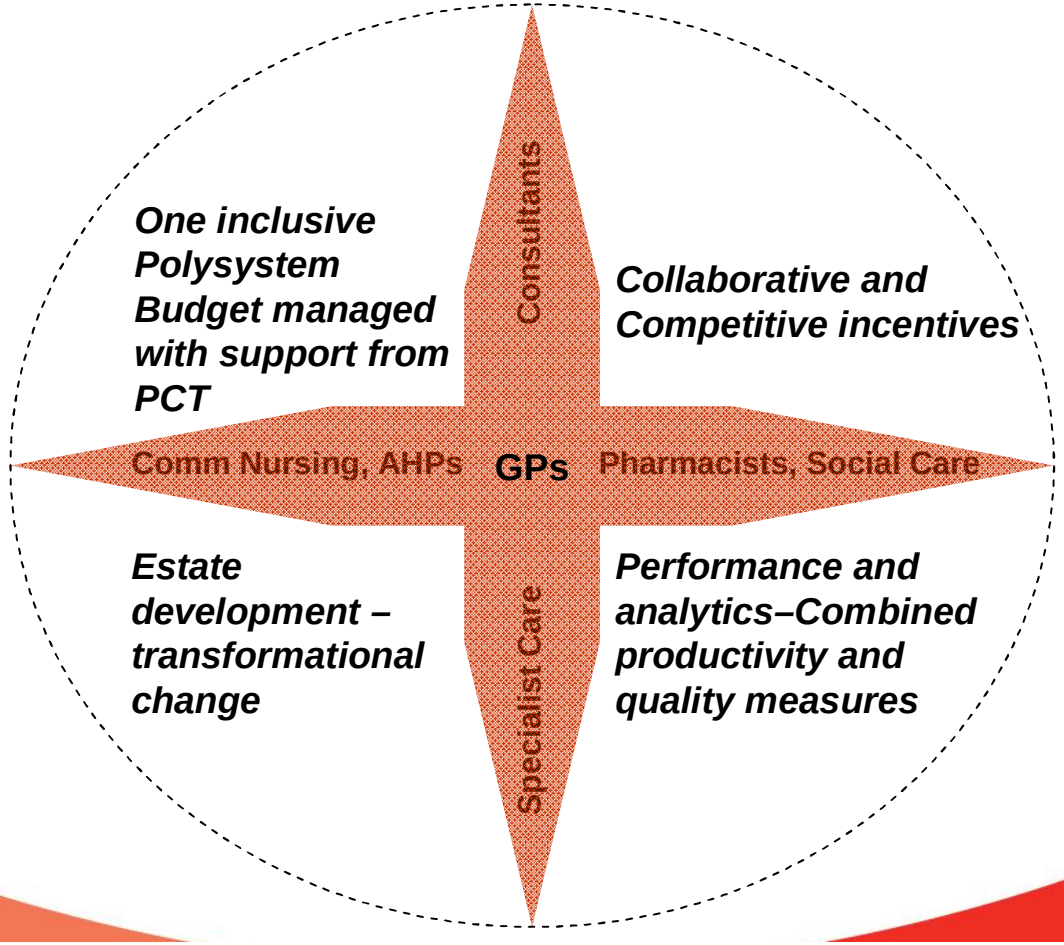
Delivering Polysystems…

...through People, Processes and Technology



Not vertical or horizontal ……Clinical Integration