Report to:	Health and Wellbeing Board
Relevant Officer:	Andy Roach, Blackpool Clinical Commissioning Group
Relevant Cabinet Member	Councillor Eddie Collett, Cabinet Member for Public Health
Date of Meeting:	3 rd December 2014

DEVELOPMENT OF NEW MODELS OF CARE- EXTENSIVIST

1.0 Purpose of the report:

- 1.1 To provide an update on the development and progress against plans to deliver New Models of Care.
- 1.2 The attached clinical design document is a summary of the clinical blueprint document that was developed by the Extensivist Clinical Redesign Team. Where possible, the document uses pathway-based flow diagrams to describe the processes/tasks that will be undertaken by the Extensivist team in relation to core activities and condition-specific care programmes.
- 1.3 This document will be used to inform the creation of a Service Specification and a Full Business Case.

2.0 Recommendation(s):

2.1 To note progress to date on the development of new models of care.

3.0 Reasons for recommendation(s):

3.1 The delivery of the Extensivist Services is a key element of the Better Care Fund Plans. The Board has a key role in the delivery of the Better Care Fund Plans.

3.2a	Is the recommendation contrary to a plan or strategy adopted or	No
	approved by the Council?	

3.2b Is the recommendation in accordance with the Council's approved Yes budget?

3.3 Other alternative options to be considered:

None, the report is by way of a progress update.

4.0 Council Priority:

- 4.1 The relevant Council Priorities are:
 - Safeguard and protect the most vulnerable
 - Improve health and well-being especially for the most disadvantaged
 - Deliver quality services through a professional, well-rewarded and motivated workforce

5.0 Background Information

- 5.1 The Extensivist Service will provide pro-active and co-ordinated care wrapped around the patient with a single point of access.
- 5.2 The service will be fundamentally orientated toward supporting patients to have the confidence and knowledge to manage their own conditions.
- 5.3 Once the patient has consented to be part of the service, full clinical responsibility will pass form the GP to the Extensivist.
- 5.4 The Extensivist service is provided by a team of clinicians and non-clinicians skilled in supporting patients with complex needs and having clear accountability on behalf of the system for providing and co-ordinating this care.
- 5.5 Regular contact with a health coach (recruited for the individual's emotional intelligence) and effective use of telehealth approaches will be some of the elements that will make the service feel very different.
- 5.6 It is expected that this approach will result in significantly improved patient experience, with patients being empowered to manage their own health and having an increased sense of wellbeing as a result.
- 5.7 For the system this should also result in patients having fewer unnecessary outpatient consultants and investigations, and fewer planned and unplanned hospital admissions.
- 5.8 Phase 1 of implementation will be comprised of two services, at Lytham and Moor Park primary care centres, each serving between 500-600 patients.

5.9	Does the information submitted include any exempt information?	No
5.10	List of Appendices:	
	Appendix 7a: Fylde Coast Extensivist Service Summary	
6.0	Legal considerations:	
6.1	None	
7.0	Human Resources considerations:	
7.1	None	
8.0	Equalities considerations:	
8.1	None	
9.0	Financial considerations:	
9.1	None	
10.0	Risk management considerations:	
10.1	None	
11.0	Ethical considerations:	
11.1	None	
12.0	Internal/ External Consultation undertaken:	
12.0		
12.1	None	
13.0	Background papers:	
13.1	None	