

Skipton House
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Dear Andy,

Thank you for hosting the New Care Models team's visit to Fylde Coast. It was a pleasure to begin building a relationship with your Vanguard and to hear about your plans to develop a multispecialty community provider in more detail. Thank you for providing Richard Emmess as your local citizen representative, he provided an excellent contribution to the panel over the two days. Please also pass on our thanks to everyone who helped make the two days so informative and enjoyable.

The purpose of the site visit was for the visiting team to gain a better understanding of your vision, the care model you intend to develop, and determine with you how the New Care Models programme can best support you to achieve your ambitions.

We found that the two days provided us with a clear view on the progress you have already made in developing a vision for the extensivist and enhanced primary care model for Fylde Coast. We were impressed by your plans to scale primary care with high quality evidenced based practice, pulling in out of hospital care and integrating this with services including; local voluntary sector organizations, social services and the police. We were reassured that this was motivated by a commitment from a variety of organisations across Fylde Coast and already supported by an established project team.

During the visit, we welcomed Andrew's description of your extensive care model. It was impressive that you had already come together to develop a strategy to better manage the care of the patients with at least two complex conditions. We look forward to hearing more about the success of Litham and North Shore when they go live in June. We would like to work with you as you replicate the model in your local system, as a mechanism to support wider replicability in the New Care Models programme in the future.

The strategy to support patients through coordinated and integrated health and social care when they had one complex condition, through the enhanced primary care offer was also discussed. We recognized that you are approaching this in different ways, reflective of the different styles of working in NHS Fylde and Wyre CCG and NHS Blackpool CCG. We look forward to, working with you to shape primary care so that it becomes recognized as a primary care service centered on the patient as opposed to a GP appointment service.

We gave you feedback that the extensivist model appeared more developed than the enhanced primary care models, which you acknowledged. We agreed that you would think through the further development of this model and the flow between the two models to ensure that patients were supported in the transition through different phases of care.

Feedback by domain

During the site visit, we discussed the development of specific components of your model and associated support you might find beneficial through four workshops. The outcomes of our discussions were as follows.

Finance, contracting and pricing

We discussed the projected costs in relation to the delivery of your Vanguard proposal including potential double running costs, which you described are due to your need to scale at pace. We agreed to share with you the details required for the financial bid to the transformation fund once the details have been finalised. You indicated you were preparing a business case for your own purposes that you would share with us. During the discussions, you commented on having modelled through some predictive data that you would also share with us. We also discussed the possibility of moving towards a population based contract and we offered support to you in developing this further.

Information technology and information governance

During the workshop, you described your need for a shared electronic record to operate across health, social care, police and voluntary and 3rd sector partners. It was impressive that you had started to achieve shared records through your GPs, community provider and soon your mental health provider using EMIS. We discussed however, that these were multiple versions of EMIS so data sharing is not seamless, and we agreed to look into how we could support this. We recognized that although this was the current route to data sharing, your requirement was for true interoperability and open APIs to enable sharing with any relevant partner. We committed to looking at this nationally across health and social care. We reflected on additional information governance challenges that the Vanguard partnership would bring about and agreed that there was a need to understand nationally what a good system wide information governance model looks like for integrated care.

During the visit we were also impressed by the work you were conducting with Lancaster University and IBM Watson on decision support to aid clinical delivery. We also discussed the evaluation you were conducting on the use of telehealth for the extensivist model and look forward to working with you on your findings from this report towards the end of May. It was recognized this would need to involve patient access to records to empower self-care and greater inclusion, and we offered to support you in this area.

Measurement and evaluation

We were really pleased to learn you had started to develop your logic model for the extensivist model with Method Analytics and Optimity Matrix and we look forward to seeing the fully developed model for the wider programme including enhanced primary care. It was also positive to see the development of metrics around patient evaluation, quality and safety. We discussed your need to develop further metrics on workforce and activity and offered you support to develop these.

During the workshop, you expressed an interest in playing a part in developing the national metrics to support the programme and we look forward to working with you on this, and then providing you with an ariel view of the national programme as discussed. We understand your access to data is limited and information governance issues need to be resolved, this is not uncommon in the programme and we will develop a workshop to bring sites together on this going forward. There was also a discussion on the need to develop quality based metrics, focusing around transformational and cultural change and we will also support you with this.

Workforce

During the workshop, it was good to see that you had a shared strategic vision relating to your service but recognized this hasn't yet transcended through all organizational levels. We

discussed how the cultural transformation, getting teams to work differently and together would be one of your biggest challenges and offered to provide support here. We look forward to working with you to instill a sense of hope and confidence in your staff when developing the new roles in line with the care model you described.

Whilst you did not yet have a whole health economy workforce plan or education and training strategy, it was positive that you were willing to develop one. We offered support in this area, including the sharing of best practice. It was clear you had a strong grip on workforce detail, including within primary care which enabled you to develop a stable workforce with investment in education and training. It was good to hear examples of this including your engagement in primary care with the HENW Workforce Transformation team and bespoke preceptor-ship programme, which had the potential for national development. It was a positive next step to agree the development of a dedicated sub-group on workforce in your MCP governance structure with support from HENW.

Leadership and change

We had an interesting discussion about the change methodology that you were using and it was clear that you were experienced in using a variety of traditional methods. You reflected on the need to bring the workforce together to build effective integrated teams and committed to develop your thinking about how this would progress. We discussed the use of social movement methodologies to support further sustained engagement with your workforce and offered support here if needed.

Next steps

We agreed that you would take some time to reflect on our visit before expanding on your initial Vanguard proposal, including the following areas:

1. Further development of your enhanced primary care model and the patient pathway from and to this model. We agreed this would include further detail around the scope of your vanguard and your plans for roll out. This would include a particular focus on what you are planning to achieve in year one.
2. We agreed that you would give further thought to how you plan to engage with the voluntary and third sector, and your community as a whole. This encompassed our discussions around a broader primary care service, rather than a GP focussed service.
3. An understanding about how your programme support is being developed to support the Vanguard process. This would include further clarification on your leadership team and core decision makers.
4. Crucially, as you develop the above, your early thoughts about the support you require from the New Care Models Programme to help you achieve your goals, including, but not limited to, the areas we discussed in break-out sessions as outlined above.
5. To share with us a letter that details how you wish to utilise the £150,000 programme support in order to provide you with headroom to develop your Vanguard.

In each of these areas it would be helpful for you to share with us

- The progress you have made so far in developing your model of care
- Any challenges you face as you look to further progress your work
- The nature of the support you require to overcome these challenges

We would be grateful if you could set out some of the above in writing, and share that document with us by **23 May 2015**. We will then consolidate this with the feedback from other vanguard sites before getting back in touch with you to co-design a bespoke support package.

Once again, please accept our thanks for welcoming the New Care Models team and colleagues to Fylde Coast. Your mutual commitment to improve the care and support for local people was hugely energizing and embodies the spirit of the Vanguard programme. I know I speak on behalf of colleagues from the team regionally and nationally in saying that we are very much looking forward to working together in developing and delivering the new care model.

Yours sincerely,

Louise Watson
MCP Care Model Lead
New Care Models Team