

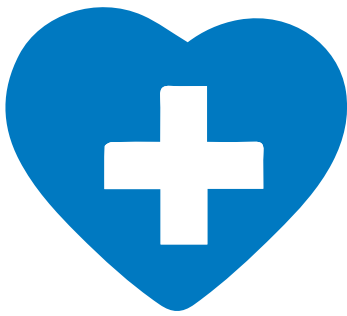
# Primary medical care commissioning strategy

2016 to 2021



# Introduction

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## We want to create a sustainable health and care economy that supports you to be well, healthy and independent.

To do this, we are developing a new primary medical care commissioning strategy which looks at the services delivered by GP practices in Bradford.

The strategy will set out what we need to do to improve quality, reduce variability in care and make sure that our services are sustainable for the future.

The primary medical care commissioning strategy is all about getting the best outcomes for you, our patients. We would like patients and the public to let us know:

**“what are your three main concerns regarding primary medical care (GP services) and have we addressed them in our strategy?”**

## Why this strategy matters

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The majority of care is delivered by primary medical care services – they underpin our health and care system. In Bradford, we need to change our current system so that it meets the needs of our population.

To do this, we need to look at new ways of working and how we can innovate so primary medical care is sustainable and effective for the future.

There are three big challenges that primary care medical services in Bradford are facing;



1. increasing levels of demand, and more patients with multiple complex conditions,



2. meeting the expectations of seven day services alongside developing the workforce to match,



3. significant financial pressure alongside the need to adapt and change the way services are delivered.



# What the primary medical care commissioning strategy will do

Our primary medical care commissioning strategy is based on the following vision:

**“to commission and deliver excellent primary medical care for everyone in Bradford”**

We hope to deliver our vision by focusing on the following areas of improvement:



- **improving access** – making sure all patients have access to primary medical care services,



- **improving quality** – making sure all patients get consistent, high quality and safe care,



- **building the workforce** – creating a highly skilled, integrated team of health professionals,



- **self-care and prevention** – empowering and supporting all patients to take ownership and control of their health and wellbeing,



- **collaboration** – working closely across practices, with patients and our partners,



- **estates, finance and contracting** – making sure buildings and the services we commission are equipped to deliver modern, future-proof services.

By focusing on these key areas for improvement, by 2021, we aim to achieve the following outcome:

**“to deliver a sustainable model of primary medical care which is fully integrated within the wider health and care system and ensures people in Bradford have timely access to high quality, safe services.”**

# The key areas for improvement



## 1. Improving access

**Improving access is all about making sure that everyone in Bradford has equal access to primary medical care services. To enable this, we are looking at improving access to services (core, out of hours and extended hours) and improving the use of digital technology.**

We will be:

- encouraging practices to work together to improve access to services,
- increasing the number of practices offering online services including appointment booking and repeat prescription ordering,
- commissioning 'virtual primary medical care' which will support email and video consultations,
- making sure all patients have access to the same services – even if they are not offered by their usual GP practice,
- using technology to support patients to manage their own condition and stay independent,
- working with providers to improve access to GP out of hours services in the short term and building a sustainable model for the future,
- enabling patients to be signposted to the right service at the right time by ensuring providers maintain the directory of services (DoS).



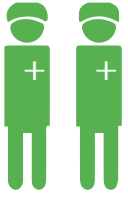
## 2. Improving quality

**Improving quality is about ensuring all patients receive consistent, high quality, safe care, no matter which primary medical care service they use. We will be looking at the management of patients with long term conditions, continuity and high quality care and making sure mental health is treated with the same importance as physical health.**

We will be:

- making sure all patients have a personalised care plan,
- commissioning pathways of care that are system-wide, support early diagnosis and self-care,
- ensuring mental health and physical health and treated with the same importance by commissioning services that treat patients as a 'whole-person',
- commissioning services which focus on prevention and are outcomes-based, in line with clinical guidelines and best practice,
- commissioning evidence based support tools for health professionals to use which provide consistent, high quality care,
- using our quality work group to develop plans against the areas with the greatest need / most variation.



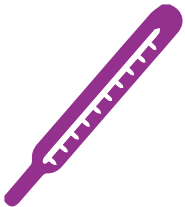


### 3. Workforce

**In Bradford we need to develop a sustainable, highly skilled, motivated workforce which is integrated with the rest of the health and care system. We will be looking at how we can evolve the primary medical care workforce, attract people to the profession and encourage them to work in our city.**

We will be:

- planning our workforce needs around the current and future needs of the population,
- taking a long term view to encourage people, especially young people, to train and work as a health professional,
- developing the current workforce to work across organisational boundaries,
- upskilling the existing workforce through training and development sessions, including the use of digital technology to create efficiencies,
- promoting Bradford as a great place to work and continue to invest in recruitment programmes,
- encouraging patients to self-care and reduce their reliance on health professionals,
- commissioning services to provide people with other routes into care other than their GP (removing the role of GPs as gatekeepers)



### 4. Self-care and prevention

**We want to empower and support patients to take control of their own health and wellbeing. This could be by maintaining general health and wellbeing through making lifestyle changes or knowing how to treat minor ailments at home with a first aid kit. Adopting a healthy lifestyle can help prevent the onset of more serious conditions and give people the confidence and skills to live well.**

We will be:

- providing people in Bradford with consistent messages about self-care and prevention,
- giving our workforce the tools they need to promote self-care and behaviour changes amongst patients,
- making sure that self-care is core part of the care pathway,
- utilising the self-care and prevention work that has been a part of the Bradford's Healthy Hearts and Bradford Beating Diabetes programmes,
- encouraging the workforce to be advocates for self-care and wellbeing,
- supporting a system-wide approach to prevention,
- promoting of preventative screening programmes and reviewing immunisation programmes.



## 5. Collaborative working

**We need to be able to deliver primary medical care at scale. Therefore, we will be working with our GP member practices to develop a new model of care that allows services to share functions, rather than work individually. As part of this we will be looking at how we can use our assets better and co-produce services with patients.**

We will be:

- working with our stakeholders and GP practices to identify the new model of care for primary medical care services and the relevant processes to deliver change at scale,
- increasing our work with patients in designing services and decision making,
- if possible, when commissioning, encourage providers to operate as a network of practices,
- ensuring that primary medical care services underpin our move towards an accountable care system (a system which spans health and social care to improve health outcomes. provide positive patient experience and make the most of funding available),
- working with the local authority and public health to establish formal links with education so that health education starts at early age.



## 6. Estates, finance and contracting

**To support the changes outlined in the primary medical care commissioning strategy, we need to ensure that we have a solid infrastructure. This involves making sure that buildings are fit for purpose and multi-use, commissioning contracts are based on outcomes and that contracts are fair.**

We will be:

- reviewing primary care buildings that are out of date or underused and make sure we are making the most out of existing estates,
- develop new contracting approaches which support the integration of services,
- making sure we commission services based on outcomes so that you get high quality services.



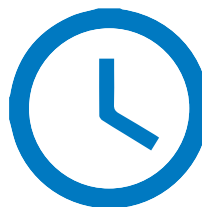
# What you have already told us about your experiences of primary medical care

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We want to make primary medical care services work better for you. In developing this strategy, we have taken into consideration the feedback that you have given us through our previous engagement work. The key themes you tell us are:



Keep good face to face access and offer telephone appointments



Extended opening hours



Ability to book appointments online



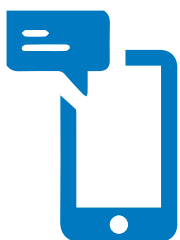
Better use of technology e.g. Skype and virtual surgery



More flexible appointment systems



Access to education and information about managing your own conditions



Increase the use of text/telephone reminders to reduce the number of appointments that are 'do not attend' (DNAs)



Consistency for people with long term conditions to see the same person



Clear concise information is required about how practice appointment systems work



# How this strategy fits with other programmes

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The primary medical care commissioning strategy will form part of our move to become an accountable care system by 2020/21. The accountable care system aims to improve population health outcomes, experiences of care and make sure there is value for every pound spent on the NHS.

Our strategy is also a key part of the work we are doing as part of our 'out of hospital' programme. This programme is all about making sure you get the right care, in the right place at the right time – reducing unnecessary stays in hospital.

We are building on the themes outlined by NHS England in the *Five Year Forward View* (October 2016) which set out plans for transformation.

Key themes outlined in this were around patient experience, providing care closer to home and moving away from hospital based care. Our primary medical care commissioning strategy has also been built on the *General Practice Forward View* (April 2016) which looks at five key pressures on general practice nationally; investment, workforce, workload, practice infrastructure and care redesign.

We have taken the recommendations and key themes outlined in the *Five Year Forward View* and the *General Practice Forward View* and applied them to what primary care looks like in Bradford.

## How to give your views

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online form: <http://www.bradfordcityccg.nhs.uk/bradford-city-ccg/get-involved-/give-us-your-views/>



email: [consultation@bradford.nhs.uk](mailto:consultation@bradford.nhs.uk)



post: Primary medical care strategy engagement, Freepost RTEK-UHKG-UBEK, Douglas Mill, Bowling Old Lane, Bradford, BD5 7JR



attending the drop in session: 8th September, 3pm to 4pm, Carlisle Business Centre, Carlisle Road, Bradford, BD8 8BD

**The closing date for comments is 14 October 2016.**

