



*Halton Clinical Commissioning Group*

# **Developing a strategy for general practice services in Halton**

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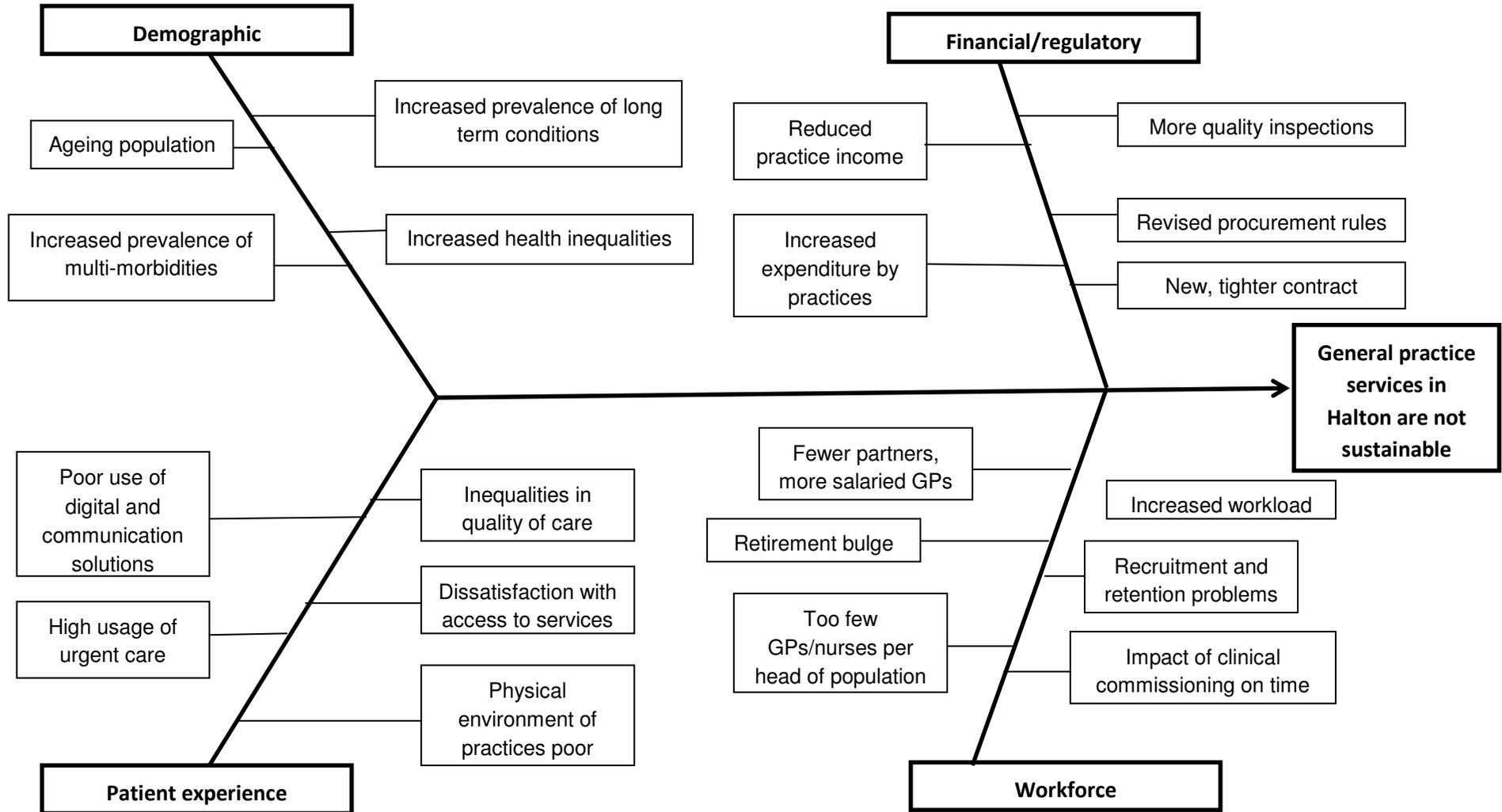
# Overview of the current state (1)

- NHS Halton CCG is a membership organisation formed from the 17 general practices in the borough.
- NHS Halton CCG is responsible for the commissioning of the majority of healthcare services for the borough.
- NHS England is responsible for commissioning general practice services in the borough.
- Practices are simultaneously commissioners and providers.

# Overview of the current state (2)

- General practice has been the cornerstone of primary care in the NHS in England since 1948.
- Basic delivery model has evolved over time but not radically changed.
- Seismic shifts and environmental pressures in health and social care.
- General practice under pressure to change.
- NHS Halton CCG and NHS England are discussing the development of formalised co-commissioning arrangements for general practice.
- Strong sustainable general practice is needed in Halton to support commissioning *and* service provision.
- Needs a co-ordinated and engaged approach to deliver this, hence the development of strategy.

# Root Cause Analysis



# What is the problem?

*The problem is that general practice services in Halton are not sustainable.*

# What is the objective?

*By January 2015 to have developed and agreed a strategy to deliver sustainable general practice services in Halton.*

# **What does good general practice deliver?**

- Proactive, co-ordinated care.
- Holistic, person-centred care.
- Fast, responsive access to care.
- Health-promoting care.
- Consistently high-quality care.

# What does NHS England Commissioning want to see?

- General practice operating at *greater scale*.
- Preserve *relationship continuity*.
- Heart of a wider system of *integrated out-of-hospital care*.
- *Shift of resources* from acute to out-of-hospital care.

# Themes for transformation in Halton

- ***Improved access and resilience*** – extended hours and responsive care.
- ***Integrated care*** – care coordinators, multi-professional integrated community team, community hospital/virtual ward/intermediate care.
- ***New services in the community*** – advanced skills, community diagnostic services, enhanced access to care professionals and therapists, access to specialist advice, patient (and family) support and education.
- ***Community development*** – collaboration on asset based approaches to improving health and wellbeing.
- ***Quality improvement*** – improving patient experience, reducing variation, peer to peer challenge and increased service improvement capacity.
- ***Enabling work streams*** – establishing robust governance arrangements with NHS England (including contracting and performance), reviewing the use of estate (with NHS England and NHS Property Services), embracing technology and workforce planning (with Health Education North West).

# Benefits of transformation

- Better outcomes for patients.
- Better partnerships.
- Better value.
- Better for the workforce.

# Approach and rationale

- Systemic and systematic, leading *and* delivering a change programme.
- Create a climate for change.
- Agreeing a collective vision of what “good looks like” before exploring solutions.
- Involving and engaging as many people as possible, wide public engagement.
- NHS England/NHS Halton CCG setting the commissioning challenge.
- General practice shaping the response.
- Using NHS Improving Quality as ‘honest broker’ and NHS Change Model to build solutions.
- Burning ambition over burning platform.

Questions?