

BHR Integrated Care Partnership update

Alison Blair, Director of Transition - Barking and Dagenham, Havering and Redbridge

Barking and Dagenham Health Scrutiny Committee

3 September 2019



East London Health and Care Partnership (ELHCP)



Councils

Local councils commission social care services such as sexual health, drug and alcohol, and some mental health services, and residential care homes.

NHS Clinical Commissioning Groups (CCGs)

Plan and buy health services for the residents in their borough: from cancer care to mental health; hospital operations to prescriptions.

Councils

East London Health and Care Partnership

CCGs

Providers

These organisations deliver health services such as GP practices, hospitals, mental health, and community services. Providing inpatient, outpatient, emergency and planned services, mental health and community services, in hospitals, clinics and people's homes.

Together these

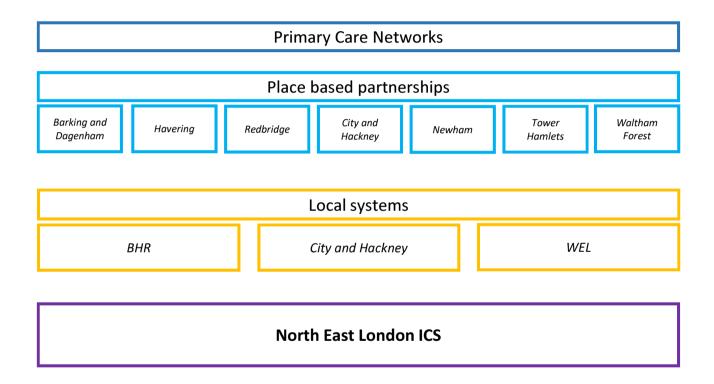
organisations plan and coordinate health and social care across north east London

Providers

East London Health and Care Partnership (ELHCP).

North East London Integrated Care System (ICS)





Source: BHR Accountable Care Strategic Outline Case, November 2017

To accelerate improved health and wellbeing outcomes for the people of Barking and Dagenham, Havering and Redbridge and deliver sustainable provision of high quality health and wellbeing services.



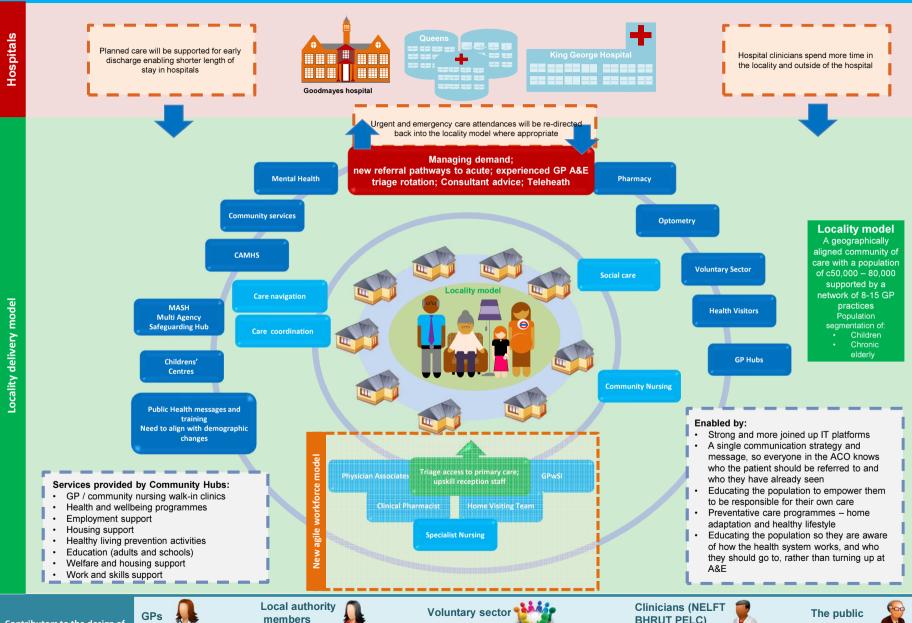
Barking and Dagenham, Havering and Redbridge Integrated Care Partnership statement of purpose

Integrated culture

- The ICPB has agreed a set of values and principles (see below)
- The ICPB recognises there is a lot more work to be done to engage with staff and is exploring how to take this forward with comms leads from each respective ICP organisation.

Principles Values We work in partnership and To sign up to our joint vision, putting the patient and public at demonstrate respect for all the centre of our work professional perspectives To put quality and safety at the We aim for agreement wherever heart of everything we do possible and stick to it To work together to deliver the vision, not undermine each other We aim for honest closure where we cannot agree To lead, not blame To look for answers not give excuses We speak well of each other We involve each other as early as possible We try our hardest to work on a 'no surprises' basis When we collectively give authority to team members to act, we let them deliver

Delivery model



Contributors to the design of the locality model:







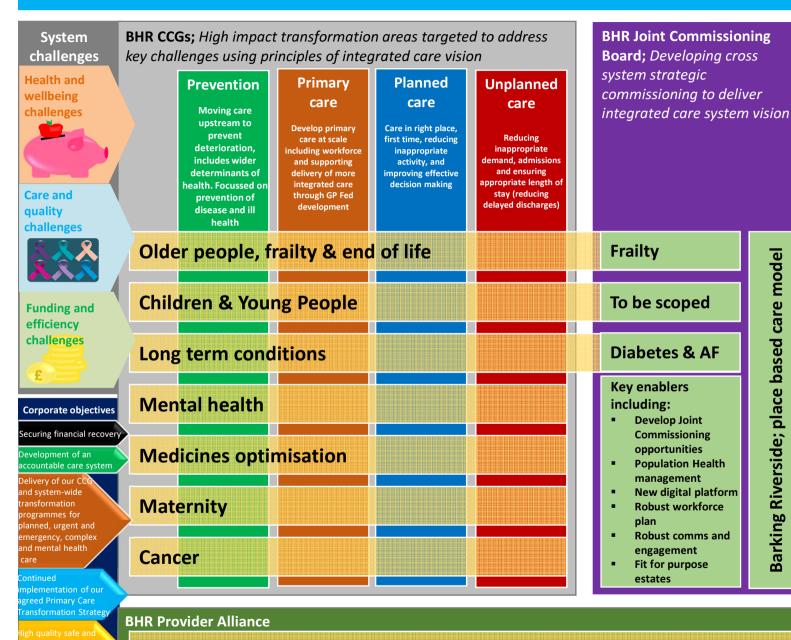
BHRUT PELC)





We have spoken with almost 8,000 people who work in health and care, or live, in Barking and Dagenham, Havering and Redbridge; the outputs of these conversations and surveys have fed into the development of the locality model.

Transforming Health and Care in BHR



Development of Integrated Care System delivery model

Vision

To accelerate improved health and ellbeing outcomes for the people o Barking & Dagenham, Havering and Redbridge and deliver sustainable provision of high quality health and

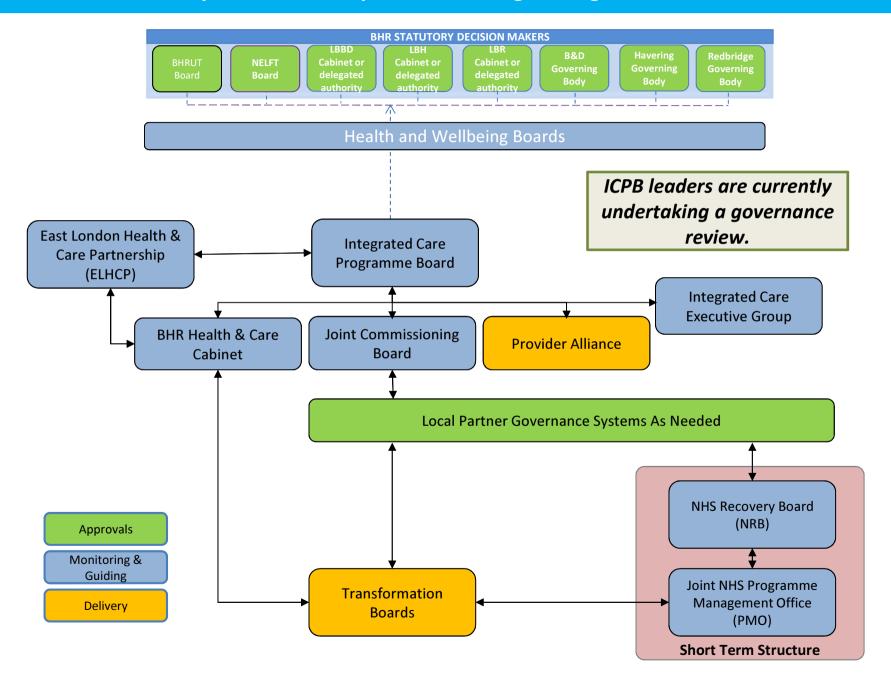
care model

Barking Riverside; place based

New delivery model achieving improved health and wellbeing outcomes for local people



System Leadership - current integration governance -



Transformation Board achievements



Children and young people

- Full multi-agency agreement on the shared vision for CYP services and the requirement for cultural change.
- An agreed whole system view and a common understanding on the areas requiring prioritisation.
- Full agreement to ensure focus on service user experience and outcomes and an avoidance of operational distractions.

Older people and frailty

- Falls prevention: published BHR Falls Strategy and expansion of Age UK led strength and balance exercise groups across BHR.
- Home-is-best (admission avoidance): 2 week trial in July as part of BHRUT's
 a "Perfect Tweek Week" successfully diverted 19 patients from admission
 and established daily collaborative decision-making "huddle" between
 multiple-provider teams.
- Care homes: "Significant 7" training for nearing 1000 care-home staff to recognise early signs of health deterioration and alignment of a GP practice with named nursing home through an integrated nursing homes scheme.
- End of life care: roll-out of "Coordinate My Care" from April 2019, with the commencement of a local incentive scheme and targeted IT support.

Transformation Board achievements



Cancer

- Health Promotion Champions to engage with BME and other hard to reach groups (five champions per CCG).
- Implemented bowel screening coordinator to increase screening rates.
- Implemented faecal immunochemical testing to enable GPs to test patients who have blood present in stools, preventing the need for endoscopies.
- Became part of the SUMMIT study to increase early lung cancer detection.

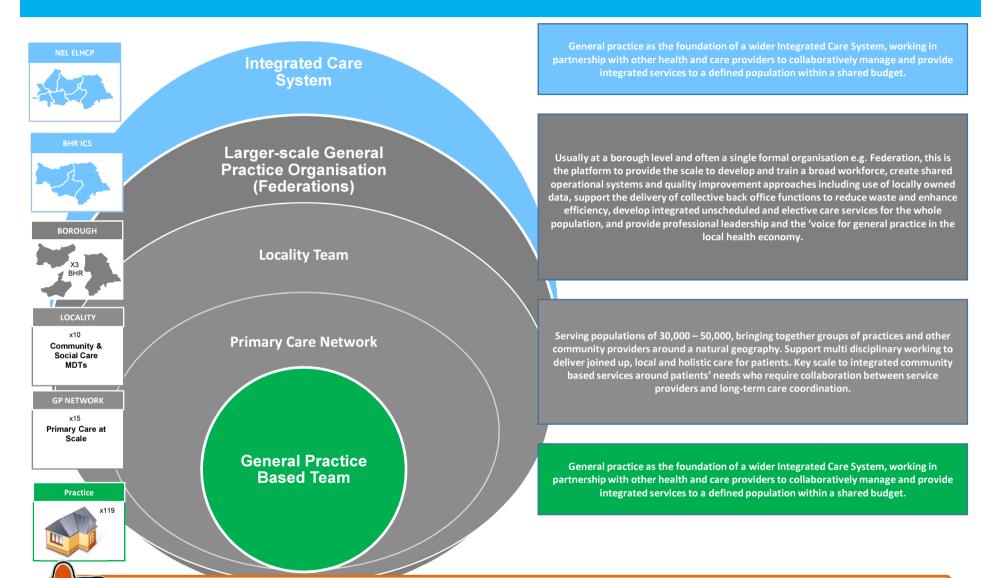
Long term conditions (LTC)

- 2019/20 LTC GP Local Incentive Scheme in place with continuing focus on diabetes treatment targets and targeted atrial fibrillation detection.
- Developed opportunistic atrial fibrillation detection scheme with BHRUT and community pharmacy partners business case to be brought in early September.
- Agreed to pilot LTC multidisciplinary team (MDT) focussing on complex patients pilot will test the hypothesis that MDT working can reduce non elective admissions for this patient group.

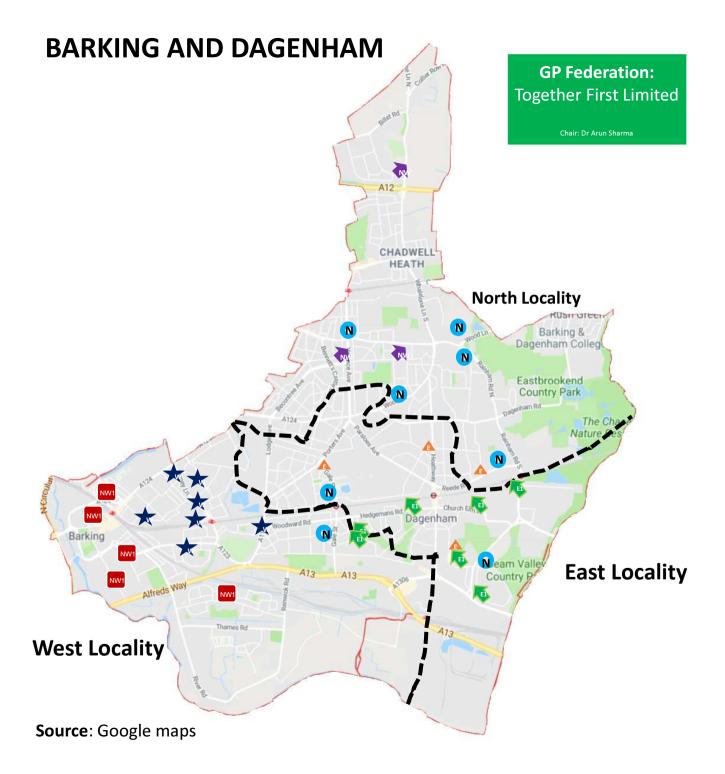
Mental health

- Developed and agreed a tool for measuring system impact.
- Undertook and completed a draft mapping of adult mental health system to inform the new model of care.
- Agreed a new service model for the delivery of Improving Access to Psychological Therapies.

Integrated Care System in Context



The **Primary Care Network** model is at the core of both the development of General Practice in its own right, and as the oundation of place-based, integrated care. The **GP Federations** are a key platform to expand on the benefits of PCNs and enable further commissioning and to achieve economies of scale at both a borough (single GP Federation) and multi borough (e.g. three BHR Federations working together) level.



North Primary Care Network; 8 practices List size 43,239			
Green Lane Surgery	3740		
Dr S Z Haider & Partners	5704		
Dr A K Sharma	9872		
Dr A Arif	4533		
Five Elms Medical Practice	4057		
Gables Surgery	6876		
Dr M Ehsan	3042		
Dr B K Jaiswal	5415		
	43,239		

North West PCN; 3 practices List size 32,637		
Marks Gate Hea	alth Centre	4943
Tulasi Medical (Centre	21062
Becontree Med	lical Centre	6632
		32,637

West One Primary Care Network; 7 practices list size 42,919		
Dr P. Prasad	2430	
Drs Chibber & Gupta	4465	
Drs Sharma & Rai	5492	
Highgrove Surgery	7961	
Dr Ansari & Ansari	8270	
The Barking Medical Group Practice	11348	
The John Smith Medical Centre	2953	
	42,919	

New West PCN: 5 practices List size 30,973		
Abbey Medical Centre	6949	
Dr G. Kalkat	8538	
Dr N. Niranjan	4869	
Drs John & John	8415	
Shifa Medical Practice	2202	
	30,973	

East Primary Care Network; 4 Practices List size: 39,458		
Broad Street Medic	al Centre	6553
Porters Avenue (me	erged 01.04.2019 with Child & Family)	8898
Church Elm		6204
Halbutt Street Surg	ery	6779
Child and Family He	alth	11,024
		39,458

East ONE Primary Care Network; 7 Practices List size: 37,134		
Dr Alkaisy Surgery	4682	
First Avenue Surgery	5401	
Heathway Medical Centre	4895	
Hedgemans rd	5717	
Parkview	4598	
St Albans Surgery	8076	
The Surgery (Dr Ola)	3765	
	37,134	

North East London Commissioning Alliance (NELCA)



- Commissioner landscape in NEL
- 7 CCGs = 3 local integrated care systems (ICS)
- Barking and Dagenham
- Havering
- Redbridge
- Waltham Forest
- Newham
- Tower Hamlets
- City and Hackney
- 7 NELCA CCGs to merge into a single CCG by April 2021

Questions?