



3PCS – the North Tyneside Tripartite Primary Care Strategy

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Why is this important?

- Over 75% of all patient contacts in NHS happen in GP practices
 - Nearly everyone in the whole population is seen at some time in their life by their GP
 - In North Tyneside, people speak to/ see a Doctor or Nurse around 1.3million times per year (this isn't far out of line with the England Average, of 6 contacts average per person per year)
- When GP practices are overwhelmed, then the extra end up in A&E, overwhelming them too



What is General Practice?

- Un-specified, un-diagnosed illness
 - Medical
 - Social
 - Mental
- Diagnosis and commencing a course of treatment (or a decision to refer for the most appropriate diagnostic test)
- Managing minor illness and chronic conditions in a convenient place, close to the community
- People who work this huge volume of cases, because they value autonomy



Our Priorities

Balanced Scorecard

- Healthy and Happy Population
- Sustainable Primary Care
- Putting the resources to deliver more close to where we live and work
- Improving work/life balance

	INTERNAL	EXTERNAL
PUBLIC & PATIENT	<u>Clinical Outcomes</u>	<u>Patient Experience</u>
PROCESS	<u>Financial Balance</u>	<u>Workforce</u>



Who we are

- North Tyneside CCG
- Local Medical Committee
- TyneHealth

Talking to:

- Local Authority
- NHS Providers
- Social Care Providers
- Independent Sector including Voluntary Sector and Commercial

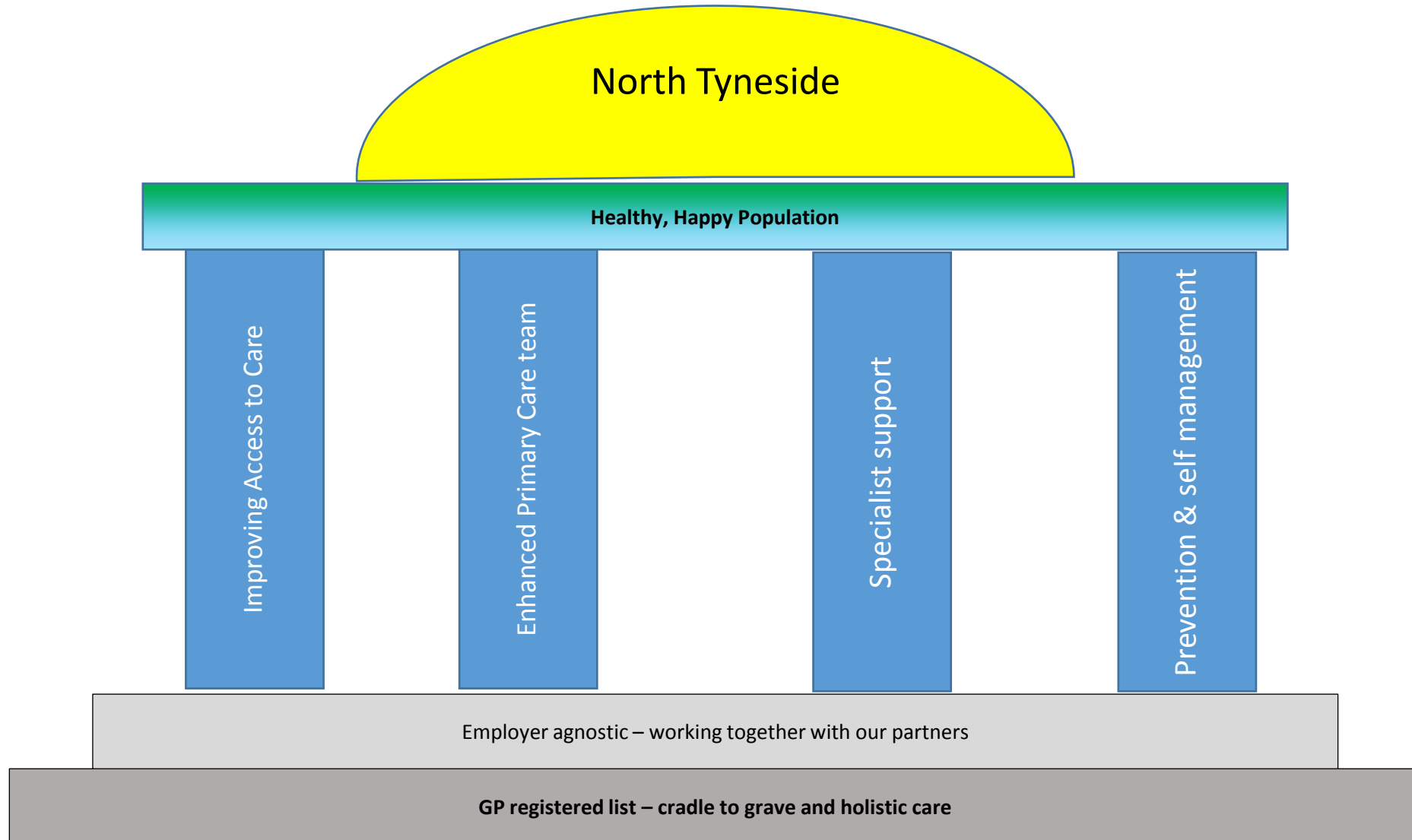


The Principles on which the Strategy is built

- The core strengths of general practice, connection with local community (GPs as advocates)
- General Practice at the heart of a stable care system
- Involving community and secondary care clinicians in integrated collaborative way
- Enabling innovation
- A strong GP Federation, an advocate for primary care with other health and social care providers in North Tyneside in order to integrate care
 - sharing proven practice,
 - Shared functions, support staff and services
 - Lines of communication to Integrate existing community services and nursing based teams with general practice



The Four Pillars





Making it happen

- During October, November and December, the GPs and Practices are “redesigning Out-of-Hospital Care” with CCG
- Thinking Time (funded from Resilience Fund)
- Input from other organisations
- EXPLORE sessions (Oct) generated 75 ideas – innovative change meet priorities on the Balanced Scorecard
- FOCUS sessions (Nov) to identify small, easy to implement (proof of concept) projects, 10 – 20 (some across whole of North Tyneside)
- DEVELOP (Dec) agree Business Cases for review by CCG.



Where we are – Feb 2017

- Business Cases approved:
 - Care Navigators in General Practice
 - Menorrhagia pathway in General Practice
 - DVT pathway in specialist General Practices
- Business Cases needing further development
 - Online consultations
 - Dementia Care – an additional Admiral Nurse
 - Community Falls Prevention
 - Specialist Clinics delivered in General Practices
 - Nail Cutting
 - DMARD Monitoring
 - Practice Pharmacists