

Primary Care in the United Kingdom

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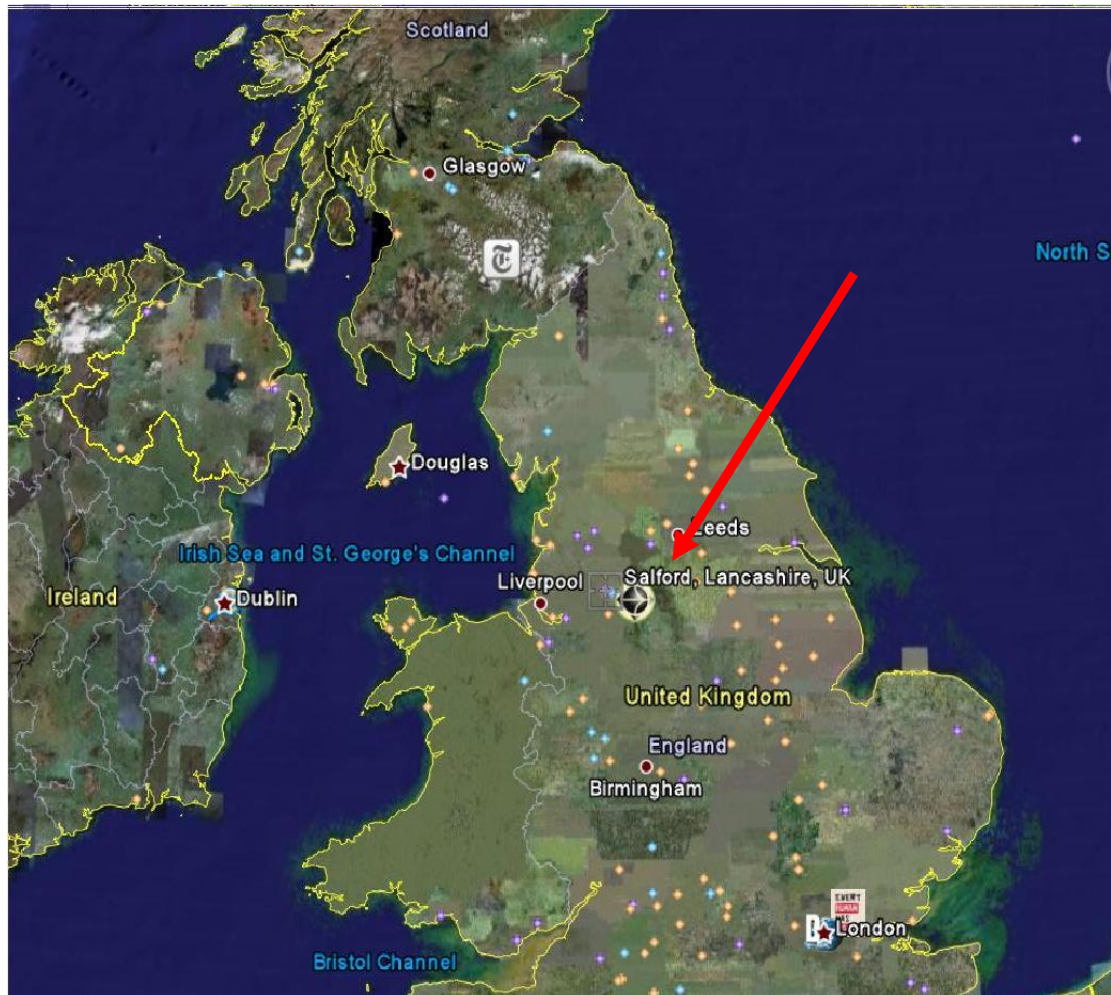
Chief Executive

Salford Teaching Primary Care Trust

Primary Care Background

- United Kingdom four separate healthcare systems
- England
 - 152 Primary Care Trusts
- A financial allocation direct from central government
- PCTs
 - Commissioning of services
 - Provision of services
 - Public Health role

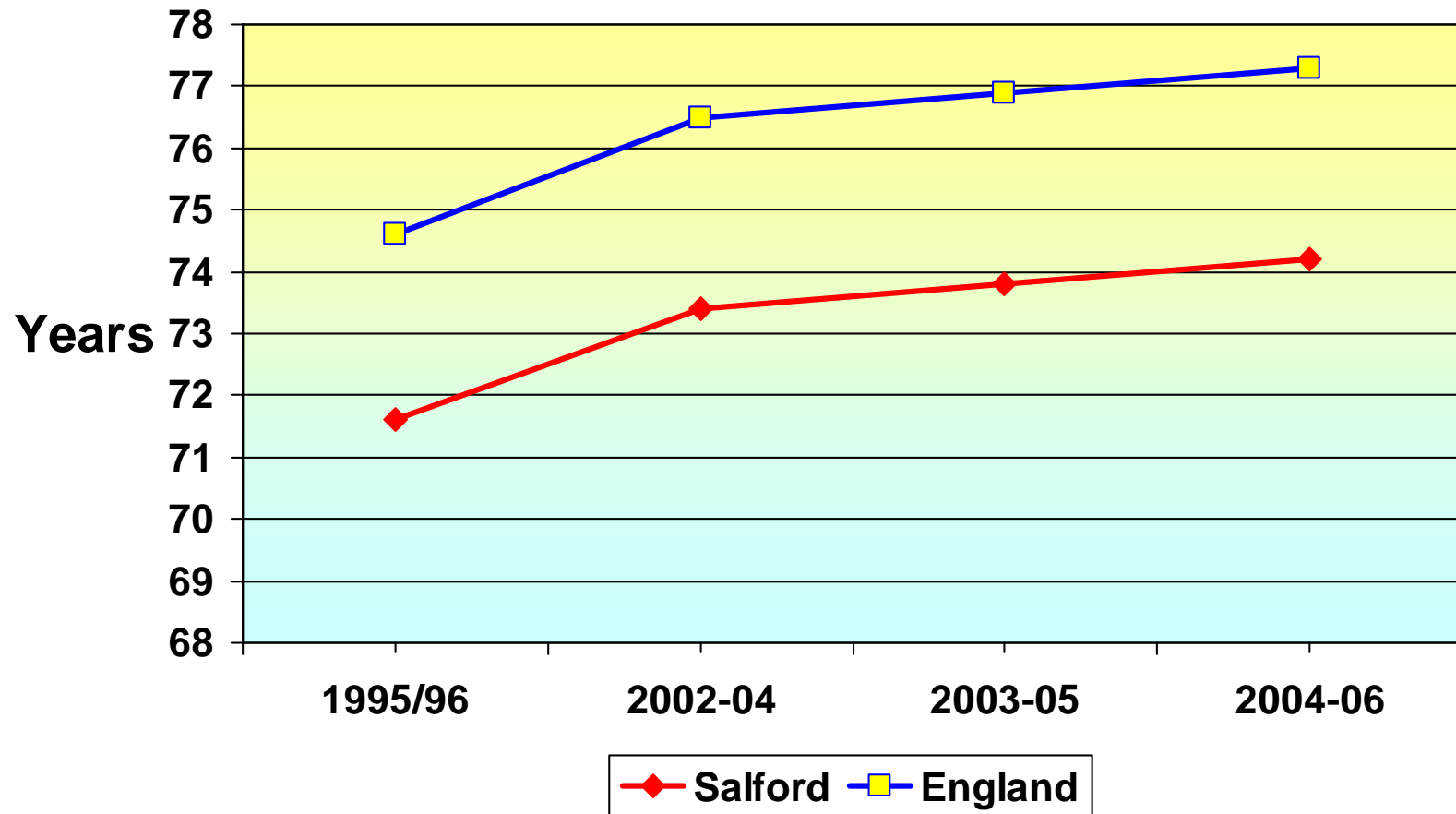
Where is Salford?



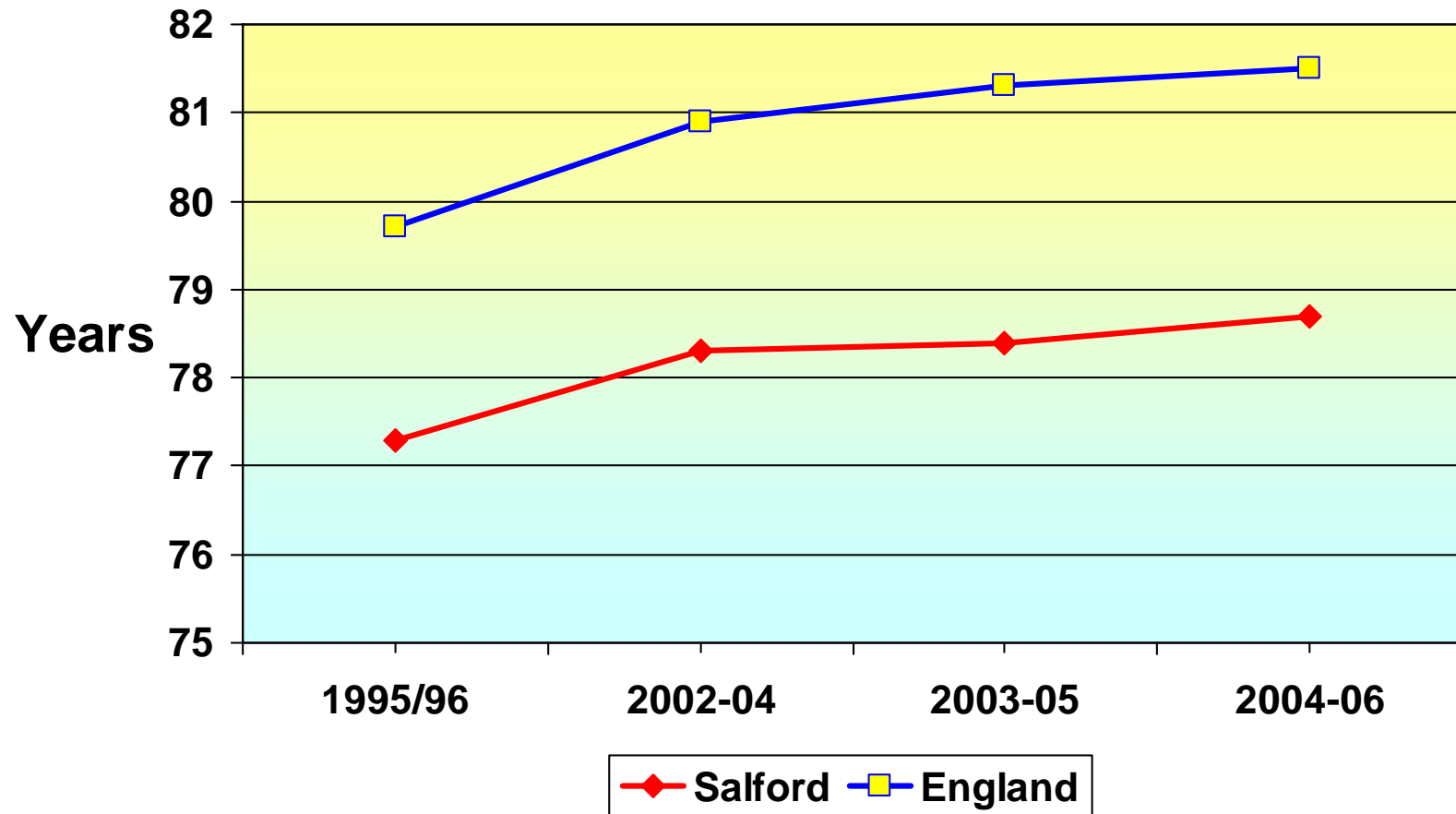
Salford

- 230,000 population
- A post industrial city
- 35% of ward areas are in the 10% most deprived in the country
- PCT co-terminous with local government

Salford – Male Life Expectancy



Salford – Female Life Expectancy



Salford – A Few Health Statistics Standardised Mortality Ratios (SMRs)

- Heart Disease & stroke in under 65s – **151**
- Stroke – **137**
- Cancers
 - Colon – **126**
 - Lung – **180**
 - Oesophagus – **153**
 - Stomach – **132**
- Anti-depressants 1/3 above national average



Primary Care in Salford

- 53 GP Practices
- 155 doctors
- Practices
 - Separate organisations
 - Partnerships or sole traders
- Contractual relationship with the PCT as commissioner

Features of the GMS Contract

- Core contract based on population size
- Performance based component
 - 3 domains
 - Clinical
 - Organisational
 - Patient experience
- Specific funding for additional services
 - National
 - Local

Quality & Outcomes Framework (QOF) Clinical Indicators

Secondary prevention of coronary heart disease
Cardiovascular disease – primary prevention
Heart failure
Stroke and Transient Ischaemic Attack
Hypertension
Diabetes mellitus
Chronic obstructive pulmonary disease
Epilepsy
Hypothyroid
Cancer

Palliative care
Mental health
Asthma
Dementia
Depression
Chronic kidney disease
Atrial fibrillation
Obesity
Learning disabilities
Smoking

Quality & Outcomes Framework (QOF) clinical domain examples

- Percentage of patients with coronary heart disease in whom the last blood pressure reading is 150/90 or less
- Percentage of patients with coronary heart disease whose last measured total cholesterol is 5mm/l or less
- Percentage of patients with hypertension in whom the last blood pressure reading is 150/90 or less
- Percentage of patients with diabetes in whom the last blood pressure reading is 145/85 or less
- Percentage of patients with diabetes in whom the last HbA1c is 7.5 or less

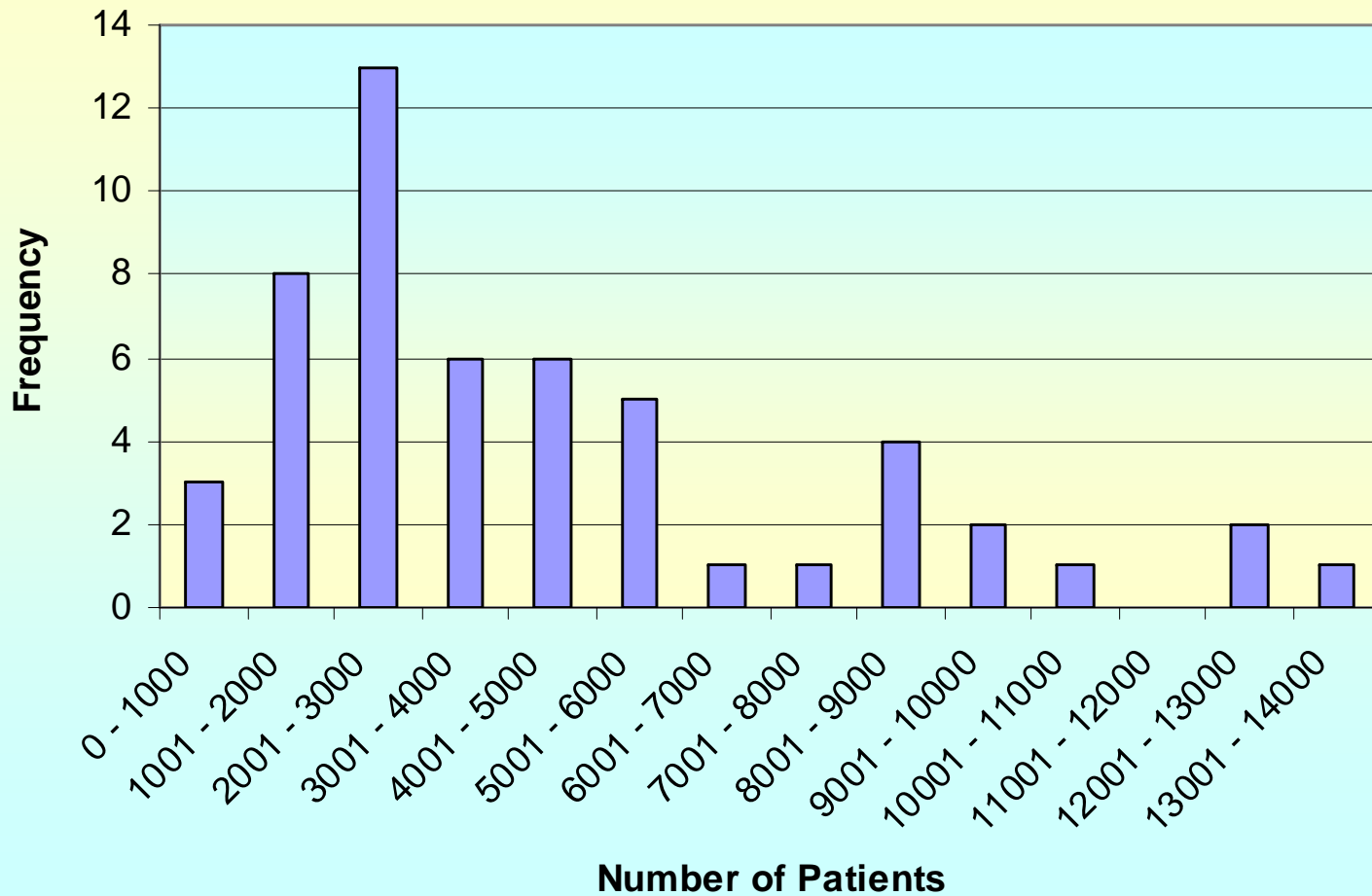
Quality & Outcomes Framework (QOF) Organisational Domain

- Records and information
- Information for patients
- Education and training
- Practice management
- Medicines management

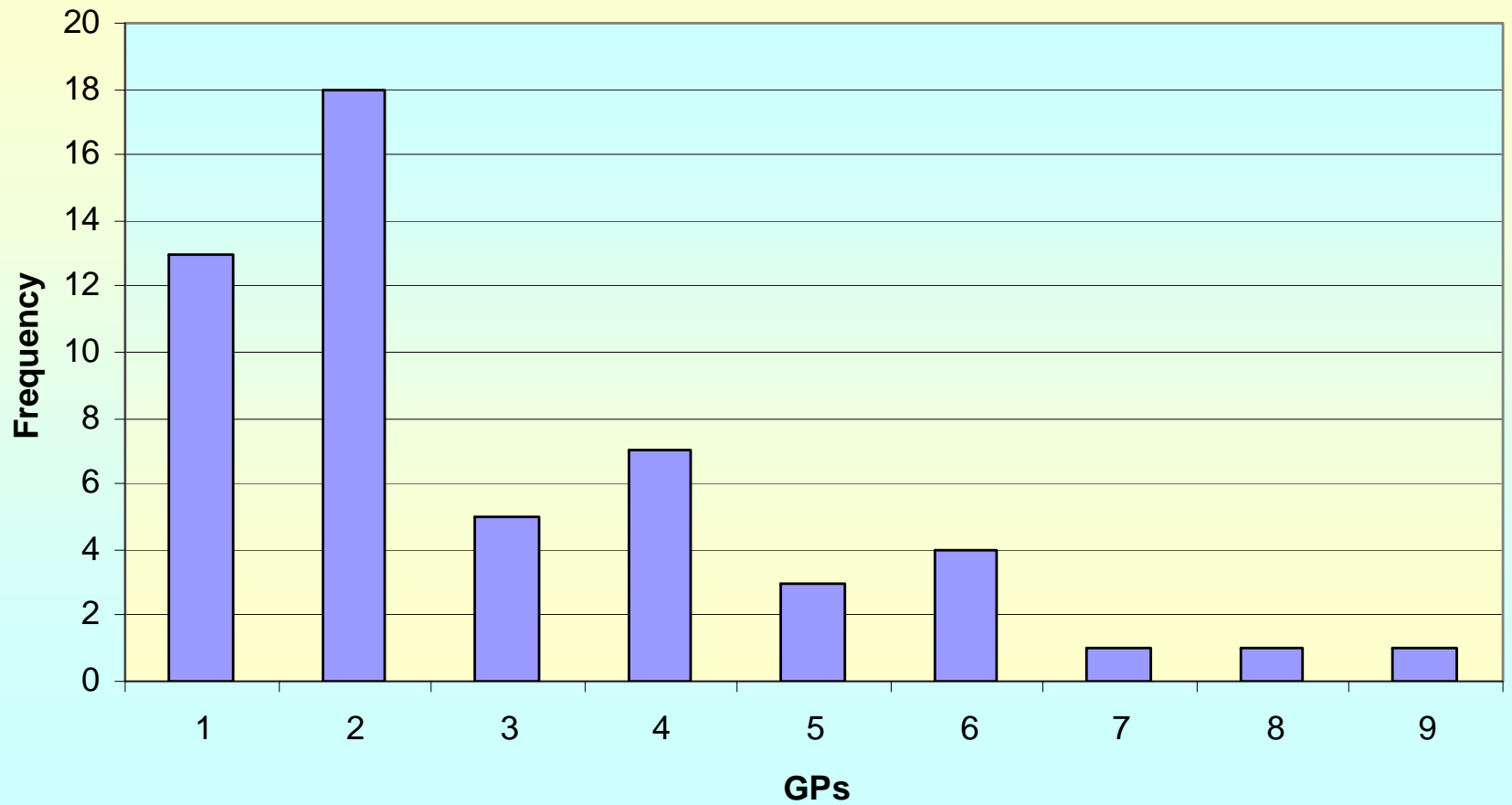
Quality & Outcomes Framework (QOF) Patient Experience Domain

- Length of Consultation
- Access to a Primary Care Professional within 24 hours
- Access to a GP within 48 hours

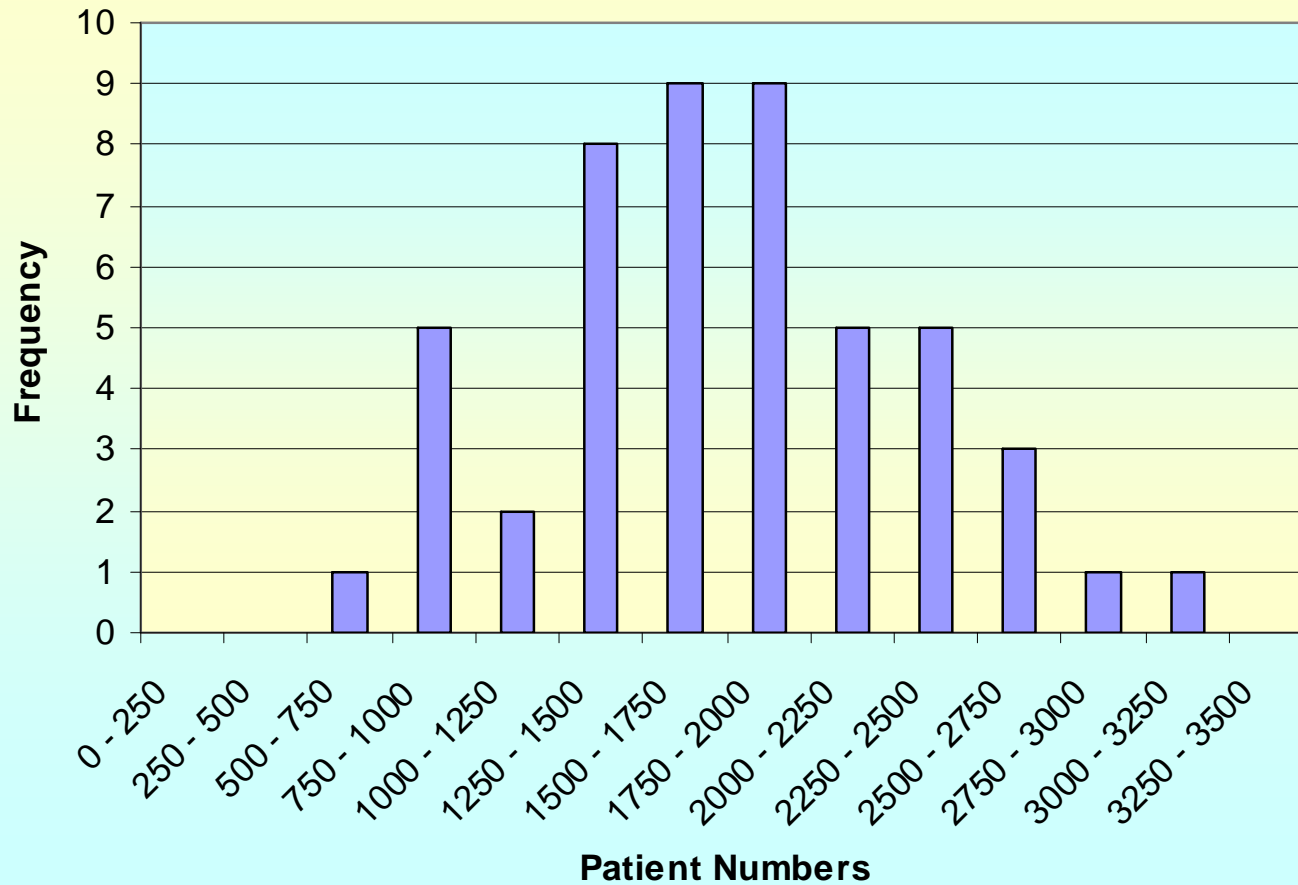
Analysis of GP Practice Size in Salford



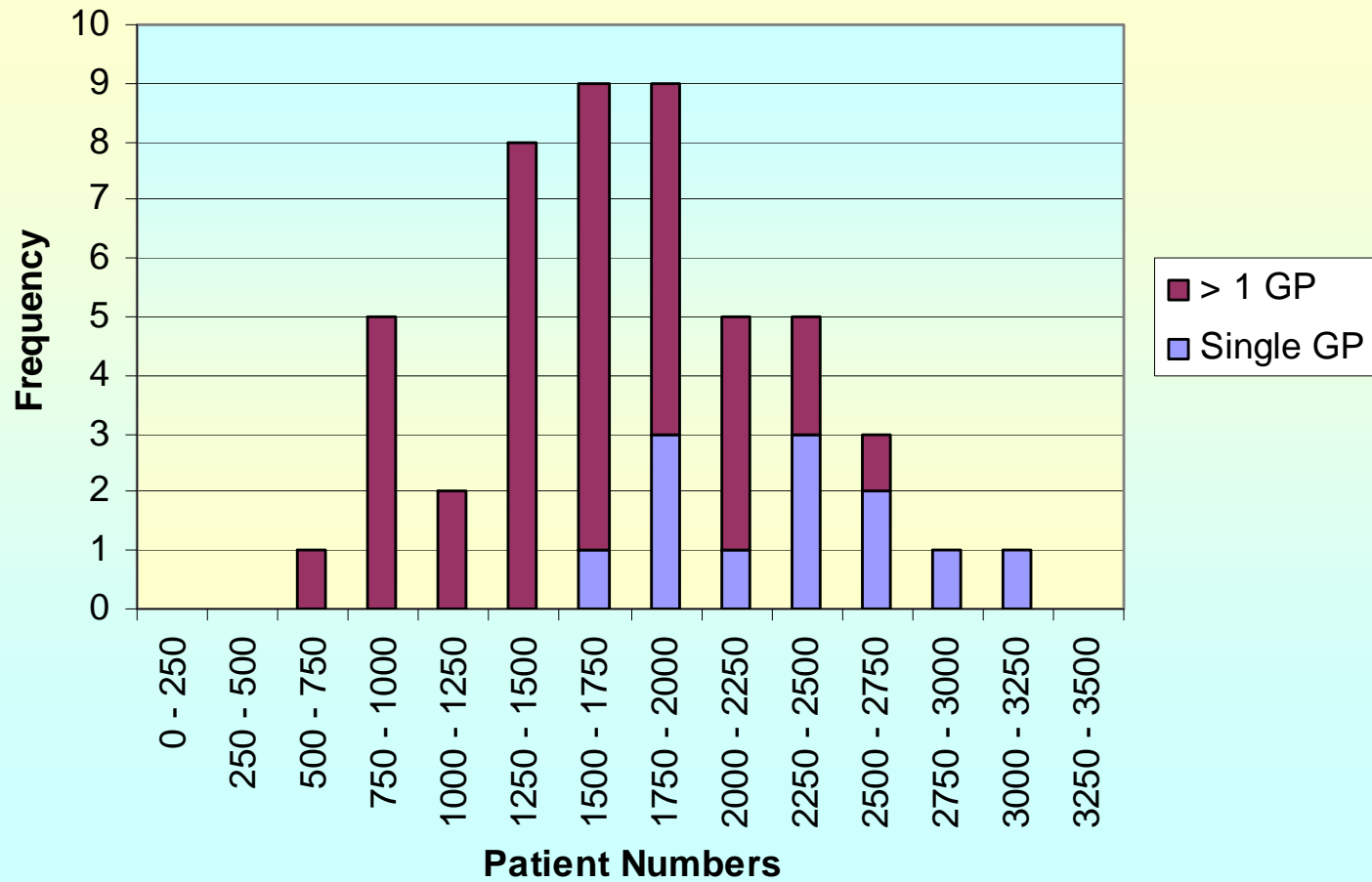
Number of GPs within Each Practice



List Size (Number of Patients Per GP)



List Size (Number of Patients Per GP)

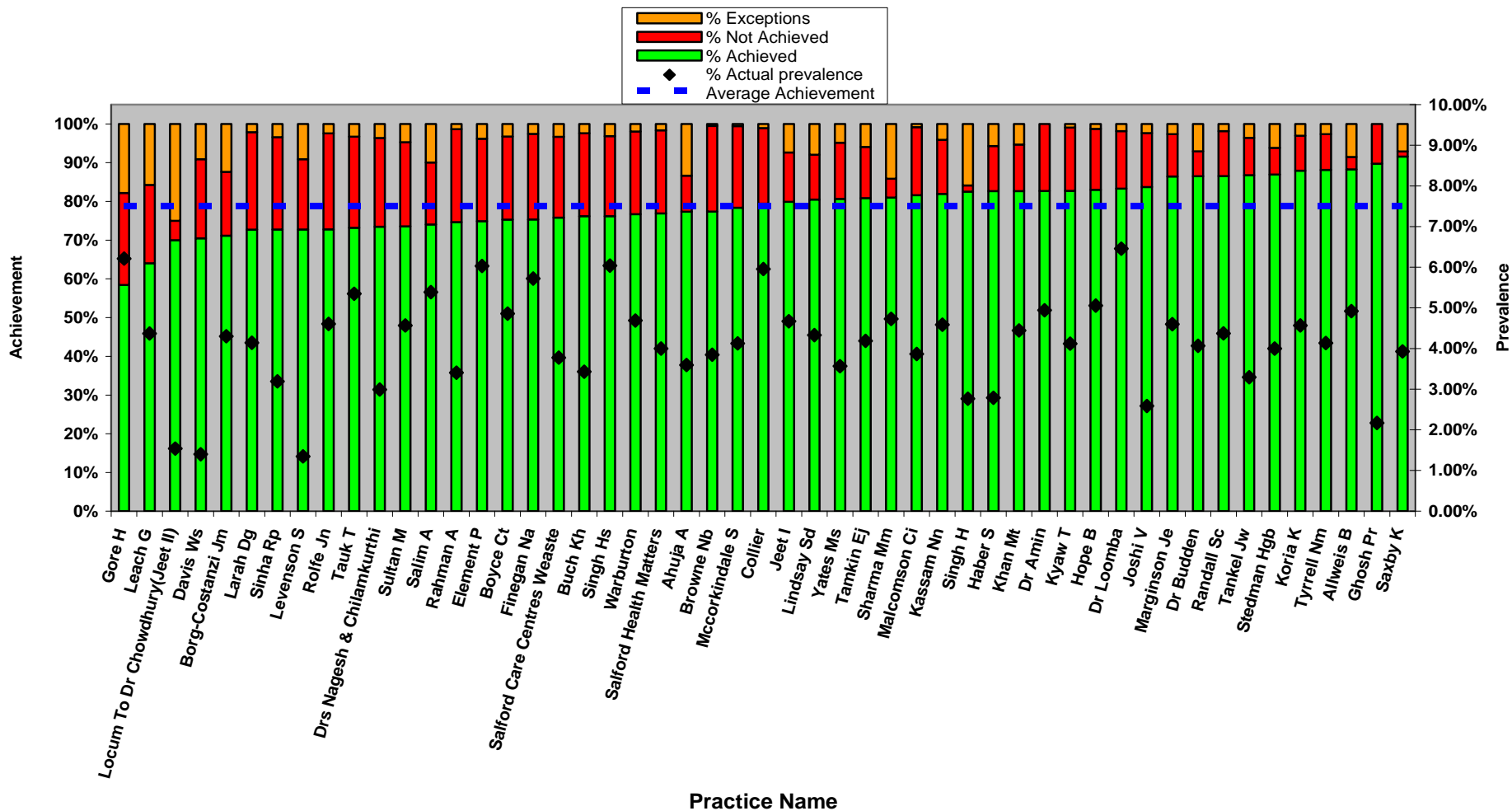


QoF Points – Performance of Salford GPs

Domain	Maximum Available Points 2008/09	Points Achieved 2008/09	% Points Achieved 2008/09
Clinical	36,400	32,883	90.34%
Organisational	9,380	7,785	82.99%
Additional services	2,016	1,724	85.53%
Patient experience	8,204	6259	76.29%
Total	56,000	46,242	82.58%

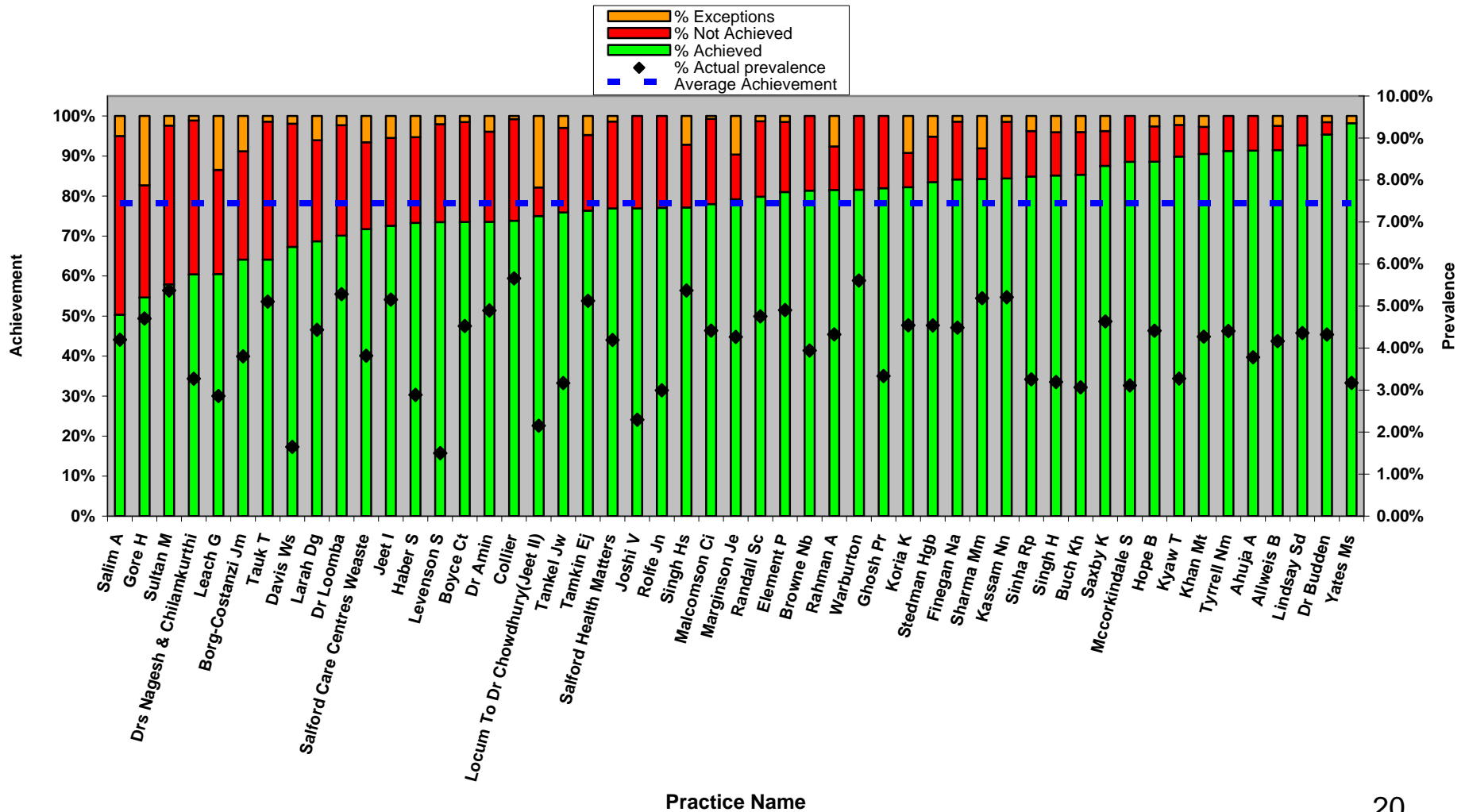
Coronary Heart Disease 8 2008/09

% of patients with Coronary Heart Disease whose last measured total cholesterol (measured in the previous 15 months) is 5 mmol/l or less.

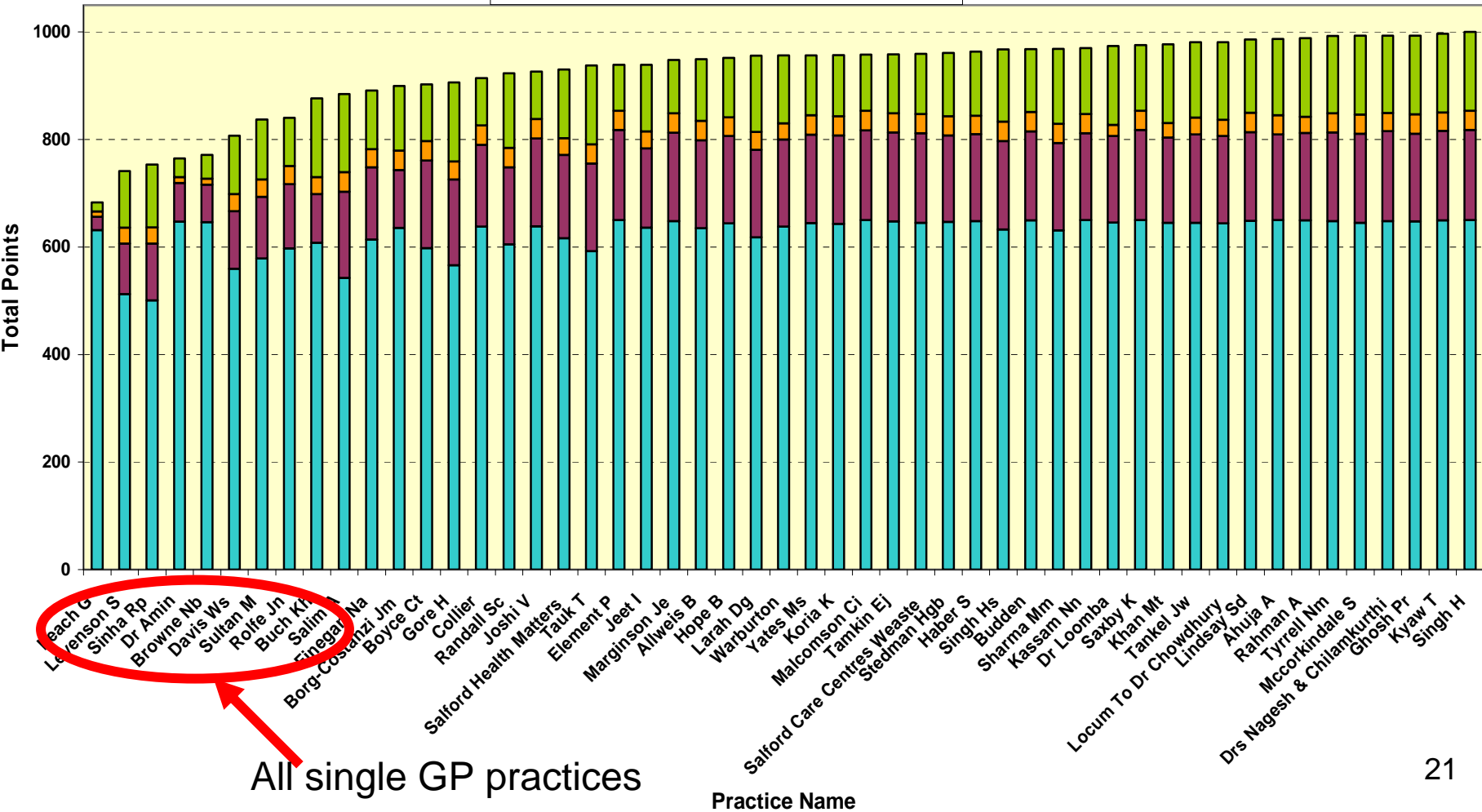
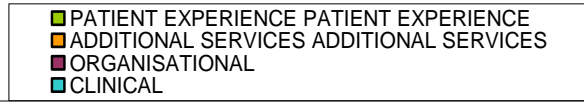


Diabetes Mellitus 12 2008/09

% of patients with Diabetes in whom the last blood pressure was 145/85 or less



Salford PCT - Practice Points Achievement 2008/09



All single GP practices

Enhanced Services

- Anti-Coagulation Services
- Drugs
- Active Case Management
- Near Patient Testing
- Access/Extended Hours
- Heart Failure Services
- Homeless Services
- Minor Surgery
- Osteoporosis
- Cardio-Vascular Disease
- Smoking
- intrauterine contraceptive device (IUCD) Insertion
- IM&T
- Learning Disabilities
- HPV Vaccination
- Childhood Vaccination & Immunisations
- Safe Haven Service
- Influenza & Pneumococcal Immunisations
- Alcohol Tier 1 (DES)
- Alcohol Tier 2 (LES)
- Gateway Programme
- Ethnicity
- Health Inequalities
- Practice Based Commissioning
- Choice & Booking

Other Contractual Arrangements

- Personal Medical Services Contracts (PMS)
 - Locally negotiated
 - Based on GMS Contract
- Equitable Access
 - Tendered Contract, open to competition
 - 3 – 5 year contracts

The GMS Contract – Key Points To Reflect On

- Based on need
- Clinical good practice incentives
- Flexibility in the way it can be delivered
- Encourages larger group practices
- Local tailoring via LESs

The GMS Contract – Key Points To Reflect On

- Contract in perpetuity
- Clinical quality must be a process of continuous improvement
- Negotiated with a powerful body
- Doctors as practice mgrs with salarieds
- The single hander “problem”
- Limited use of flexibilities

Suggested Areas of Improvement

- Targets should be more and more challenging
- Percentage of income within QoF should increase
- Patient choice should be encouraged
- Good practice / innovation in contract use should be encouraged