

Primary Care Home: A unique model of care

December 2016
#primarycarehome



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Foreword

It has been a privilege to witness the progress and growth of the Primary Care Home programme. When we first submitted our paper in July 2015, we had hoped the Primary Care Home would be adopted as a new model of care for the Five Year Forward View, but hadn't quite anticipated how it would flourish in such a short time.

Whenever we make presentations or enter into discussions about the Primary Care Home model, it is met with enthusiasm by patients, carers, communities and the health and care sector. It is not uncommon to hear our colleagues say it was always what we wanted to do.

Built on a strong organisational memory and evidence this concept of "complete care in the community" providing first contact care to a registered list is a model for now and the future. Having planted the seed, the propagation of the programme is to the credit of an ever increasing number of people, too many to name here, but our thanks for that support and considerable effort.

We are now entering the spread phase for this programme having already realised the success from the first 15 Rapid Test Sites, the development of a Community of Practice will see, in the order of 100 Sites covering up to 5 million people in England forming a learning network to embed the Primary Care Home as a significant benefit to people in their local communities.

We look forward to working with you on the national implementation of this programme over the coming weeks, months and years.

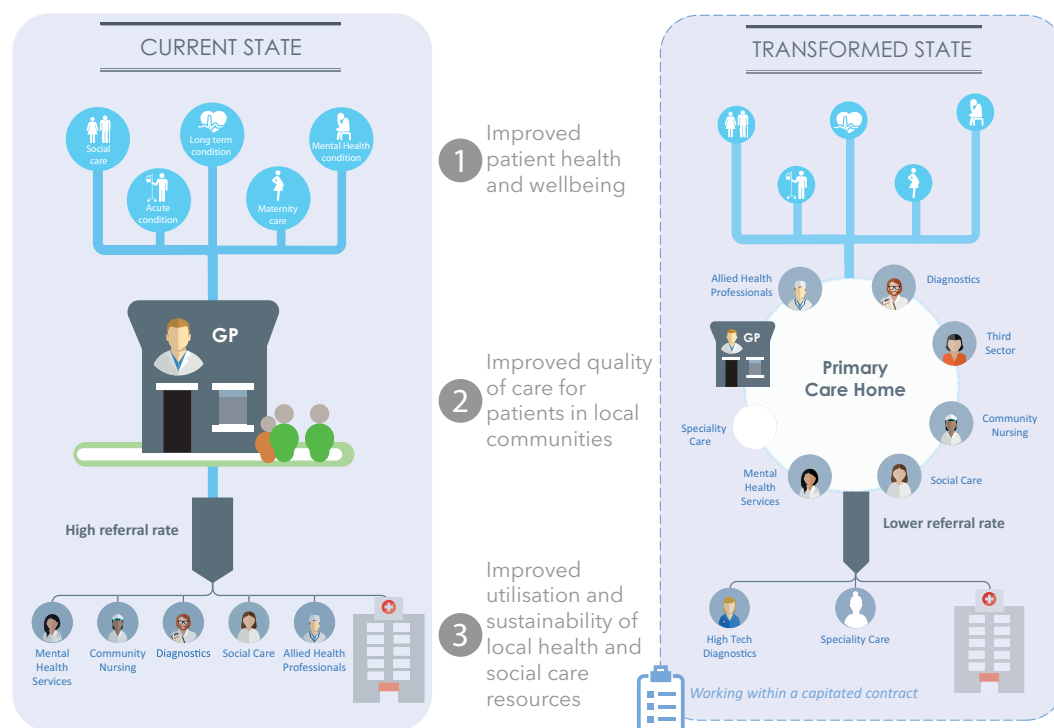


Dr Nav Chana & Dr James Kingsland OBE

The Primary Care Home Programme

The NAPC identifies Primary Care as both a level in a health system (its form) and a strategy or philosophy for organising approaches to care (its function). We believe effective primary care has four central features:

1. first point of contact for all new health needs;
2. person-centred (holistic), rather than disease-focused continuous lifetime care;
3. comprehensive care provided for all needs common in a population;
4. co-ordination and integration of care when a person's need is sufficiently uncommon to require special services or provision from another sector (secondary or tertiary care).



The Primary Care Home programme strengthens and redesigns primary care around the health and social needs of local communities. For patients, it aims to significantly improve the quality of patient centred care and their experience of local health services. They will be treated by single integrated and multidisciplinary teams, working to provide comprehensive and personalised care.

The four characteristics of the Primary Care Home:

- provision of care to a defined, registered population of between 30,000 and 50,000;
- aligned clinical financial drivers through a unified, capitated budget with appropriate shared risks and rewards;
- an integrated workforce, with a strong focus on partnerships spanning primary, secondary and social care; and
- a combined focus on personalisation of care with improvements in population health outcomes.

The PCH is comprised of primary, community, mental, social and secondary providers working together in their locality to provide comprehensive and personalised care. In this way, the PCH creates the environment for multidisciplinary teams to provide the right care in the right setting.

Focus on the provision of care and management of a whole population budget at the registered population of between 30,000 and 50,000 ensures everyone within the PCH knows each other and the patient, improving the quality of care and patient experience.

The principles of the PCH model are similar to the multispecialty community provider (MCP) from the Five Year Forward View and in line with the General Practice Forward View.

The PCH and MCP models share many of the same goals: better outcomes for patients at lower cost, based on greater integration between primary and secondary care.

Learning and development will be supported by the new care models programme.

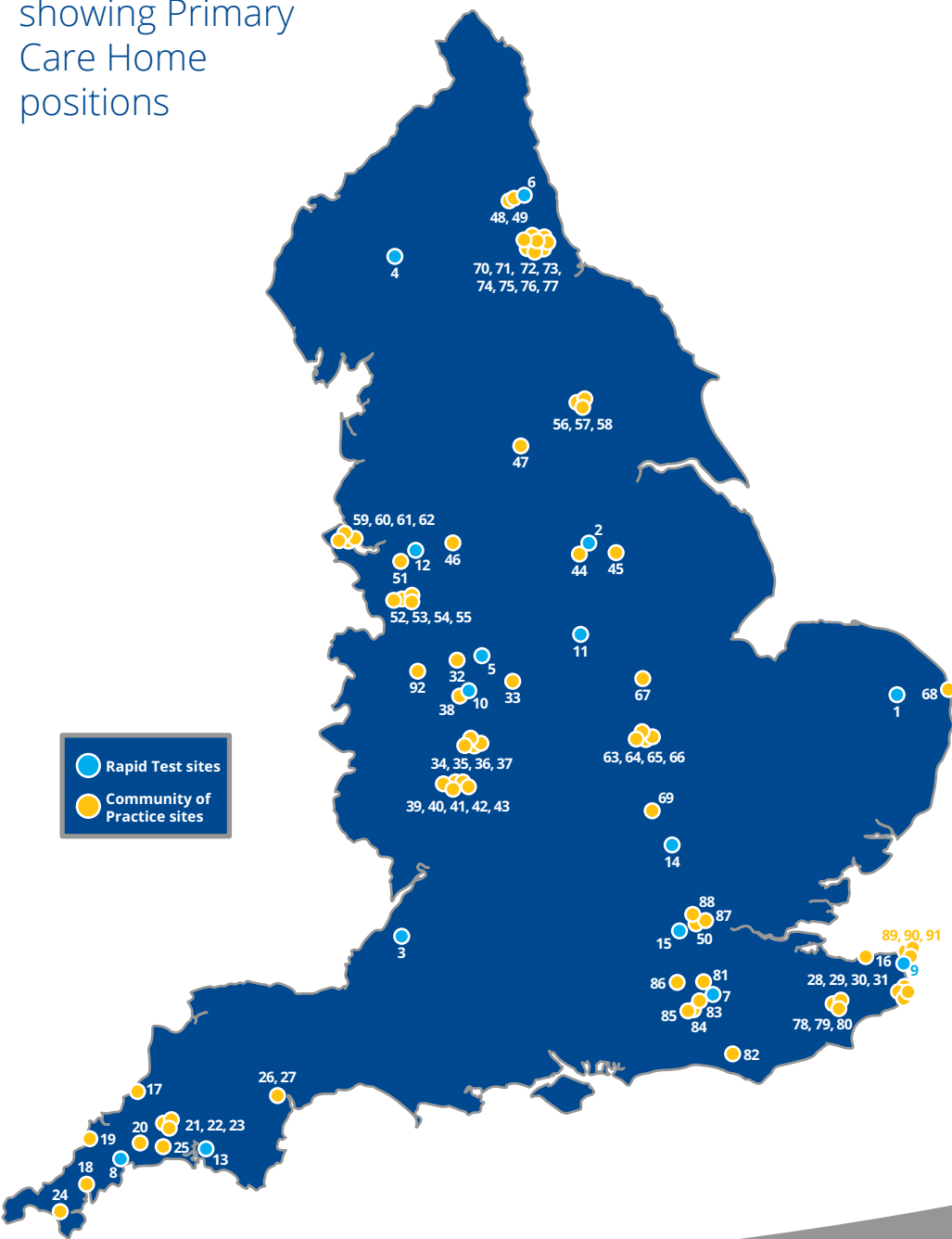
Rapid Test Sites

- 1 The Breckland Alliance
- 2 Larwood & Bawtry
- 3 South Bristol Primary Care Collaborative
- 4 1st Care Cumbria
- 5 Rugeley Practices PCH
- 6 South Durham Health CIC
- 7 The Healthy East Grinstead Partnership
- 8 St. Austell Healthcare
- 9 Thanet Health CIC
- 10 Wolverhampton Total Health Care
- 11 Nottingham North & East Community Alliance
- 12 The Winsford Group
- 13 Beacon Medical Group
- 14 Luton Primary Care Cluster
- 15 Richmond

Community of Practice Sites

- 16 Herne Bay Health Care
- 17 North Cornwall MCP
- 18 Truro PCH
- 19 Perranporth & Penryn PCH
- 20 Lostwithiel, Fowey, St Blazey Primary care Network
- 21 22 23 East Cornwall Primary Care Home
- 24 South Kerrier Locality PCH
- 25 Penwith PCH
- 26 27 Integrated care Exeter
- 28 29 30 31 South Kent Coast Integrated Accountable Care
- 32 Stafford Primary Care Alliance
- 33 Lichfield / Burntwood Network
- 34 35 36 37 Redditch & Bromsgrave Alliance
- 38 Wolverhampton Care Collaborative
- 39 40 41 42 43 Wyre Forest Alliance
- 44 Newgate Medical Group
- 45 Riverside Health Centre
- 46 Middlewood Ltd
- 47 OneLeeds PCH
- 48 49 Derwentside Healthcare LTD
- 50 Hammersmith & Fulham GP Federation (Network3)
- 51 Central Crewe Cluster
- 52 53 54 55 South Cheshire and Vale Royal Primary Care Home Network
- 56 57 58 Nimbus Care York
- 59 60 61 62 Wirral GP Provider Federation
- 63 64 65 66 3Sixty Care
- 67 Rutland Medical Group
- 68 East Norfolk Medical Practice
- 69 Newport Pagnell Medical Centre
- 70 71 72 73 74 75 76 77 Durham Dales, Easington and Sedgfield CCG
- 78 79 80 Ashford Clinical Providers Network Ltd (Federation)
- 81 Redhill & Merstham
- 82 Lewes Health Hub
- 83 Horsham PCH
- 84 Burgess Hill and Villages PCH
- 85 Haywards Heath PCH
- 86 Dorking Primary Care Home
- 87 South Camden Primary Care Neighbourhood
- 88 Hampstead Primary Care Neighbourhood
- 89 90 91 Ramsgate PCH, Margate PCH, Quex PCH, Broadstairs PCH
- 92 Newport District Neighbourhood project

Map of England showing Primary Care Home positions



Rapid Test Sites

1. The Breckland Alliance

The Breckland Alliance has seen three GP practices in two quite isolated small towns come together to provide mutual support in an area which has in the past struggled to recruit and retain GPs. The new Alliance will enable the three surgeries to invest in staff, improve back office services such as finance and IT and in time develop new services for patients. These are likely to include bringing hospital-based clinics into the community, so reducing travelling time for members of the public, as well as developing health and wellbeing services to stop people becoming unwell in the first place. A focus is likely to be the large number of elderly care homes in the area: it is hoped routine medication reviews for residents will be delivered in the homes, rather than them having to visit the surgery.

PARTNERS

South Norfolk Clinical Commissioning Group (SNCCG), Mental Health Trust (Norfolk & Suffolk NHS Foundation Trust), the local acute hospitals (Norfolk & Norwich University Hospital NHS Foundation Trust and West Suffolk Hospitals NHS Foundation Trust), West Suffolk CCG, Norfolk Community Health and Care Trust, other local community providers and Social Services.

The population covered by this PCH is 43,000.

2. Larwood & Bawtry

Larwood and Bawtry Primary Care Home covers several villages in Nottinghamshire and South Yorkshire, some of which have high levels of deprivation and disease. The Primary Care Home is improving the way the surgeries work together and is bringing in new partners to improve services to patients. Examples include local volunteers running Citizens Advice 'clinics' at surgeries to help people with non-medical problems such as worries about money or housing which may nonetheless be affecting their health. Social care clinics at the GP surgeries can also help with this, for instance providing help on how to get needs assessments from the local council and thus get additional support more quickly.

PARTNERS

Bassetlaw CCG, Bassetlaw Integrated Care Board, Local hospital, county council including the Health and Wellbeing Board, Chair, community and mental health services and the Integrated Care Partnership Board which includes all health stakeholders locally.

The population covered by this PCH is 30,451.

3. South Bristol Primary Care Collaborative

South Bristol Primary Care Home covers six GP practices in the city, working with partners in the NHS, social care and the voluntary sector. The area which the PCH covers is one of the most deprived in the country, with high levels of health inequalities and disease. GP surgeries in the area are often the first port of call for health and social problems, placing a real strain on a limited resource. The PCH will develop an integrated team to offer the right support, clinical and non-clinical, for patients, and where appropriate offer signposts to other services which can address their underlying needs. This will in turn be supported and enabled by a high-quality, integrated ICT system.

PARTNERS

Bristol Clinical Commissioning Group (CCG) & Bristol City Council (BCC) and the Better Care Bristol Vision Governance Structure. Brisdoc, our GP Out of Hours service, University Hospitals Bristol (UHB), South Bristol Community Hospital (SBCH).

The population covered by this PCH is 45,000.

"Having essentially started from scratch with the development of our Primary Care Home, we are now 6 practices working together with our community provider. Those initial stages of building trust, honesty and joint vision setting is what is enabling us to develop the right solutions for our community's health and social care needs."

Gareth Ronson - GP The Lennard Surgery

4. 1st Care Cumbria

1st Care Cumbria is a group of GP practices in northern Cumbria who have resolved to deliver innovative, high quality healthcare for their geographically spread-out and often isolated population. The Primary Care Home has introduced dressing clinics held in libraries and town halls instead of at the GP surgery, so patients can get their bandages changed and have a cup of tea and conversation with other local people, reducing their sense of social isolation.

Staff at the PCH also refer some patients to Listening Ear, a local social counselling service which enables people to explore their anxieties or address recent traumatic events such as a bereavement. The initiative began out of a realisation that many people requesting GP appointments did not need clinical care but simply wanted to talk to someone. Being able to offer the Listening Ear service has freed up many GP appointment slots for people who do need medical attention.

PARTNERS

Patients (via Patient Participation Groups), Success Regime (note, there may also be academic interest in research into applied policy around integrated care, undertaken through links with the Success Regime), Cumbria CCG, Cumbria Partnership Foundation Trust, providers of Mental Health and Community Services, Cumbria County Council, North Cumbria University Hospitals NHS Trust, Cumbria CVS, Bishop of Carlisle – Bishop for Health for England sitting in House of Lords, Local MPs.

The population covered by this PCH is 58,052.

“PCH has stimulated enthusiasm and a feeling amongst GPs that they have, for the first time in many years, a real opportunity to change the delivery of primary and community care for their patients. It also means we have a real opportunity to deliver secondary care services in our local community reducing the need for patients to travel long distances to hospital. We strongly believe Primary Care Home helps CCGs think differently about local requirements of integrated care.”

Helen Jervis - 1st Care Cumbria

5. Rugeley Practices PCH

The Rugeley Primary Care Home covers several former mining villages in Staffordshire, including several areas of high deprivation and an ageing population. Cardiovascular and respiratory disease are well above the national average. The PCH will address dementia, frailty and long-term conditions among the elderly population, building integrated teams to provide the right mix of services to support patients. Preventative work to encourage and support people to stay healthy will also be a focus.

PARTNERS

CCG, GP First Federation, Douglas MacMillan and St Giles local hospices, South Staffordshire & Shropshire NHS Healthcare Foundation Trust, Alzheimer's Society, Badger Out of Hours Service, Staffordshire Social Care and West Midlands Ambulance Service.

The population covered by this PCH is 31,552.

“Place based care through Primary Care Homes allows us to stabilise primary care delivery in the face of increasing demands and engage with the whole population about health and wellbeing.”

Dawn Gayle - Head of Support Services

6. South Durham Health CIC

The South Durham Primary Care Home has brought in a dedicated mental health worker from a specialist NHS provider to offer care in the surgery for people with mental health needs. This means patients can be seen more quickly and, if necessary, referred on for more specialist care. But it also means the individual's mental health needs are considered alongside their physical health, ensuring care for all their conditions is better integrated. Having a dedicated mental health worker present in the surgery also helps build the understanding and skills of other staff in this important area.

PARTNERS

Durham Dales, Easington and Sedgefield CCG, South Durham Health CIC, County Durham and Darlington NHS Foundation Trust, Durham County Council and local voluntary agencies.

The population covered by this PCH is 40,752.

7. The Healthy East Grinstead Partnership

Innovations include allowing patients to make a self-referral to physiotherapy, freeing up some 270 GP appointments in five months and cutting waiting times for specialist treatment. Similar self-referral will follow soon for midwifery, potentially freeing up another 400 appointments a year. Another change means patients recovering from a cataract operation no longer need to visit their GP for a repeat prescription of their medication – saving time for both the patient and doctor. The PCH has also introduced social care advisers who offer 'social prescribing', advising patients how to access non-medical services ranging from food banks to social clubs.

PARTNERS

Horsham & Mid Sussex CCG, Queen Victoria Hospital NHS Foundation Trust, Sussex Community Trust, Sussex Partnership Foundation Trust, Age UK, East Grinstead and District, St Catherine's Hospice, East Grinstead Town Council, Brighton and Sussex University Hospitals Trust and West Sussex County Council, South East Coast Ambulance NHS Trust, Local population.

The population covered by this PCH is 40,000.

8. St. Austell Healthcare

St Austell Primary Care Home has employed a part-time Social Prescribing facilitator for the past three months, whose job it is to help patients find support and advice outside the traditional health service - for instance by being 'prescribed' walking or swimming. A more active lifestyle can reduce the risk of diabetes and other conditions. Some 24 patients have joined the social prescribing scheme and 15 have lost weight, including one who shed 12kg and another who lost 9kg.

The PCH has also piloted using integrated teams including district nurses and community matrons to respond to requests for GP visits: in one week, 20 out of 120 request for visits were successfully attended by a member of the community team rather than a GP. Visits are often to elderly people who may need assistance to make adjustments to their home to cope with reduced mobility, and a community team member can help with this often more effectively than a GP.

The community teams are also introducing people with long-term conditions to 'telehealth', where they monitor their own conditions – for instance glucose levels for a diabetic – and report these by phone. A specialist team monitors the measurements and will organise a visit if needed, but many routine visits can in this way be avoided, freeing up staff to care for those who most need their skills.

PARTNERS

Kernow CCG, Kernow Health CIC, Peninsula Community Health, SAH Patient Participation Group (PPG), Cornwall Health Out of Hours (OOH) Service, Cornwall Community Mental Health Team (CMHT), Cornwall Council, Pentreath, Connect and other third sector providers.

The population covered by this PCH is 31,800.

9. Thanet Health CIC

Thanet Primary Care Home covers the Kent seaside towns of Margate, Broadstairs and Ramsgate, with high numbers of retired, elderly people and acute deprivation in some areas. Initiatives include providing Health and Social Care co-ordinators in surgeries to help patients who have non-medical needs but do not know where to turn. These advisers help patients get advice and support from community organisations or council social services. This may be help with assessment for adjustments to their homes to enable them to continue living independently, or advice on how to claim particular benefits.

Other initiatives are focusing on ensuring people in hospital who no longer need high-level medical care can be safely discharged with the right support in the community in place for them. The first five days of one such programme saw 35 patients moved back into the community from hospital, providing a better environment for them and vital extra beds in hospital for those who need them.

PARTNERS

Thanet CIC are working collaboratively with Thanet CCG, the local Community Trust, Kent County Council Social Services, the Voluntary agencies and Acute and Mental Health Trusts, Health and Well Being Board (HWB).

The population covered by this PCH is 47,522.

"Being part of the PCH model has enabled us to focus on a number of areas, from improving care and services for the frail and elderly to staff recruitment and retention to new ways of working. And we're excited to be operating a shadow capitated budget, in place from April 2017 across Thanet to allow more targeted and effective use of resources."

Maria Howdon - Head of Membership Development NHS Thanet Clinical Commissioning Group

10. Wolverhampton Total Health Care

Among the innovations which Wolverhampton Total Health is rolling out are frailty clinics for people identified as moderate to severely frail. They will be offered not just a health check-up but advice on what social services could do to support them - for instance identifying grants which could pay for physical adjustments to their homes, and so enable them to continue living independently.

The Primary Care Home is also to start working with the West Midlands Fire Service, which visits people who report they have fallen using electronic alerts. That information will be fed into the frailty clinics to ensure no-one is being missed, and also to track the overall level of falls in the community.

Other pioneering developments include developing a shared IT system across all eight GP practices in the Primary Care Home, allowing extended hours and new services to be offered across the practices, referring patients at one practice to be referred seamlessly to a specialist at another.

PARTNERS

Wolverhampton Health Federation CIC, Wolverhampton Total Health Care (WTHC), West Midlands Fire Service (WMFS), Wolverhampton CCG, Public Health, healthcare professionals and patient groups.

The population covered by this PCH is 46,665.

"The creation of the Primary Care Home in Wolverhampton has had a miraculous effect in creating a willingness and enthusiasm to work collaboratively within the locality."

Gill Pickavance - Chair Wolverhampton Total Health Care

11. Nottingham North & East Community Alliance

The Nottingham North and East Community Alliance is a group of GP surgeries dedicated to improving primary care for its population. In particular, it will focus on the frailty of the growing numbers of elderly people in the area, and on ensuring parity of esteem for mental health in the services it provides. The PCH will also focus on musculoskeletal disorders, including support and advice for patients to self-manage their conditions where appropriate. The Alliance also plans to introduce a teledermatology service, in which images of a skin condition are reviewed remotely by a specialist using a secure IT system, enabling them to give rapid advice and often avoiding the need for a patient to visit a hospital.

The population covered by this PCH is 25,000.

12. The Winsford Group

The Winsford Group Primary Care Home is planning a series of innovations to improve the health of local people.

A new teledermatology service will enable a specialist to review high-quality images of skin conditions remotely and give the GP and patient authoritative advice on whether further action is needed. The service will reduce the need for patients to travel to hospitals and reduce waiting times for an opinion, which in turn reduces patient anxiety and improves outcomes.

The PCH is also bringing a heart failure clinic out of hospitals into the community, enabling people with the condition to be supported in Winsford by a specially-trained GP, advised and supported by a hospital-based specialist. Again, this reduces the need for unnecessary hospital trips and improves the timely and effective management of the patient's condition.

The Winsford Group will also focus on population lung health, offering 'pop-up' lung health checks in a shopping centre. This has been found to be a more effective way of encouraging people to engage with lifestyle services. It can also identify people with lung cancer at an earlier stage, improving their chances of effective treatment in an area with historically low cancer survival rates.

PARTNERS

Vale Royal CCG, Stakeholders and partners through the Connecting Care Provider board.

The population covered by this PCH is 33,709.

13. Beacon Medical Group

The Beacon Medical Group has pioneered a 'No Waiting Room' initiative to cut down on waits to see GPs. The surgery now offers alternatives to doctors who can be seen more quickly than a GP. The Practice Pharmacist can review a patient's medication, answer any questions about possible side-effects, and advise on the treatment of many common ailments. The Advanced Paramedic Practitioners can deal with many minor injuries and chest and back pain. Nurse Practitioners can quickly provide advice and treatment on a wide range of issues. In all cases, if the specialist cannot give a patient what they need, they will arrange for the patient to see a doctor. But the new system means patients are seen by a trained expert much more quickly than when a GP was the only option.

PARTNERS

NEW Devon CCG – Western Locality*, Plymouth Hospitals Trust, Plymouth Community Healthcare (integrated health and social care provider), Plymouth City Council – as lead commissioner for Public Health and Social Care services, Devon LMC, Devon Local Pharmaceutical Committee and South West Local Professional Network for Pharmacy, Healthwatch and Patient Groups.

The population covered by this PCH is 32,500.

"Since we've joined Primary Care Home we've accelerated transformation in this part of the South West. By demonstrating strong clinical leadership and proactive ownership of broader system issues we have been met with open arms by community and acute peers and are actively pursuing a joint ACO model to redesign population health around our communities. Our change has been organic and across multiple areas which has led to faster and deeper change than we'd ever imagined; its captured the passion and expertise of a generation!"

Claire Oatway - Chief Operating Officer Beacon Medical Group

14. Luton Primary Care Cluster

One of the innovations introduced by the Luton Primary Care Home is a focus on polypharmacy, or patients - often elderly - who are using several different medications. People in this situation need regular monitoring to ensure the different treatments are working well together and are still all needed at the current doses. The PCH is bringing in one-to-one medication reviews with an experienced clinical pharmacist. Here, the pharmacist will discuss with the patient whether they are managing to take all the medication at the right times. He or she will review the current prescriptions to ensure they are still appropriate and delivering benefits. In addition, the pharmacist will carry out a risk assessment on the chances of the patient developing an adverse reaction to any of the medication.

PARTNERS

Cambridgeshire Community service NHS Trust (CCS NHS Trust), Luton CCG including Commissioning and Integration.

The population covered by this PCH is 32,099.

"Since working collectively across primary care and community services boundaries we have developed stronger relationships and have broken down historical barriers and misconceptions. We have created a pathway which puts the patient at the centre and utilises the resources and skills of the wider healthcare community."

Bruce Luter - Assistant Director of Business Development, Contracts and Strategy

15. Richmond

The Richmond Primary Care Home in south west London is trying to break down barriers between different providers of care by providing training and support for workers in residential care homes, improving their recruitment, retention and morale and thereby improving the care residents receive. The PCH is also providing training for pharmacy assistants to improve their sense of identification with other NHS and care provider staff, and understanding of services they can signpost to patients.

In another innovation designed to develop and improve the broader health and care workforce, the PCH is facilitating visits to residential care homes by health and social care students at a local college, to improve their practical and communication skills. The students also undertake training sessions with GPs and practice nurses.

PARTNERS

Richmond CCGs Outcomes Based Commissioning framework and its ambitions.

The population covered by this PCH is 47,501.

Community of Practice Sites

16. Herne Bay Health Care

PARTNERS

NHS Canterbury & Coastal CCG, NHS Ashford CCG, East Kent Hospitals University NHS Foundation Trust, Kent Community Health NHS Foundation Trust, Kent & Medway NHS and Social Care Partnership Trust, South East Coast Ambulance NHS Foundation Trust, Kent County Council.

The population covered by this PCH is 40,834.

17. North Cornwall MCP

PARTNERS

North Cornwall MCP is at a very early stage. We have consensus from 9 GP Practices listed in Q5 below, and support from NHS Kernow CCG.

The population covered by this PCH is 64,350.

18. Truro PCH

PARTNERS

Kernow CCG, Cornwall Health Out of Hours (OOH) Service, Kernow Health CIC, RCHT (Acute Trust), CPfT – mental health and community provider, Cornwall Council, Both Patient Participation Groups, Pentreath, Connect and other third sector providers, Age UK, Volunteer Cornwall, Our local Community Education Provider Network, NHS England Local Team, Truro City Council.

The population covered by this PCH is 31,000+.

19. Perranporth & Penryn PCH

PARTNERS

Kernow CCG, Mental Health and Community Provider, Cornwall Health OOH Service, Kernow Health CIC, RCHT (Acute Trust), Cornwall Council, Patient Participation Groups, Pentreath, Connect and other third sector providers, Age UK, Volunteer Cornwall, Our local CEPN, NHS England Local Team.

The population covered by this PCH is 25,750.

20. Lostwithiel, Fowey, St Blazey Primary care Network

PARTNERS

NHS England Local Team, Age UK, Volunteer Cornwall, Kernow CCG, Cornwall Health Out of Hours (OOH) Service, Kernow Health CIC, Our local Community Education Provider Network, RCHT (Acute Trust), CPfT – mental health and community provider, Cornwall Council, Pentreath, Connect and other third sector providers, Both Patient Participation Groups.

The population covered by this PCH is 25,750.

21, 22, 23. East Cornwall Primary Care Home

PARTNERS

Cornwall Partnership Trust (Community and Mental Health Services), Kernow Health Community Interest Company (County-wide federation of GP practices).

The population covered by this PCH is 104,000.

24. South Kerrier Locality PCH

PARTNERS

Supported by GP owned CIC Kernow Health CIC (in a coalition with the Cornwall Partnership Foundation Trust and Royal Cornwall Hospitals Trust).

The population covered by this PCH is 29,619.

25. Penwith PCH

PARTNERS

Supported by GP owned CIC Kernow Health CIC (in a coalition with the Cornwall Partnership Foundation Trust and Royal Cornwall Hospitals Trust).

The population covered by this PCH is 64,265.

26, 27. Integrated care Exeter

PARTNERS

Age UK Exeter, Devon Community Foundation, Devon County Council, Exeter City Council, Exeter Community Initiatives, Exeter CVS, Exeter Primary Care Ltd, New Devon Clinical Commissioning Group, Public Health (Devon County Council), Royal Devon & Exeter NHS Foundation Trust, South West Academic Health Science Network, Westbank.

The population covered by this PCH is 89,008.

28, 29, 30, 31. South Kent Coast Integrated Accountable Care

PARTNERS

Supported by the Integrated Executive Provider Board for South Kent Coast IACO, NHS South Kent Coast CCG, East Kent Hospitals University Foundation Trust (EKHUFT), Kent & Medway NHS and Social Care Partnership Trust (KMPT), Kent Community Health NHS Foundation Trust (KCHFT), South East Coast Ambulance NHS Trust (SECamb).

The population covered by this PCH is 89,008.

32. Stafford Primary Care Alliance

PARTNERS

Staffordshire and Stoke On Trent Partnership NHS Trust, South Staffordshire and Shropshire Healthcare NHS Foundation Trust, University Hospital North Midlands NHS Foundation Trust, GP First Federation.

The population covered by this PCH is 46,695.

33. Lichfield / Burntwood Network

PARTNERS

6 GP practices, Burton Hospital Foundation Trust, South Staffordshire and Shropshire Healthcare Foundation Trust, Stoke on Trent Partnership Trust.

The population covered by this PCH is 68,869.

34, 35, 36, 37. Redditch & Bromsgrove Alliance

PARTNERS

Worcestershire Health and Care NHS Trust, Worcestershire County Council, North Worcestershire Healthcare Limited, Bromsgrove Primary Care Network, Redditch Borough Council, Bromsgrove District Council, Worcestershire Local Medical Committee.

The population covered by this PCH is 174,921.

38. Wolverhampton Care Collaborative

PARTNERS

NHS Wolverhampton CCG, Royal Wolverhampton Hospital, Wolverhampton Total Care PCH, Local authority.

The population covered by this PCH is 42,838.

39, 40, 41, 42, 43. Wyre Forest Alliance

PARTNERS

Wyre Forest Federation, Wyre Forest Health Partnership, Worcestershire Health and Care NHS Trust (Countywide Community and Mental Health Provider), Adult Social Care, Wyre Forest CCG, Worcestershire Acute Hospitals NHS Trust.

The population covered by this PCH is 114,574.

44. Newgate Medical Group

PARTNERS

Doncaster and Bassetlaw District General Hospital, Nottinghamshire Healthcare Trust, Bassetlaw CCG, Bassetlaw District Council, Healthwatch.

The population covered by this PCH is 30,090.

45. Riverside Health Centre

PARTNERS

Doncaster and Bassetlaw District General Hospital, Nottinghamshire Healthcare Trust, Bassetlaw CCG, Bassetlaw District Council, Healthwatch.

The population covered by this PCH is 45,565.

46. Middlewood Ltd

PARTNERS

Vernova Healthcare CIC, East Cheshire Trust, Cheshire East Council.

The population covered by this PCH is 33,000.

47. OneLeeds PCH

PARTNERS

NHS Leeds North Clinical Commissioning Group, Leeds and York Partnership NHS Foundation Trust, Leeds Community Healthcare, The Leeds Teaching Hospitals NHS Trust, NHS England, Leeds City Council, Connect Well – social prescribing partnership with the third sector (led by Community Links).

The population covered by this PCH is 34,705.

48, 49. Derwentside Healthcare LTD

PARTNERS

Plans to enlist the support from our local NHS Foundation Trusts (specifically County Durham and Darlington Foundation Trust), Mental Health Trust, Local Authority, NHS 111, our Shareholders and local CCG.

The population covered by this PCH is 93,453.

50. Hammersmith & Fulham GP Federation (Network3)

PARTNERS

Imperial College Healthcare NHS Trust, Hammersmith & Fulham GP Federation, Chelsea & Westminster NHS Foundation Trust, West London Mental Health Trust.

The population covered by this PCH is 49,705.

51. Central Crewe Cluster

PARTNERS

NHS Mid Cheshire Hospitals Foundation Trust, Cheshire and Wirral Partnership, South Cheshire GP Alliance, Central Cheshire Integrated Care Partnership, East Cheshire NHS Trust, Cheshire East Council, Winsford Group Primary Care Home.

The population covered by this PCH is 41,000.

52, 53, 54, 55. South Cheshire and Vale Royal Primary Care Home Network

PARTNERS

Mid Cheshire Hospitals NHS Foundation Trust (MCHFT), Cheshire and Wirral Partnership NHS Foundation Trust (CWP), South Cheshire and Vale Royal GP Alliance (SC&VRGPA), Central Cheshire Integrated Care Partnership (NHS community services) (CCICP), Cheshire East Council (CEC), Cheshire West and Chester Council (CWAC), Winsford Group Primary Care Home (WPCH), Voluntary Sector organisations, NHS South Cheshire CCG Patient Participation Federation, NHS Vale Royal (patient participation) Health Forum.

The population covered by this PCH is 210,000.

56, 57, 58. Nimbus Care York

PARTNERS

Vale of York CCG (VoYCCG), Local Provider Alliance Board (PAB), York Teaching Hospitals Foundation Trust (YTHFT), Tees Esk and Wear Valley Mental Health Trust (TEWV), City of York Council (CYC), North Yorkshire County Council (NYCC), Community & Voluntary Sector.

The population covered by this PCH is 129,000.

59, 60, 61, 62. Wirral GP Provider Federation

PARTNERS

Wirral GPW-Fed, NHS Wirral CCG, Local community trust services, Local Authority about integrating social care and serve public health services, Acute Trust interested in supporting “out of hospital” care collaboration.

The population covered by this PCH is 142,000.

63, 64, 65, 66. 3Sixty Care

PARTNERS

Kettering General Hospital NHS Foundation Trust, Northampton General Hospital NHS Trust, GP Alliance, Principal Medical Limited and Lakeside Healthcare), our CCGs and our local authority (Northamptonshire County Council), Corby and Nene CCGs.

The population covered by this PCH is 240,000.

67. Rutland Medical Group

PARTNERS

Rutland County Council, Leicestershire Partnership NHS Trust.

The population covered by this PCH is 36,500.

68. East Norfolk Medical Practice

PARTNERS

NHS Great Yarmouth and Waveney, Norfolk Social services (joint posts with ECCH), Norfolk and Suffolk Foundation Trust (joint posts with ECCH) JPUH, Great Yarmouth Borough Council.

The population covered by this PCH is 55,790.

69. Newport Pagnell Medical Centre

PARTNERS

AGE UK, High Impact Team, Milton Keynes Rapid Assessment and Intervention Team (RAIT), Milton Keynes Reablement at Home Team (RaHT), Social services, Falls service, Community Occupational Therapy (OT) and physiotherapy, Continuing health care team, Care agencies, Brooklands Groups of which there are many, Alzheimer's society who help us with the Carers group, Milton Keynes University Hospital.

The population covered by this PCH is 20,145.

70, 71, 72, 73, 74, 75, 76, 77. Durham Dales, Easington and Sedgefield CCG

PARTNERS

Durham County Council, County Durham and Darlington FT, Tees, Esk and Wear Valleys FT.

The population covered by this PCH is 280,000.

78, 79, 80. Ashford Clinical Providers Network Ltd (Federation)

PARTNERS

East Kent Strategy Board and Partners including: South East Coast Ambulance Service NHS Trust, Public Health/Kent County Council, Kent Community Health Foundation Trust, General Practices forming the Federation, Ashford Clinical Commissioning Group, Primecare (Out of Hours provider), NHS 111, East Kent Hospitals Foundation Trust, Kent and Medway Partnership Trust, Kent Health Institute of Medicine (KIMS) and Social Care/ voluntary organisations.

The population covered by this PCH is 125,000.

81. Redhill & Merstham

PARTNERS

First Community Health and Care (Community Health Services Provider), Surrey County Council Adult Social Care, Surrey and Borders Partnership NHS Foundation Trust (Mental Health Provider).

The population covered by this PCH is 53,000.

82. Lewes Health Hub

PARTNERS

Sussex Community Foundation Trust, Sussex Community Development Association, Sussex Partnership NHS Foundation Trust.

The population covered by this PCH is 30,000.

83. Horsham PCH

PARTNERS

Horsham and Mid Sussex CCG, Sussex Community Foundation Trust, Sussex Partnership Foundation Trust, West Sussex County Council, Brighton and Sussex University Hospitals Trust and South East Coast Ambulance NHS Trust, Horsham District Council.

The population covered by this PCH is 77,700.

84. Burgess Hill and Villages PCH

PARTNERS

Horsham and Mid Sussex CCG, Sussex Community Foundation Trust, Sussex Partnership Foundation Trust, West Sussex County Council, Brighton and Sussex University Hospitals Trust and South East Coast Ambulance NHS Trust, Horsham District Council.

The population covered by this PCH is 52,750.

85. Haywards Heath PCH

PARTNERS

Horsham and Mid Sussex CCG, Sussex Community Foundation Trust, Sussex Partnership Foundation Trust, West Sussex County Council, Brighton and Sussex University Hospitals Trust and South East Coast Ambulance NHS Trust, Horsham District Council.

The population covered by this PCH is 64,150.

86. Dorking Primary Care Home

PARTNERS

Dorking Healthcare Ltd – outpatients, investigations, IAPT, counselling, CSH (Surrey) – community health services provider, Epsom and St Helier University Hospitals NHS Trust – acute services.

The population covered by this PCH is 41,942.

87. South Camden Primary Care Neighbourhood

PARTNERS

Central North West London Healthcare NHS Foundation Trust, Royal Free London NHS Foundation Trust, University College Hospitals NHS Foundation Trust, London Borough of Camden Council, Camden & Islington NHS Foundation Trust, Voluntary Action Camden.

The population covered by this PCH is 49,734.

88. Hampstead Primary Care Neighbourhood

PARTNERS

Central North West London Healthcare NHS Foundation Trust, Royal Free London NHS Foundation Trust, University College Hospitals NHS Foundation Trust, London Borough of Camden Council, Camden & Islington NHS Foundation Trust, Voluntary Action Camden.

The population covered by this PCH is 48,287.

89, 90, 91. Ramsgate PCH, Margate PCH, Quex PCH, Broadstairs PCH

PARTNERS

East Kent Hospitals University Foundation Trust, Kent Community Hospitals Foundation Trust, Kent County Council, Kent and Medway Partnership Trust (Mental Health Trust), Thanet District Council, Integrated Care 24, South East Coast Ambulance Service, Thanet Adult Strategic Partnership (Voluntary Sector).

The population covered by this PCH is 144,317.

92. Newport District Neighbourhood project

PARTNERS

Shropshire Community Healthcare NHS Trust, Telford and Wrekin Council, South Staffs and Shropshire Healthcare NHS Trust.

The population covered by this PCH is 28,050.

Primary Care Home Sites coverage by CCG & STP Footprint

Primary Care Home Site	CCG	STP footprint
Hammersmith & Fulham GP Federation (Network3)	NHS Hammersmith and Fulham CCG	South West London STP
Richmond PCH (Rapid Test Site)	NHS Richmond CCG	
South Camden Primary Care Neighbourhood	NHS Camden CCG	North Central London STP
Hampstead Primary Care Neighbourhood		
Rugeley Practices PCH (Rapid Test Site)	NHS Canock Chase Clinical CCG	Staffordshire STP
Stafford Primary Care Alliance		
Lichfield/Burntwood Network		
Nottingham North and East Community Alliance	NHS Nottingham North and East CCG	Nottinghamshire STP
Redditch & Bromsgrove Alliance	NHS Redditch and Bromsgrove CCG	Herefordshire and Worcestershire STP
Wyre Forest Alliance	NHS Redditch and Bromsgrove CCG	
Wolverhampton Total Health Care PCH (Rapid Test Site)	NHS Wolverhampton CCG	The Black Country STP
Wolverhampton Care Collaborative		
3Sixty Care	NHS Corby and Nene CCG	Northamptonshire STP
Rutland Medical Group	NHS East Leicestershire and Rutland CCG	Leicestershire and Rutland STP
East Norfolk Medical Practice	NHS Great Yarmouth and Waveney CCG	Norfolk and Waveney STP
Breckland Alliance PCH (Rapid Test Site)	NHS South Norfolk CCG	

Primary Care Home Sites coverage by CCG & STP Footprint

Primary Care Home Site	CCG	STP footprint
Luton Primary Care Cluster PCH (Rapid Test Site)	NHS Luton CCG	Milton Keynes, Bedfordshire and Luton STP
Newport Pagnell Medical Centre	NHS Milton Keynes CCG	
Newport District Neighbourhood Project	NHS Telford and Wrekin CCG	Shropshire Telford and Wrekin STP
Middlewood Ltd	NHS Eastern Cheshire CCG	Cheshire and Mersey STP
The Winsford Group PCH (Rapid Test Site)	NHS South Cheshire and Vale Royal CCGs	
Central Crewe Cluster		
South Cheshire and Vale Royal Primary Care Home Network		
Wirral GP Provider Federation	NHS Wirral CCG	
South Durham Health CIC PCH (Rapid Test Site)	NHS Durham Dales, Easington and Sedgfield CCG	Durham, Darlington and Tees, Hambleton, Richmondshire and Whitby STP
Durham Dales, Easington and Sedgfield CCG		
Nimbuscare York	NHS Vale of York CCG	Humber, Coast and Vale STP
1st Care Cumbria PCH (Rapid Test Site)	NHS Cumbria CCG	Cheshire and Mersey STP
Derwentside Healthcare LTD	NHS North Durham CCG	Northumberland Tyne and Wear STP
Larwood and Bawtry PCH (Rapid Test Site)	NHS Bassetlaw CCG	South Yorkshire and Bassetlaw STP
Newgate Medical Group		
Riverside Health Centre		
OneLeeds PCH SOUTH 33 Sites	NHS Leeds North CCG	West Yorkshire STP

Primary Care Home Site	CCG	STP footprint
Bristol Primary Care Collaborative Partnership PCH (Rapid Test Site)	NHS Bristol CCG	Bristol, North Somerset, South Gloucestershire STP
St Austell PCH (Rapid Test Site)	NHS Kernow CCG	Cornwall and the Isles of Scilly STP
North Cornwall MCP		
Truro PCH		
Perranporth & Penryn PCH		
Lostwithiel, Fowey, St Blazey Primary care Network		
East Cornwall Primary Care Home		
South Kerrier PCH		
Penwith PCH		
Beacon Medical Group PCH (Rapid Test Site)	NHS Northern, Eastern and Western Devon CCG	Devon STP
Integrated care Exeter		
Herne Bay Health Care	NHS Canterbury and Coastal CCG and NHS Ashford CCG	Kent and Medway STP
South Kent Coast Integrated Accountable Care	NHS South Kent Coast CCG	
Ashford Clinical Providers Network Ltd (Federation)	NHS Ashford CCG	
Thanet CIC PCH (Rapid Test Site)	NHS Thanet CCG	
Ramsgate PCH, Margate PCH, Quex PCH, Broadstairs PCH		

Primary Care Home Sites coverage by CCG & STP Footprint

Primary Care Home Site	CCG	STP footprint
Dorking Primary Care Home	NHS Surrey Downs CCG	Surrey Heartlands STP
Redhill & Merstham	NHS East Surrey CCG	Sussex and East Surrey STP
Lewes Health Hub	NHS High Weald Lewes Havens CCG	
Healthy East Grinstead PCH (Rapid Test Site)	NHS Horsham and Mid Sussex CCG	
Horsham PCH, Burgess Hill and Villages PCH, Haywards Heath PCH		

*“This programme offers an innovative approach to strengthening and re-designing primary care, centred around the needs of local communities, and tapping into the expertise of a wide array of health professionals...
...this new programme shows health professionals across primary care are committed to change and working in partnership. This will be another step towards greater integration between primary and secondary care and to providing personal population-orientated primary care where physical, mental and social care is integrated around the needs of communities, particularly older frail people with long term conditions. This will complement the delivery of the vanguards.”*

Simon Stevens,
NHS England Chief Executive

Notes

Notes

Are you interested in developing a Primary Care Home for your local population?

Join our Community of Practice.

Contact the NAPC for more details:

email: napc@napc.co.uk or call: 0207 636 7228

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