



DOES THE PRIMARY CARE HOME MAKE A DIFFERENCE?

Understanding its impact

PCHs have been successful in releasing a range of benefits for patients, staff, practices and the wider system

Pilot Site Example Benefits		
A&E Attendances	▼	£27k of savings each year enabled by providing extended primary care access in Thanet
A&E Admissions	▼	£295k of savings from reductions in A&E admission driven by Thanet Health
GP Referrals	▼	330 GP referrals to hospital avoided given a slowdown in the growth rate demonstrated by Beacon Medical Group
Prescribing Costs	▼	£220k of prescribing savings demonstrated by Larwood and Bawtry
Staff Satisfaction	▲	67% of staff surveyed felt that PCH had improved their job satisfaction
Utilisation	▲	78% of staff felt PCH had decreased or not added to their workload
Staff Retention	▲	86% of staff regarded Beacon Medical Group as a good employer
Patient Experience	▲	82% of staff felt that PCH had improved patient experience
GP Waiting Time	▼	6 day reduction in the average time patients wait to see their GP
Population Health	▲	13% increase in flu vaccinations for patients with COPD registered with Beacon Medical Group
Length of Stay	▼	8 day reduction for admitted care home residents registered with Beacon Medical Group

The characteristics of the PCH model and the environment that it creates enables rapid progress in addressing priorities for the local health economy

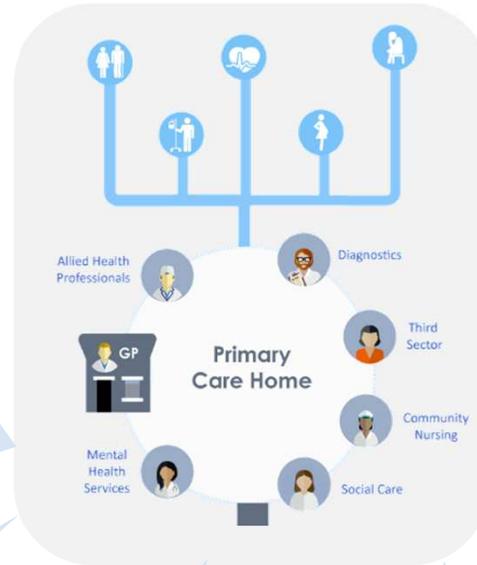
We have identified features that are important to enabling primary care transformation. These are aligned with the four characteristics that define the PCH model:

- 1 The PCH is developed, implemented and led by providers while being supported by commissioners
- 2 Providers release benefits by working at a the right level to effect change
- 3 The PCH model fosters collaboration throughout the system
- 4 Staff are activated to become the drivers of positive change

Some quotes from what we heard

"I feel that working collaboratively as part of an integrated, multi-agency team we have been able to make a real difference to the patient experience and in many cases we have had a huge positive impact on patients' lives. How do we know this? Because the patients have told us so"

Partnership Officer, Bassetlaw Community and Voluntary Service



"This has opened numerous doors and conversations with patients and partners across the wider system to develop opportunities for more joined up care"

GP, Beacon Medical Group

"There's a real energy for change and new ideas can be implemented quickly"

GP, Larwood and Bawtry

"Working in this way has made me want to defer my retirement"

District nurse, Larwood and Bawtry

"I feel it makes a massive difference to patient care and patient experience. Our Meridian surveys confirms this"

Support Worker, Thanet

"There is a 'happy buzz' at our practice since PCH has started"

Practice pharmacist, Larwood and Bawtry

The Next Stage:

Embedding performance improvement and impact assessment into every PCH

Evaluating more sites lets us demonstrate the benefits of PCH and also understand why PCH works

3 Sites

What: Discovery of **indicative benefits**

How: A pragmatic and flexible **evaluation methodology**

14 Sites

What: A **compelling case for investment** both locally & nationally

How: A **standardised methodology** that forms the basis of a light touch performance reporting framework

169 Sites

What: A robust **causal argument whether PCH works** and confidence to extrapolate nationally

How: An established **performance reporting framework**

All future sites

What: A **return on Investment of PCH** and an evidenced understanding of **what features of PCH drive success**

How: An **embedded performance improvement framework** that generates automated insights

Evaluation evolves into performance improvement