

MCP Integrated Referral & Information System

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1. Introduction

This document introduces the vision and requirements Dudley Clinical Commissioning Group (CCG) place on the Multispecialty Community Provider (MCP), to develop an integrated telephone, mobile and on-line access system for patients, and health and social care professionals for the delivery of services. The detail, piloting and specific components of the system will be the responsibility of the MCP to determine; this document is provided to enable the MCP to understand the scope and aspirations of this initiative. Dudley CCG believes this initiative will complement the aspirations of the MCP and be a key enabler in the development of a tangibly more integrated and efficient health and social care system. The proposed system will clearly complement and enhance the delivery of the MCP's key themes of **access, continuity and co-ordination**.

The intention of this document is to enable the MCP to understand, support and deliver an encompassing telephony and digital platform, advice, referral and support service which will underpin its services for the benefit of patients and professionals.

2. Vision

To complement the MCP **access, continuity and co-ordination** vision the CCG proposes that a new service and infrastructure should be established to improve efficiency and to support the creation of this new form of organisational working. This new infrastructure might include:

- Creating a single telephony and online digital point of access for patients, and health and social care professionals;
- Seamless and immediate navigation to appropriate professionals within the MCP – for patients to clinicians, and clinicians to clinicians, which also minimises requirements for transfers; Governance and systems which reduce the number of repeat assessments that service users experience;
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- Links through to patient reported outcomes and collecting patient experience and feedback on services; and
- Links through to the MCP Prospectus and section on key characteristics around the use of digital technology.

3. Objectives

It is for the MCP to describe its preferred solution for achieving the vision, be this through a bespoke service, or in partnership with providers offering similar services. The key measures of success are an operational service that:-

- radically improves ease of access to services for patients, users and practitioners by consolidating into one telephone number and digital portal, a vast range of telephone and online service access points currently in use;
- supports practitioners to improve the coordination and responsiveness of services, preventing delays, duplications in patient pathways and reducing avoidable admissions in hospital;
- enhances better integration of existing locality based services;
- improves communication between health and other social care professionals and other providers of care;
- creates common outcomes to referral eligibility criteria and access to care;
- maximises the existing directory of services that can be accessed by teams;
- co-ordinates information and signposts patients and professionals to services;
- systematically captures service capacity gaps to inform future service provision;
- Reduces call volumes and creates operational efficiencies; and
- Is used a mechanism to collect and report patient outcomes and patient experience and feedback on services.

This work will also complement the characteristics for digital technology as detailed in the MCP prospectus and particularly the following:

- A single central repository of shared information accessible by all members of the MCP and patients;
- Integrated care records updated in real time and centered around the individual;
- Multiple access channels; and
- Capacity to support integration with emerging technologies and apps.

Dudley CCG also believes this initiative could be used proactively by the MCP to further enhance patient care. An integrated approach to telephony and the use of new media channels could be utilised to support particular cohorts of patients; for example:

- appointment reminders;
- Medication reviews;
- Call and recall for vaccination and screening;
- alerts from a patient's telehealthcare device; and
- Collecting patient experience of services.

See Appendix 1 for further detail on the inputs, activities, outcomes and anticipated impact of this proposal.

4. Deliverables

Detail on which providers and services will be included in this initiative have yet to be fully established and will be dependent on the MCP mapping demand profiles, call volumes, telephony infrastructure, contracts and staffing across its portfolio of services. It is believed that this initiative will make a key contribution to the MCP programmes strategic objectives and these are summarised below:

Access - The integrated referral and information system will become a significant enabler for improving patient, user and practitioner access.

Continuity - It is anticipated that the merging and integration of multiple services into a single offer will significantly enhance continuity of service, create efficiency savings and improve resilience for the MCP services.

Coordination - When realised, the service will be a significant enabler to the coordination of and access to services for patients, health and social care professionals and MCP staff.

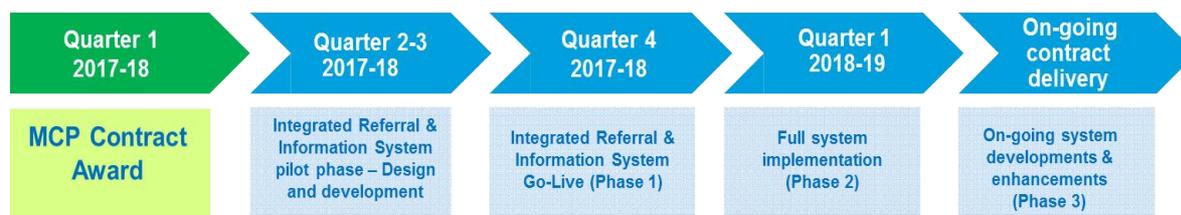
Efficiency - To be determined, but it is anticipated as being potentially significant in regards to reducing duplication of running and infrastructure costs across health and social services delivered to the MCP care.

5. Current Position

Upon the publication of Dudley CCG Commissioning Intentions in October 2015, Dudley CCG began early consultation with the public and professionals on their views on an integrated telephony and digital access service for Dudley. The data and results of these engagement exercises and consultations will be shared with the MCP and will provide a valuable baseline for the development of the initiative. Whilst the design of the Integrated Referral and Information system is yet to be developed and cannot be fully defined at this stage, the local NHS 111 Integrated Urgent Care Service provider will advise and support the development of this initiative, this may range from providing telephony links, to handling additional call volumes currently handled through other local providers.

6. Requirements of the MCP

The operational components of this initiative are likely to go-live in a controlled and phased approach. Some may be ready during the mobilisation of the MCP contract and others integrated throughout its duration. It is to be understood that not all of the above objectives and deliverables will be functional at the outset of the MCP contract. The high level timeline below gives an overview of this process:



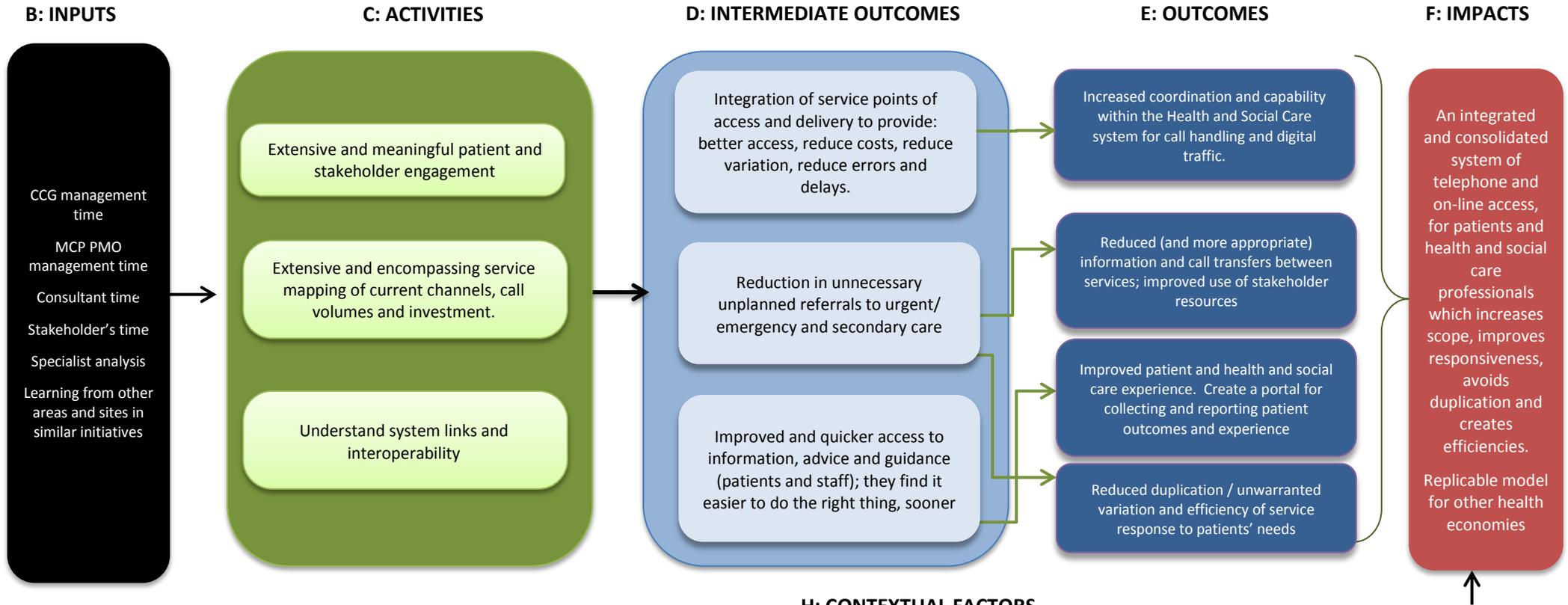
Dudley CCG expects that the net revenue impact will be neutral over the first five years of the contract, allowing for the anticipated benefits. As a result annual savings should be realisable over the remainder of the contract. Any net cost benefits and efficiency savings achieved from the MCP integrated informational and referral system will be re-invested back into services.

There is an expectation that the MCP will supply a dedicated staff resource to support the development of the integrated referral and information system. The MCP will therefore lead on the scoping, piloting and delivery of the initiative. This process will include MCP staff working alongside Dudley CCG to achieve deliverables and provide dedicated input into the design, ongoing development and implementation. The support from the MCP should include any technical and telephony expertise, operational expertise, digital accessibility expertise and general project support required to achieve the aims of this initiative. This dedicated MCP support should be available during mobilisation and through the lifetime of the contract where appropriate to achieve the project requirements detailed within this document.

Appendix 1

A: RATIONALE

Within the Dudley Health and Social Care economy there are currently a myriad of points of telephone contact, digital channels and information services in use by patients and professionals. The MCP should seek to consolidate 'wherever possible' telephone and on-line support, referral and information channels into a single shared and governed service offer. In doing so the MCP will simplify access, create efficiencies and improve user experience.



G: CORE ASSUMPTIONS

Key health and social care providers with call handling functions will welcome and be open to a single consolidated MCP service. That patients will prefer this model in trade off for possibly losing their current route for accessing services.

H: CONTEXTUAL FACTORS

The complexity of mapping current use of telephony and online access across the health and social care system. The complexity of integrating (wherever possible) different service offers into a single shared operational framework. Challenges around developing a joint funding model for a multi provider initiative. Meeting and managing the patient / public / professional expectation of the SPP in regards to implementation, risks and concerns.