

Last updated on the 15th July 2016

Dudley CCG Consultation – Developing a Multi-specialty Community Provider (MCP) Frequently Asked Questions

Please note: this is a live document and we will update it each week of the consultation period to reflect the questions we are asked.

Q: What is an MCP?

A: MCP stands for Multi-specialty Community Provider. The MCP will bring all the relevant community services together in a single organisation, to deliver improved outcomes for our population by improving the access, continuity and coordination of care through the integration of services around the person and their GP practice.

Services include: GP practices, community nurses, community health and mental health services, community-based services such as physiotherapy, relevant hospital specialists and others to provide care in the community that is joined up and puts patients at the centre.

Q: What does MCP mean?

A: M – Multi-specialty – provides a wide range of specialty care

C – Community – community based

P – Provider – provider of services

Q: Why did you decide to develop an MCP rather than another model?

A: We want to improve the health of the whole population on a sustainable basis. An MCP provides the best means of achieving this.

Q: Could the new MCP be run by an external/ private provider?

A: Yes, although we will not know the provider until we have been through a fair procurement process. We do know that a key characteristic of the MCP is it must have a registered list of patients so they would have to work with general practice's in Dudley who already have registered lists to achieve this.

Q: If the MCP is a non NHS provider can you guarantee that they won't make profit?

A: Even NHS organisations make 'profits' or 'surpluses'. We will be looking to ensure these are reinvested in the provision of services.

Q: Can't Dudley CCG become the MCP?

A: Dudley CCG is a commissioner not a provider of services. Our role is the planning and commissioning of services. The CCG will contract with the MCP to provide NHS services.

Q: Could the MCP change the way that services operate?

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A: The way that we are planning to buy services from the MCP will mean that they have much more control over the way that services operate, so long as they are achieving the outcomes which we set out. They will not be able to make any significant service changes without talking to local people first though so nothing will change in that respect and we hope that through outcomes set by the people of Dudley, they will be even more accountable to people who use services.

Q: How will the MCP improve access to services like my GP?

A: The MCP contract will contain specific standards aimed at improving waiting times for all services including GPs.

Q: What is an MDT?

A: It stands for Multi-Disciplinary Team. This is a team of people including community mental health workers, social care workers, district nurses, practice pharmacists, voluntary link sector workers and others. They are brought together as teams around the GP practice and they work together to look at the needs of each patient to achieve better continuity and coordination of care.

Q: Will the MCP employ people in its own right?

A: Yes the MCP will employ its own staff

Q: When will the MCP be up and running?

A: Under our current plans, the new MCP contract will be awarded in April 2017. We are allowing for a 12 month mobilisation period so the MCP will be operational from 1st April 2018 at the latest.

Q: Will staff currently working for providers to deliver these services be transferred across to the MCP?

A: Yes

Q: Have you done any modelling to prove that the MCP will make things better, for example less people going to hospital?

A: A number of schemes to be implemented by the MCP are designed to reduce admissions to hospital. We want to enhance access to primary care by having more appointments available.

Q: Is social care included in the MCP?

A: No not at this stage. This may be a development for the future. Some social care staff are likely to be seconded to the MCP.

Q: Will the MCP deliver services to adults and children?

A: Yes

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Q: Will all mental health community services be delivered by the MCP?

A: Yes, it is intended that all mental health services will be included in the MCP's budget.

Q: What about Public Health services?

A: Some services commissioned by the Office of Public Health may be provided by the MCP, e.g. health visiting, sexual health, substance misuse

Q: What about ambulance services?

A: Emergency ambulance services will not be provided by the MCP. Non-emergency patient transport will be provided by the MCP.

Q: When you are talking about subcontracting, what does this mean?

A: The new MCP may not be able to provide all of the services themselves. So whilst they will hold the contract and budget with the CCG for those services they may ask others (subcontract) to provide certain elements of service. This is called a sub contract.

Q: Will mental health patients be lost in this system of care?

A: No. The new system will ensure that both the mental and physical needs of patients are met. We call this "parity of esteem"

Q: Are we going back to having a Primary Care Trust (PCT) again?

A: No. A PCT was both a commissioner and a provider. It also provided less services than an MCP. The range of MCP services will be greater and it will not commission services.

Q: Who are the possible future providers of the MCP?

A: All of the main current providers - Dudley Group of Hospitals, Dudley & Walsall Mental Health Partnership NHS Trust, Black Country Partnership NHS Foundation Trust are all possibilities. A key characteristic of the MCP is that the provider has a registered list of patients so they would have to work with general practice.

Q: How many vanguards exist? What are they doing in relation to what we're doing?

A: There are 50 vanguards in total; we are one of 14 who are developing an MCP

Q: Is there extra money and support for this new way of working?

A: Dudley has received money from the New Care Models programme at NHS England to support the development of an MCP. However, the new model of care in Dudley will need to operate within the same budget as it currently does. Essentially, there is not going to be a real increase in the total money available for healthcare in Dudley but there will be a shift of resource from hospital care to community and primary care.

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