Delivering the NHS Mandate – Priorities for Patient Participation
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1. **The Challenge.** Why is this so important? The moral case. Finance. The changing business of health.

2. **The NHS Mandate.** What has NHS England been asked to do?

3. **Evidence based thinking** – Do we know what works?

4. **Developing a shared vision**

5. **Developing a systems approach to delivery**
Moral case. When your life is defined by NHS – participation in care can transform your life

- Frustrated, articulate man, Robert, with ‘treatment resistant schizophrenia’ miles from home. Wanted flat, a job and friends for years. Care cost £100k per year for 7 years. No plan. No voice.

- Middle aged woman, Mary, with personality disorder, in poor out of area private provision. Shared bathroom between 10 on ‘ward’ with others including men. Terrible life. No plan.

- Woman with arthritis and chronic pain, Angela, never having had information or support to manage condition. Snippets of reactive care.
Finance Challenge. Unsustainable care model. Efficiency not enough

Face decade without any increase in spending, unprecedented in NHS history, set against rising demand (4% pressure pa)
Old model passive patient, one disease vs. rise of multiple LTCs

What business are we really in?
- 15m with LTCs
- Massive rise in population with a co-morbidity
- Most GP sessions LTCs
- 77% bed days
- 70% spend
- Mostly self manage, 5800 waking hours pa

Source: Department of Health analysis of ONS projections and GHS

Source: ONS population projections and General Household Survey
Traditional NHS models will need to be radically rethought.

- **Financial case.** Efficiency will not be enough. We need new sources of value, increasing the outputs/outcomes, not just more efficient staff.

- In retail we have seen a revolution in the co-production of value by consumers (here patients) to create new value.

- **Model of care must change.** Acute focused, episodic single disease models will not work. We need active patients, self-managing multiple long term conditions and supporting each other. We will need proactive, personalised care planning to support & manage multiple morbidities.

- People as ACTIVE PARTNERS in control of their care
Customer participation has created new forms of value and transformed customer service in other sectors

Patients as co-producers not just consumers

Public Sector coproduction – recycling
People now sort own waste, producers not just consumer
Transformed economic model and great for environment

Online banking – a consumer success story
- Launched in the US in 1994 and in the UK in 1998
- Now >22M adult users (>50% of computer users)

Consumer applications offered with digital banking

Access to records
- Online banking offers access to personal bank account applications in a secure environment
- Healthcare equivalent: access to the medical record

Ability to transact
- Customers pay bills and receive payments
- Healthcare equivalent: ability to receive test results

Ability to book appointments
- Online banks offer real time facilities to book meetings and calls with advisers
- Healthcare equivalent: ability to email your doctor

SOURCE: Financial Fraud Action UK
The NHS Mandate Objective:

• “To ensure the NHS becomes dramatically better at involving patients… empowering them to manage and make decisions about their own care and treatment.”

• “by 2015… more people managing own health… everyone with LTCs including MH, offered a personalised care plan… patients who could benefit have the option to hold a personal health budget… information to make fully informed decisions.”

• Shared decision making, self-management, PHBs, information and personalised care planning all linked
Evidence of what works – better outcomes, particularly high needs

Information as a supported service

• Targeted information and support. Risk stratification, health literacy and activation key to lifestyle change. Built into professional models.

Shared decision making (literature focused on PDAs)

• Stronger on experience of care than outcomes, some reduction in use of services (surgery)

• Information and decision aids necessary, not sufficient

Personalised care planning and Personal Health Budgets

• Cost effective, improve QoL, best for high needs with support

Self Care and Self Management Support

• Impact of behaviours, QoL, symptoms and resources.
Passive information less effective than proactive support

Source: Health Foundation 2011 Helping People Help Themselves
NESTA People Powered Health report showed it could reduce the cost of healthcare by 7% or £4.4 bn in England. Reduced A&E attendances, inpatient admissions and outpatient visits.

<table>
<thead>
<tr>
<th>Business case scenario</th>
<th>Total benefit (£m)</th>
<th>Percentage of average CCG budget (%)</th>
<th>Benefit per patient (£)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scenario 1: Median of all studies</td>
<td>59</td>
<td>20</td>
<td>322</td>
</tr>
<tr>
<td>Scenario 2: Minimum reported impact</td>
<td>12</td>
<td>4</td>
<td>64</td>
</tr>
<tr>
<td>Scenario 3: Highest level of evidence</td>
<td>21</td>
<td>7</td>
<td>113</td>
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</tbody>
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The Shared Vision – building on the important work of others

Organisational processes

Engaged, informed patient

Collaborative care planning consultation

HCP committed to partnership working

Commissioning – The foundation

SOURCE: adapted from NESTA slide
# The Shared Vision – building on the important work of others

<table>
<thead>
<tr>
<th>Existing model of care</th>
<th>Participative model</th>
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<tbody>
<tr>
<td>Patients passive recipient of care</td>
<td>Patients co-produce their care</td>
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<tr>
<td>Passive information without support</td>
<td>Targeted information with support</td>
</tr>
<tr>
<td>Single disease treated reactively</td>
<td>Personalised proactive care planned</td>
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<tr>
<td>NHS shapes lives to meet its needs</td>
<td>NHS supports people to achieve their goal</td>
</tr>
<tr>
<td>Short GP consultation on single issue</td>
<td>GP targeted care planning for multiple LTCs</td>
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<tr>
<td>Dependency on professionals</td>
<td>group consultation, peer support, expert patients</td>
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<tr>
<td>Reactive acute care</td>
<td>Integrated teams, case management</td>
</tr>
</tbody>
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*SOURCE: inspired and adapted by NESTA People Powered Health*
This is a huge challenge – counter cultural 65+ years

% who felt as involved in inpatient care as they would like
Individual patient participation in their own care
NHS England to support commissioning system

- **Individuals identified and assessed**
  - Personalised / integrated Care Plans Agreed with PHB offer

- **Commissioned packages & support services**
  - Universal online & phone offer. Leadership culture, training

- **Evaluate/metrics** – outcomes, involvement, cost

- **Information as a service** (Pro-active coaching, edu, trainers to PDAs, Info prescriptions, to online courses, care records)

- **Professional training in SDM, integrated care teams, advocacy, peer networks**

- **Risk stratification, CHC, LTC, end of life care**
Duty in 2012 Act on commissioners to promote patient involvement in their treatment and care. Options include:

- personalised care planning with appropriate support
- patient decision aids and information prescriptions;
- training in shared decision making & personalisation;
- support for patients with self-care, including coaching;
- patient peer support networks;
- expert patient programmes/patient leaders/health literacy;
- community health champions/volunteer health trainers;
- social prescribing;
Patient and public voice
National support for the NHS

**Insight**
- Friends and Family test roll out to Acute trusts by April 2013 and then primary care
- Comprehensive real time plan for patient feedback published by April 2013
- Provide support and assurance for high quality deployment of market research tools among

**Collective participation**
- New Civil Society Assembly
- New social media network for patient groups
- Provide support and assurance for world class patient and public participation by CCGs

**Transform patient empowerment**
- A programme to support information as a health service to be published in 2013 to promote self-care, health literacy and health champions

Turning the NHS into a social movement and creating the conditions for an equal, balanced and reciprocal relationship between citizens and the NHS
A new customer service platform will launch in November 2013. This will mark a watershed in the adoption of digital technology in healthcare. It will provide a multi-channel point of access to information and services in the NHS. It will be the biggest online service of its kind.
The 311 movement: a model for the NHS?

American cities transformed their commissioning efficiency through use of multi-channel platforms based around the 311 non-emergency helpline. They encouraged mass citizen feedback. New York receives 90,000 calls and texts a day.

There is now clear evidence that ‘crowdsourcing’ municipal commissioning reduced costs, improved quality and has transformed citizen relationships.

Online record access: transforming the customer experience

Margaret Rickson, 83, from Hyde in Greater Manchester trained herself to use a computer in order to order prescriptions online. This has changed her life. More than 50m visits to the GP may not be needed if patients went online as they do.
What are our priorities?

- Integrated Personal Commissioning
- Personal Health Budgets
- The PAM learning set – ‘Realising the Value of Patients – Transforming Participation in CKD’
- C4CC
- Tools, guidance, evidence to support commissioners (CSU field force, work with children and young people, Person centred care group)
- Digital care planning
How can you help develop & deliver the vision?

• Do you agree with the developing vision?
• How can we make it work?
• How to we deliver at large scale?
• Where to put effort and resources for best effect, including on shared decision making, self-management, PHBs, information as a service and personalised care planning?
• Do we focus on those with highest needs?
• What can you do to help?

Let me know including by tweeting today @pmuramatsu

Thank you!
the NHS belongs to us all