

CLIENT NAME: NHS TRAFFORD
CLINICAL COMMISSIONING GROUP
LOCATION: TRAFFORD, MANCHESTER
SECTOR: HEALTHCARE



CHALLENGE

- Deliver high-quality healthcare to more than 220,000 citizens of Trafford, England
- Provide patients with simplified services, beginning with a single point of contact
- Create an integrated solution that involves patients, their families, and care providers

SOLUTION

- Form a unique, first-of-its-kind partnership between Trafford CCG and CSC
- Develop an innovative Patient Care Co-ordination Centre
- Direct patients, families and care providers to relevant services through defined clinical pathways

RESULTS

- Improved patient experience and enhanced system efficiency
- Better co-ordination of services across primary, secondary and tertiary care settings
- Cost savings, reduced bureaucracy and improved value for money

NHS TRAFFORD CCG SETTING NEW STANDARD IN PATIENT CARE CO-ORDINATION

Providing a diverse range of patients with a single point of contact for comprehensive health services, CSC is working with Trafford Clinical Commissioning Group (CCG) in Greater Manchester, on a first-of-its-kind care co-ordination centre. The innovative Trafford Care Co-ordination Centre (TCCC) aims to provide patients, families and care providers with significantly improved patient experience and efficiency across Trafford's healthcare system.

As part of the National Health Service (NHS) in England, Trafford CCG is responsible for ensuring that health services for the more than 220,000 people of Trafford are provided at the right place and time, and that services are safe, of high quality and offer value for money. The CCG is also part of the broader health system in Greater Manchester, which has recently become the first region in England to have healthcare funding devolved to local government. The partnership between Trafford CCG and CSC to develop and manage the TCCC is the first of its kind in the UK.

DELIVERING QUALITY AND VALUE

A contemporary challenge for Trafford CCG, as with healthcare organisations globally, is to find new ways to deliver quality healthcare in a co-ordinated, integrated manner. 'Our vision for the health economy in Trafford is to create a healthcare system that's pro-active and high-quality, with excellent clinical outcomes and ease of access', says Trafford CCG Chief Operating Officer Gina Lawrence. 'This will be achieved by designing services that are delivered in an integrated way, so that patients can expect health and social care to work together to offer the best possible holistic advice and support for their needs.'

As healthcare becomes more focussed on the patient, Trafford CCG is taking a more personal, caring approach. Trafford CCG has already begun to build integrated services in the community. However, Lawrence points out, 'Unless you have a co-ordination centre, people don't access those services very well'.

Like many regions, Trafford CCG serves a diverse population with a wide range of healthcare needs. The comprehensive NHS care system can be complex to navigate, and the TCCC aims to provide a complete offering that sets a new standard for quality in care co-ordination.

Trafford CCG engaged CSC to co-create and co-manage the TCCC, with the goal of improving co-ordination and integration across boundaries of primary, acute, community and mental health sectors to deliver a significantly improved experience

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— **Dr. Nigel Guest, Trafford CCG chief clinical officer**

for patients and care providers. ‘The TCCC is designed to make getting services as simple as possible with a single access to it, but it also helps general practitioners and acute trusts navigate through what can be a very complex NHS system’, Lawrence says.

A NEW CARE MODEL

The TCCC is based on a new care model that works like an air traffic control system, tracking patients as they move through the system and guiding them to different services in an efficient manner. The patient’s journey begins with a referral from their general practitioner, and their care pathway is mapped out using recognised clinical tools and protocols — such as Map of Medicine, a clinical tool which lets physicians plan care according to the best information available.

Each patient is assigned a designated care co-ordinator who has a host of resources and interfaces available to make practical arrangements such as booking appointments or arranging transport to and from hospital. ‘It is very patient-centric. The system considers the best options and the best care for you’, Lawrence says.

The continuous tracking of patients allows Trafford CCG to understand what kinds of services they access and what kinds of services they need to access, ‘which really helps us to manage our budgets and commissioning correctly’, Lawrence continues. ‘We call that “intelligent commissioning”, and we believe that’s the way forward for CCGs in the future.’

Services range from initial patient communications via a unified communications system, to clinical workflow based on a catalogue of services, to back-end analysis of the effectiveness and efficiency of care delivery. CSC is also providing innovative business process services and working with partners to deliver clinical services.

FAMILY-FRIENDLY APPROACH

Dr. Nigel Guest, Trafford CCG chief clinical officer, notes healthcare services are shifting to delivering care at the most efficient location. ‘We should centre services for patients around them, providing the services preferably out in the community, not in hospital, unless that’s absolutely necessary’, he says.

Part of the innovative TCCC model is that the patient’s family situation and transport needs are taken into consideration when making care decisions. Guest says the service can evaluate factors such as, ‘Is there an appropriate time for them, and how will that work with the members of their family? It’s very much more about co-ordination, and not just co-ordination for the patients, but for the family as well.’

In the new model, another key is that by streamlining the system, the amount of bureaucracy and paperwork is reduced. Guest says that by making the system more efficient, ‘we’ll derive cost benefits from it, and we can invest further into integrated care’. The TCCC approach can evolve into a model for the provision and management of population health, says Philippe Houssiau, CSC’s vice president, healthcare and life sciences, UK. The TCCC model, for example, serves as an excellent means for establishing care pathways for diabetes management by ‘keeping those patients in the pre-clinical stages of their lives, hence dramatically reducing the burden of the healthcare system and dramatically increasing the quality of their life’, Houssiau says.

Houssiau adds that he sees the TCCC model expanding well beyond Trafford. ‘We will be delivering high-quality, value-for-money services which could lead the way for how care is delivered across England’, he says. ‘This is a really phenomenal opportunity for co-creation, not just at a regional or a country level, but to have a dynamic global activity going, taking place around one common point of view of changing care models globally.’

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