

Brief reflections on Dudley's journey as a Vanguard

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The Strategy Unit and partners have supported Dudley in multiple ways



Evaluation

Support to primary care in procurement

Public events

Primary care development programme (EPIC)

Technical advice

Performance reports

Evidence reviews and research

Modelling

Support to Partnership Board


Scenario planning

Equalities impact assessment

What follows is a high-level set of reflections based on this

We have produced a microsite to share more detailed learning from the Vanguard experience


About Us



The All Together Better partnership exists to transform the way that care is provided for the people of Dudley. After engaging with local people and local organisations, Dudley Clinical Commissioning Group (CCG) led a bid in 2015 to become a local Vanguard site of the national [New Care Models](#) programme.

This bid was successful. A wide-ranging partnership of local organisations – from across the NHS, local government and the voluntary sector – then came together to oversee the design and implementation of Dudley's new care model.

This new model – called the ['Multispecialty community provider' \(MCP\)](#) – was designed to provide more care in community settings and in people's homes. This was to be achieved through two main strands of activity: 1) to establish new services and innovative ways of working to change the way that support is provided; and 2) a large-scale procurement exercise to put a contract in place to ensure that these new ways of working would be sustained and improved into the future. To track progress and to improve services, Dudley also initiated a programme of evaluation and learning.



The Strategy Unit exists to improve outcomes. It does this through applied critical thinking, analysis and strategic advice. As an NHS organisation, the Strategy Unit understands the system and the need for a 'real world' and practical approach.

Dudley CCG formed a partnership with the Strategy Unit to support their work as a Vanguard. This support covered multiple services, including: support to primary care (both to improve services and enter the procurement); strategic advice; modelling and analytical support; and research and evaluation. Many of the products from this work are presented on this microsite.

To maximise rigour and independence, for the research and evaluation components of the work the Strategy Unit partnered with two specialist organisations: ICF and Health Services Management Centre at University of Birmingham.



01/12/2017
SERVICE IMPROVEMENT | PRIMARY CARE

Dudley System Performance Report

In order to help Dudley's Partnership Board track progress towards high level goals, this report presents a series of performance measures for Dudl

03/07/2018
SERVICE IMPROVEMENT

Public engagement with the new care model and communicating the vision

13/03/2018
SERVICE IMPROVEMENT

Economic analysis of Dudley Quality Outcomes for Health

Dudley replaced the Quality and Outcomes Framework (QOF) with the Dudley Quality Outcomes for Health framework.

02/03/2018
SERVICE IMPROVEMENT

Public engagement on self-management

One of the core features of

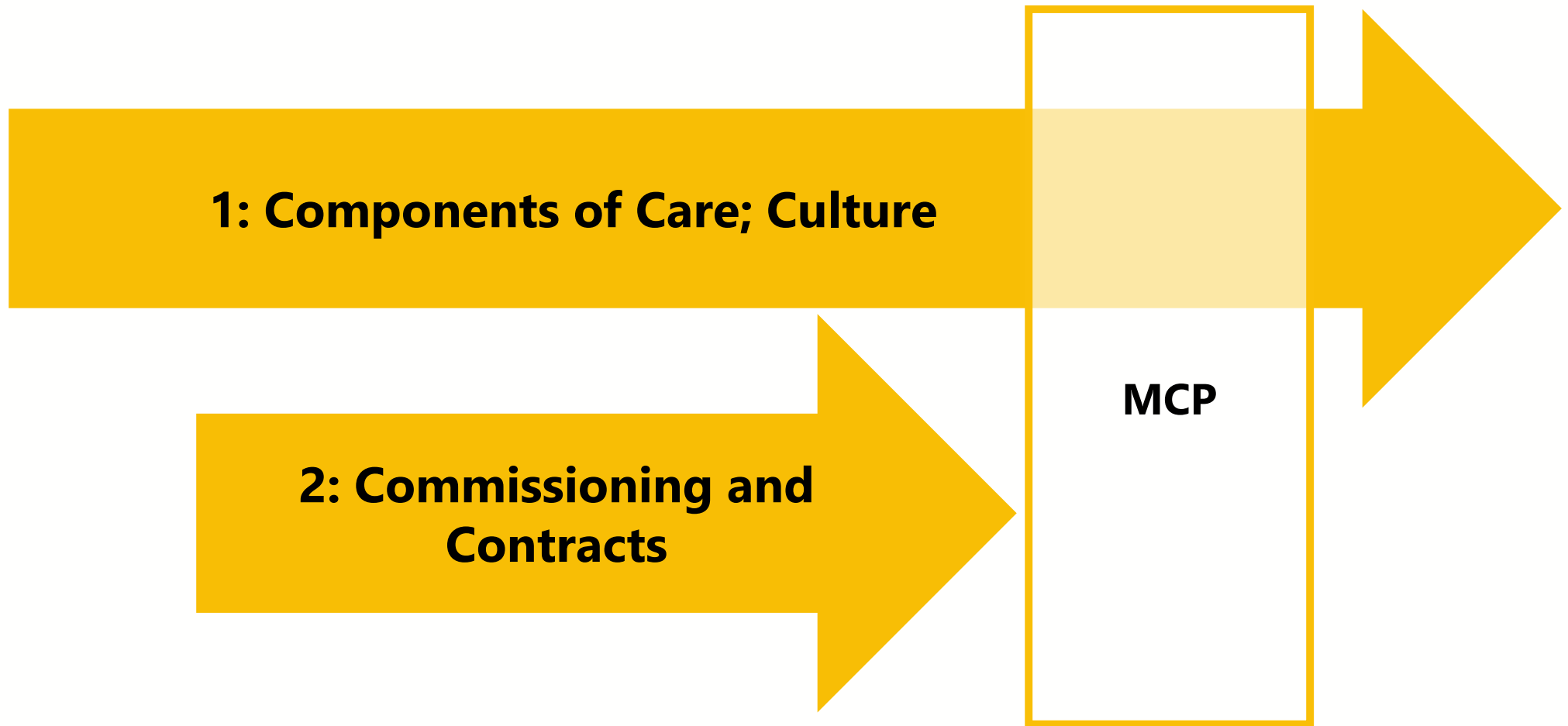
23/02/2018
SERVICE IMPROVEMENT

Evaluation of the Patient Activation Measure (PAM) pilot

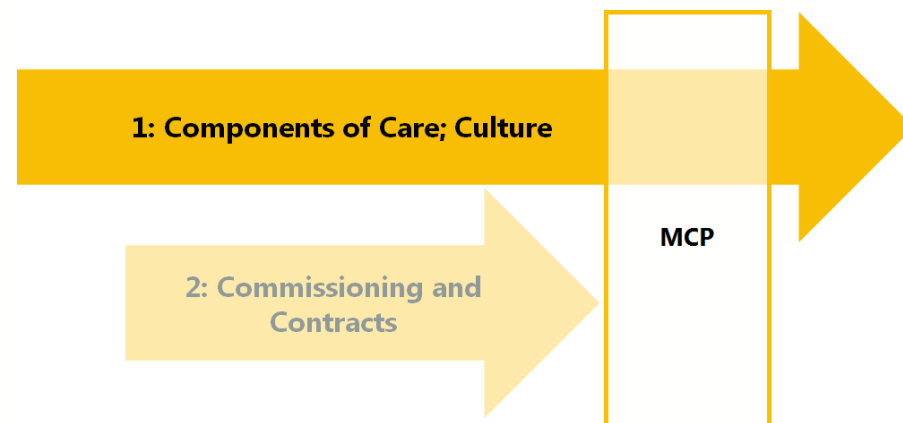
www.strategyunitwm.nhs.uk/dudley-mcp

Or search 'Dudley MCP Strategy Unit'

Establishing Dudley's MCP has been a complex process. But it can be boiled down to efforts on two fronts:



Setting up new components of care has generally gone well; consistency is now the key



MDTs / voluntary sector in primary care

Outcomes framework for primary care

Enhanced use of pharmacy

Innovations have been evaluated

Where they haven't worked they have been stopped

Important programme / change discipline

All backed by (lots of) work to generate shared understanding / culture. The most powerful mechanism for change?

Contracting for the MCP is on-going (and difficult) work



- Not a simple procurement. Scale and complexity given role of primary care
- Necessitated changes in CCG structure and roles (performed well)
- Also significant efforts to support primary care to choose its partners
- Heavy requirements on providers:
 - Form new organisation
 - Design new clinical / operating models
 - Realise potential of MCP model – detailed analysis and strategy
 - Set new culture / get to know each other(!)
 - Stretching timetable

What does Dudley's example say: for new care models; large-scale efforts to establish integrated care; policy?

Replication

National programme theory: *'set up, test, replicate'*. Dudley is very high performing in many ways. What to replicate?

Innovation

Essential. Needs licence and space, backed by disciplines – especially around evaluation and 'Scale Vs Stop' decisions

Neighbourhoods

Where will the MCP really come to life? Multi-disciplinary local working, where (currently separate) teams take responsibility for local populations / areas

Policy

Treat large-scale procurement as a weapon of last resort

Culture and change

Weapon of first choice! The MCP must work as a changed set of relationships between staff, as a way of engaging with patients and the public. Dudley's approach here has been instructive

Many thanks for listening

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