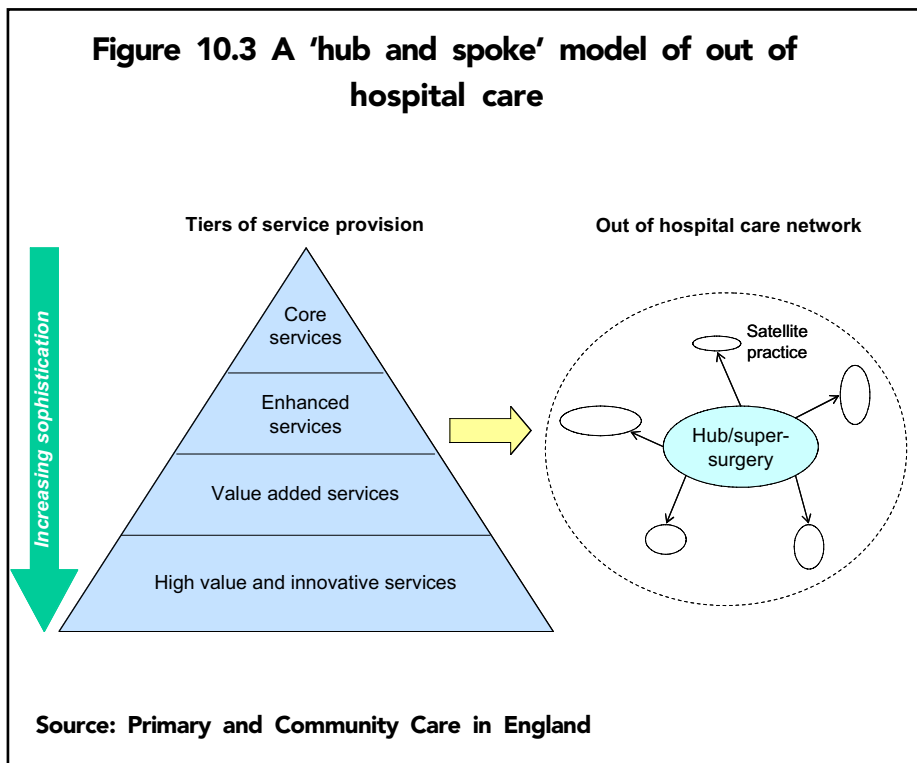


BUSINESS INSIGHTS

Primary and Community Care in England

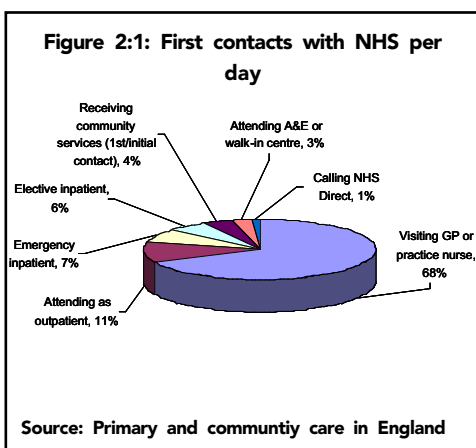
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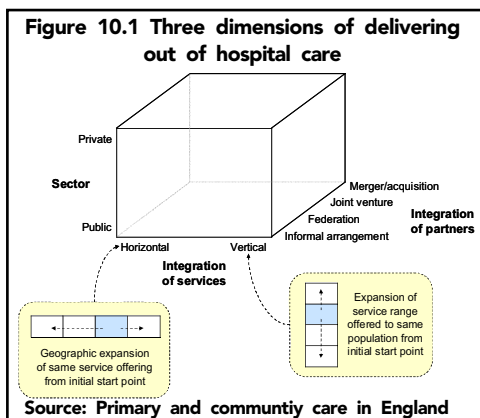
"Primary care comprises a range of community based health services that are typically the first and sometimes the only point of contact that patients make with the NHS. 68% (or 820,000 contacts) of all first contacts with the NHS per day are made when patients visit a GP or practice nurse, as the above diagram illustrates..."

NHS reform is now in motion: initiatives such as patient choice, Payment by Results, practice based commissioning and provider plurality will eventually come together to effect significant change. New ways of funding services and new service providers will result in a shift of focus for the pharmaceutical industry in the U.K and their relationships with Primary Care Trusts and GPs. With these changes in place, pharmaceutical companies will finally have a clear opportunity to deliver services directly to NHS patients, creating new and diversified revenue streams.

Primary and Community Care in England: The starting point for reform is a new report that will provide you with up to date information on the primary care reforms currently taking place in the NHS and equip you with the information that you need to understand your client's changing priorities and take advantage of emerging market opportunities.

Use this report to identify new opportunities and threats created by the NHS reforms for pharmaceutical companies. Understand how the reorganization of Primary Care Trusts will affect your business and identify initiatives to diversify your revenue streams and expand brand franchises.

Key findings of the report



"Our three dimensions illustrate the high degree of flexibility that exists when designing out of hospital care services. No one size will fit all in the post-reform primary care sector and it doesn't need to, although we recognise that there will be clustering around certain 'sweet spots' where optimal profitability, service quality and patient experience coincide..."

- **Payment by Results will encourage primary care providers to treat more patients upstream to prevent expensive hospital admissions.** This will result in a greater focus on chronic disease management and self-management, and further drive public health efforts.
- **Commissioning is the new route through the NHS.** Where once a patient's experience of the healthcare system was defined by their provider, it will now be defined by who is commissioning their care.
- **Several overseas companies already have a presence in the UK's secondary and intermediate care markets,** and have the necessary expertise and scaleable operations to consider primary care partnerships. These include Ascent Healthcare, Kaiser Permanente, Netcare and New York Presbyterians.
- **Healthcare organisations have an opportunity to build strong and durable brands that embody demonstrably better products/services.** Providers must become synonymous with the best and only place to go for healthcare, if they are to avoid the £5-15m of annual income that each acute trust could lose as patients choose private over public sector treatment.

Key questions answered in this report

Figure 8.1 Degrees of patient and public involvement

	Information	Feedback	Influence
Individual	Information to patients and carers about treatments and services	Patients can feed back on their own care and treatment and raise concerns (e.g. PALS, complaints)	Shared decision-making between patients, carers and professionals; expert patients
Collective	Information to the wider public about how well the organisation is doing	Trends in complaints, PALS issues, etc; feedback on patient experience	Involvement in policy and planning

Outcomes

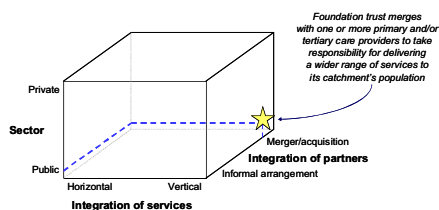
Source: Primary and community care in England

"PPI should occur at two levels. The first is at the point of the individual patient; the second is at the collective level for the population served. Superimposed on this is another central theme of PPI: it must be inclusive and incorporate the needs of hard-to-reach groups..."

- What is the implementation timeline for the various elements of primary care reform, such as Payment by Results, practice based commissioning, patient choice, and Connecting for Health initiatives?
- Which private companies are likely to expand their existing presence in the primary care market and which others may seek to enter it?
- Which out-of-hospital services need to be delivered and who is best placed to deliver them?
- How will the NHS manage risk and perverse incentives to prevent providers going out of business under Payment by Results?
- What are the priorities of Connecting for Health in primary care and how is the National Programme for IT delivering against them?
- What clinical service delivery models are likely to emerge to meet community-based healthcare needs?

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Figure 10.2 Three dimensions of delivering out of hospital care



Source: Primary and community care in England

"Partnerships may exist at any point in our three dimensional space. For example, freedom of capital and action permitting, a foundation trust could merge with one or more primary and/or tertiary care providers to take responsibility for delivering a wider range of services to its catchment's population..."

- **Understand the implications of proposed primary care reforms – including practice based commissioning and patient choice** – on the structure of primary care and the roles of existing and prospective new clinical service providers.
- **Identify current and prospective future private players in the primary care market**, allowing you to identify the competition and monitor their position in the market.
- **Assess emerging opportunities to deliver community-based clinical services**, either working alone or in partnership with other public and/or private providers.
- **Evaluate the impact of Payment by Results on funding flows with in the NHS**, on GP referral rates and on the shift from hospital to community-based care
- **Prepare for significant change within primary care** by understanding the implementation timelines for key reform agendas.

Primary and Community Care in England

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