

PHM Analytics Support Programme for Primary Care Networks in North East and North Cumbria

NECS have been the Population Health Management (PHM) and analytics delivery partner to provide key support to all 66 Primary Care Networks (PCNs) across North East & North Cumbria (NENC) with the key focus on supporting the PCNs along their maturity journey around population health management and delivery of anticipatory care.

We designed a programme to:

- Ensure PCNs have the skills, capability and knowledge to support their journey to PHM maturity.
- Increase familiarity with the data available.
- Ensure PCNs are trained in and equipped with capability, knowledge and access to relevant tools.
- Ensure tools and reports available are suitable for the needs of PCNs
- Ensure PCNs can generate insight and intelligence from their data.
- Support identification of future information and intelligence requirements - i.e. what is needed for 2020/21 onwards.

NECS delivered 4 workstreams:

- 1** PCN Training workshops - Two launch events which all PCNs were invited to attend and follow up events
- 2** Information Governance support – bespoke support provided to support local Data Sharing Agreement (DSA) set-up and implementation to support data sharing
- 3** Dedicated analyst resource for PCNs - Development of PCN Insight Summary for all PCNs; bespoke PHM analytical support for PCNs with specific project/patient group of their informed choice
- 4** Provision of and access to relevant Analytical Tools – access and training to tools such as RAIDR, PHE Fingertips and Shape.

The first workshops, brought almost 100 delegates together from PCNs to find out more about PHM and the tools available; as well as being introduced to their analysts supporting them. Initial feedback from the workshops was that around 80% of participants found the sessions useful, and engagement with those in the room was productive especially the table discussions – comments included:

Useful to know what data exists and dedicated analyst support will be really useful

Interesting session. Started the thinking re: PHM and how PCNs can start looking at their data

Of the 66 PCNs across NENC, 58 PCNs requested support with their PHM analytics, with 31 requesting deep dive specific analytical support around projects for their PCN populations.

A PCN Insight Summary was developed for all PCNs including: Demographics, workforce – clinical/non clinical, geographic boundary, disease burden, PC capacity, patient population lifestyle factors - smoking/obesity, care homes, structure medication review including those patients prescribed 4 or more medications, those with an active care plan in place, anticipatory care breakdown, early cancer diagnosis, and screening rates.

Analysts provided intelligence and interpretation of the Insight Summary as part of the approach and also supported a number of deep dive projects.

The second workshop was postponed due the Covid-19 pandemic and system response, and finally brought PCNs and their analysts back together to showcase their PHM approaches, to enable further sharing and build support for the continuation of the programme. A sample of the many approaches fed back at the workshop included:



Mental Health Café

An analysis of mental health issues in the population of one PCN was carried out, with particular focus on depression, anxiety and high levels of smoking prevalence within this cohort with a view to support the establishment of a Mental Health Café in the neighbourhood to meet the needs of this group of individuals. The analysis was extended to consider additional health needs analysis for this cohort, including BMI, blood pressure and diabetes, where a range of interventions might be made available within the café.



Identifying Potential Depression in the Future

One PCN was particularly interested in whether data and analytics could be used to identify potential depression in patients in the future. Three factors were selected for consideration, anxiety, age and BMI. By considering those individuals who were diagnosed with an anxiety disorder, aged under 25 and overweight, the algorithm identified 102 people within the PCN who could possibly be at risk of becoming depressed in the near future. These were highlighted to individual Practices for intervention.



Structured Medication Reviews for Respiratory Patients

Building on the requirement for PCNs to carry out medication reviews, a focus was placed on respiratory conditions in one PCN. This was initially developed to help identify any specific needs in relation to prescribing for respiratory conditions. The analysis not only identified individuals requiring reviews, it also highlighted significant variation in prescribing and coding practices across the PCN. In order to understand the needs of the population properly, the coding needs to be consistent and reliable. This is important for all PHM analytics approaches. In addition, several other avenues were explored, one of which was to identify cohorts accessing secondary care for short stay admissions, related to their respiratory conditions, potentially avoidable admissions. Further details were extracted for these individuals to determine whether a medication and care review was required, and further segmentation was carried out to investigate a priority cohort of individuals aged 35-64.