

## **Key messages from the Webex with Jim Easton and Sir John Oldham - From 14/09/10**

### LTC Workstream

- The number of people with multiple LTCs will increase by 60% by 2014 so management of this cohort of patients is very important.
- One of the key drivers is integrated neighbourhood care teams. These teams should cover a population of approx 15-20K.
- Telehealth can be a very important part of the pathways in place for people with LTCs. However, to ensure that the maximum benefit is gained the systems and people working with these systems and patients needs to be embedded before telehealth is added.
- We need to be looking at creating a generic long term conditions pathway, not lots of separate disease pathways if the NHS is going to remain financially viable.
- Jim Easton would strongly recommend those not involved in the LTC workstream or doing something of equal value to look at how to get connected and use the work others are taking forward.
- One of the strengths of the LTC workstream is that it brings together patients, secondary care clinicians, primary care clinicians and social care colleagues. This is a system which considers patients needs rather than depending on the medical model.

### QIPP

- LTC management is critical to the delivery of QIPP. We need to ensure that progress is made on QIPP in the next 1-2 years otherwise we will be handing over to the new commissioning landscape an NHS in significant difficulty.
- Quality will increasingly be measured by outcomes. NHS Evidence is a very useful resource to use to see how good evidence is working in practice.
- QIPP is going to be at the heart of the handover to GP commissioners and GP commissioners are going to have to continue the work so they can deliver both the quality and financial outcomes.

### Operating Framework/Tariff

- Those of you involved in the LTC workstream, you will have a direct line to influencing how in the Operating Framework for next year is shaped. For example whole packages of care outside of hospitals rather than episodic payments.
- The Operating Framework for next year is going to be implementing more directly those tariffs that support Year of Care and other methodologies for moving away from episodic care payments to rewarding providers as a care business for meeting quality standards. For example, work is ongoing on developing a national tariff for LTC.