Appendix B – Primary Care Home Model Characteristics

Fundamental to the vision are the four core characteristics of the Primary Care Home model:

- 1. An integrated workforce, with a strong focus on partnerships spanning primary, secondary, community and social care and mental health. The NAPC definition of an integrated workforce is a team drawn from an existing workforce comprising professionals from health care (e.g. primary, community, mental health, palliative care and appropriate specialist care teams), social care, voluntary and charitable sector, and patient groups. The NAPC believes that the 'optimum' size for a workforce to be truly integrated and effectively utilise local resources to deliver the quadruple aims of health care is 100-150.
- 2. A combined focus on personalisation of care with improvements in population health outcomes, which includes:
 - a. balancing the provision of personalised care, responsive to the needs of individuals with population health planning and provision
 - b. focusing on health and social needs, including the social determinants of health
 - c. focusing on people who share characteristics within a population rather than a disease
 - d. providing proactive, preventative care, for healthy and chronically ill people
 - e. considering the health of people who are not accessing care regularly.
- 3. Aligned clinical and financial drivers with shared risks and rewards. The aim is for a PCH to have responsibility for a whole-population budget formulated on the needs of the registered list of 30,000-50,000 patients, built around the constituent GP practices involved. The level of whole-population funding will be dependent on the needs of the population and the scope of services that is agreed through local commissioning arrangements.
- 4. Provision of care to a defined, registered population of between 30,000 and 50,000: From the modelling work the NAPC has done, the 100-150 member PCH workforce is able to maximise the delivery of population health outcomes to a place-based registered population size of 30,000-50,000. At this size the NAPC believes that the PCH is the right size to scale and provide care.