

**REPORT TO THE PRACTICE BASED COMMISSIONING  
GOVERNANCE COMMITTEE  
TO BE HELD ON: 13<sup>th</sup> MAY 2009**

<b>Enclosure:</b>					
<b>Subject:</b>	CVD Risk Management LES				
<b>Lead Director:</b>	John Wicks / Judith Wright				
<b>Lead Officer:</b>	Rachel Chapman / Jonathan Bletcher				
<b>Recommendation:</b>	<b>For Approval</b>	<b>X</b>	<b>For Discussion</b>	<b>For Information</b>	

**PURPOSE OF THE REPORT:**

This paper informs PBC Governance of the rationale used to calculate the LES payment in support of the CVD risk management programme.

PBC Governance are asked to consider and agree the proposal as the financial framework for the LES to be offered to GPs.

**KEY POINTS:**

The aim of the CVD risk management programme is to identify patients at high risk of CVD and offer them support and services to reduce their risk. Primary care is seen as an essential element of this programme as it provides effective identification of patients, full clinical risk assessment, treatment, patient management and support.

A LES has been prepared by the CVD risk management steering group with support from PEC and consultation with the LMC. The LES includes identification of at risk individuals, full assessment of CVD risk, development of an individual patient action plan and referral to lifestyle services.

**Proposed costing of the LES:**

		Notes
Admin	£2.50/pt	Includes up to 3 invitations for appt (at least one letter) and recording in pt record
Risk assessment	£26/pt for 40mins	With Band 5 nurse. Benchmarked against Insulin conversion LES which pays £20 for 30mins nurse time.

Coverage incentive	£3/pt assessed once >50% coverage achieved £5/pt >70% coverage £8/pt >85% coverage	To ensure hard to reach populations access programme
Total / pt	£28.50 for 0-50% £31.50 for 50-70% £33.50 for 70-85% £36.50 for >85%	

Additional costs for the primary care service:

Phlebotomy: as per phlebotomy LES £11 for 12 pts

Pathology: in contract

### **Existing patients**

Some patients will already have a CVD risk score calculated. These patients may also have received opportunistic lifestyle advice but may not have had the full risk assessment (including eg BMI, physical activity levels or alcohol consumption). It is also unlikely that they will have had referrals to lifestyle services as the majority of services are new and have only recently started to deliver. It is therefore proposed that all patients at high risk of CVD are put through this programme with practices receiving full payment for each patient.

### **Programme costs per year**

	<b>Funding source</b>	<b>Total cost</b>
MSDi software	LDP (East) Stroke plan (West)	£38,400
IT upgrade	LDP (East) Stroke plan (West)	£3,360
GP incentive to create register	Primary care	£24,000
LES	Primary care	£683,100
Phlebotomy	Primary care	£20,167
Pathology	LDP (East) Stroke plan (West)	£110,000
Prescribing costs	LDP / Stroke plan / Drugs budget	£534,160
Lifestyle services	LDP (West) 5yr PH plan	To be finalised

NB Lifestyle capacity on the East is limited in yr 1 to 8,000 CVD risk patients. The figures above are based on all high risk patients entering the programme over 2 years, a steady state of high risk patients will then be reached. Over time the PCT needs to move to a population-based approach where all people age 40-74 will be assessed (270,000 adults)

### **Comparison costings**

The LMC have suggested a payment of £40 per patient to engage GPs in the programme. It is not simple to do straight comparisons with other LES as there is large variation in what is offered ranging from basic risk assessments to a full risk management service. The South Staffs Programme is a full risk management service which includes individual comprehensive risk assessment, action planning and treatment / referral to lifestyle services. Payments in other PCTs range as follows:

Bury: £7.51 per risk assessment  
 Bolton: £12/patient per risk assessment  
 Walsall: £15.30/patient  
 Stoke: approx £28/patient  
 Wakefield: £31.50/patient

The services developed in Stoke and Wakefield most closely match South Staffs PCT.

**CORPORATE OBJECTIVES:**

Strategic theme: Increase life expectancy

**IMPLICATIONS:**

<b>Legal and/or Risk</b>	This is part of the national CVD risk management programme (now known as “NHS Health Check”)
<b>Standards for Better Health</b>	
<b>Financial</b>	Costs as above
<b>Training</b>	Some training has already been offered to practices, further training will need to be made available
<b>PBC</b>	
<b>Other</b>	

**RECOMMENDATIONS / ACTION REQUIRED:**

The Committee are asked to approve the financial framework for the LES