Enhanced Capitation Toolkit

General Practice use of Enhanced Capitation Funds

Under Enhanced Capitation, general practices have the opportunity to provide services matched with the needs of their population. The expectation is that general practices apply the funds in a way that enhances the quality and coordination of care provided for patients with complex health and social needs. The funding is not intended for infrastructure costs or capital expenditure items. Following are some examples of how the funding could be used. From the survey of general practice in 2017 two case studies were completed to share ideas, on the use of Enhanced Capitation. These can be viewed here.

A few examples

Here are a few ways that Enhanced Capitation funds could be used to support patients with complex health and social needs.

The examples below should be read within the context of services that may already be in existence. Across the PHOs, there are a number of programmes and/or funding for services that support practices to better coordinate care for patients.

✓ **Cover a portion of the costs associated with accessing care.**

Examples:

- Consultation or home visit with a nurse or GP
- Phone consultation
- Consultation with a dietitian, social worker or other allied health professional
- Lab tests that would otherwise cost the patient
- Taxi fare to appointment
- Reduced co-payments for consultations or pharmaceuticals

✓ **Cover the time costs to collaborate with others in the care of patients.**

Examples:

- Multi-disciplinary team meetings with the patient, whānau, pharmacist, physiotherapist, dietitian, older person's health physician, etc
- Meetings with pharmacist as part of medicine reviews for patients on 10+ medications
- Developing and monitoring a pharmaceutical care plan with the pharmacist and the patient
- Practice team meetings to identify a cohort of patients that will benefit from more proactive care (using data and knowledge of patients). Agree on ways the team can respond to their needs and monitor the results

✓ **Cover the time costs for more proactive care planning and support.**

Examples:

- Developing and distributing information and resources for patients
- Accessing data about ED presentations and hospital discharges in order to assess the patients presenting and develop/revise strategies for unplanned care
- Identifying patients on 10+ medications, including by ethnicity. Review their medications and/or consider referring them to the Medication Management Service

✓ **Providing additional supports that would assist with a patient's complex conditions.**

Examples:

- Supportive shoes
- Dental treatment
- Ear syringing
- Wound care
- Foot care for people with diabetes
- One-on-one educational supermarket visit

Some specific examples

Mr Rima

Understanding that patients taking 10+ medications are at increased risk of adverse events, a GP recognised the value of taking some time out of his appointment schedule to review his enrolled patients and identify those that could benefit from a medicines review.

One patient identified, Mr Rima, was on multiple medications for complex health conditions. The GP contacted Mr Rima's pharmacist who recommended a Medicines Therapy Assessment. This is a comprehensive review of a person's prescribed medicines and doses that is completed by a pharmacist in consultation with a GP to ensure the medication is achieving optimal outcomes.

It was fortunate for Mr Rima as the assessment found that he was taking a now unnecessary medication prescribed during his last hospital visit. The medication had the potential to have adverse consequences if taken long term and with one of his other prescribed medications.

The GP was able to utilise Enhanced Capitation funding to cover the time spent identifying suitable patients and working closely with the local pharmacist during the reviews. In Mr Rima's case, the GP used Enhanced Capitation funds to cover the time cost to meet with the Pharmacist and Mr Rima as part of the assessment. He used some funds to cover the time cost involved to contribute to a Pharmaceutical Care Plan, which recorded the agreed collaborative approach to Mr Rima's medicine-related care between the GP, Pharmacist, Mr Rima and his whānau.

The allocation of Enhanced Capitation funding in this way helped Mr Rima better self-manage by supporting him and his whānau to better understand his medications, better manage his complex conditions by ensuring his prescriptions were achieving optimal outcomes, and to better plan and collaborate on his future care with the Pharmacist.

Mr and Mrs Thompson

Mr and Mrs Thompson's GP wished to further increase the positive outcomes of collaborating in his care. She was aware that she could claim reimbursement through her PHO for the time spent developing and updating an Acute Plan for Mr Thompson's complex health conditions. She thought it would be beneficial to meet occasionally with other health professionals involved in his care. While the GP knew that a multi-disciplinary team meeting wasn't a requirement to develop an Acute Plan, she thought it would be beneficial in this situation.

The GP discussed this with Mr Thompson and his family, and they decided that these meetings would be highly beneficial for the management of Mr Thompson's health. Therefore, it would be appropriate to utilise Enhanced Capitation funds to cover the cost of her and a Practice Nurse's time to attend these meetings. The GP invited Mr Thompson's Practice Nurse, local pharmacist, social worker and a specialist from the hospital. Mr Thompson and his daughter were also invited to attend via video conference as it was difficult for him to find transport into the practice.

As a result of these multi-disciplinary team meetings, everyone was better informed and connected around Mr Thompson's care and his Acute Plan. The team has been able to discuss complex issues about his care and are then able to record their collective plan on the Acute Plan template.

Mr Thompson also reports that he understands his conditions better and how to better self-manage. He says he is more trusting of his health professionals and feels he has a better relationship with them as he was encouraged to get to know them during the meetings and ask questions about his care.

The Tupua Family

Mr and Mrs Tupua and their two children immigrated to New Zealand less than a year ago. Their Practice Nurse is concerned because both Mr and Mrs Tupua have a number of poorly managed health conditions that have progressively worsened since their arrival. Their children also appear to be on a path to developing similar complex health conditions.

The nurse knows that at least one family member visits the practice every month. The General Practice team is concerned that the family does not have appropriate social supports in the community, which is contributing to their poor health. They are also concerned that they may not be communicating with the family in a culturally appropriate way and that this may be impacting on their care.

The General Practice team has enlisted the help of Canterbury's Integrated Family Health Service (IFHS) to take time out of their busy schedules in order to re-allocate tasks across the practice team and free up time for more patient-focused care. With this freed-up capacity, the Practice Nurse decides to utilise Enhanced Capitation funds to allow him to spend time thoroughly reviewing the Tupua family's situation. He prepares a Personalised Care Plan that coordinates care from a variety of health and social services that can work together to help the family members lead happier, healthier lives.

Enhanced Capitation funds are also used to cover the costs of the Tupua family's engagement in this process. This includes the cost of a taxi to the practice and an appointment with the Practice Nurse and GP, which would otherwise have been an additional cost outside of their regular health care that the family were not able to cover. As a result, a team of health and social services are collaborating on the Tupua family's care. This includes the practice, a Pacific Health Worker, a Youth Worker and a Community Respiratory Nurse. Following this success, the practice intends to continue allocating Enhanced Capitation funding to allow the Practice Nurse and Practice Manager to continue this care coordination function for other enrolled patients with complex conditions.

Miss Louise

Miss Louise is an 89-year-old single woman with cancer who lives alone in her home in a small rural town. She is not yet at end of life and currently manages well thanks to the support of a number of community services. However, she finds it very difficult to get to her general practice for appointments. In recognising this, the practice decides that it is appropriate to use Enhanced Capitation funding to help cover some of the costs associated with offering home visits and phone consultations for Miss Louise.

Without this financial support, Miss Louise told the practice receptionist that she would be reluctant to make appointments because she would not be able to get into the practice and she would have a lot of trouble affording the extra home consultations she requires. She told the receptionist that she was afraid she would end up in a rest home if it weren't for this added support.

On a number of visits the Practice Nurse noticed that Miss Louise's worn-down shoes and broken glasses were contributing to her unsteadiness on her feet, and likely the cause of at least two minor falls that required a home visit from the GP. The practice knew that Miss Louise was scheduled for a visit from a Falls Champion from the Community-based Falls Prevention Programme in the coming week. Noticing Miss Louise's upset when the nurse suggested that she should purchase some more supportive shoes, the practice decided to utilise Enhanced Capitation funds to purchase a pair of supportive shoes in time for the Falls Champion's visit. Knowing Miss Louise's ongoing distress about getting to and paying for an optometrist appointment, the practice also used Enhanced Capitation to fund this in order to help Miss Louise stay safer in her own home.

For more Enhanced Capitation information and resources
ccn.health.nz/EnhancedCapitation