Manchester City Council: Analysisng patient flows

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The government has collobrated with Manchester City Council as part of a £6billion devolution deal. The local authority along with the commissioning body are now responsible for Greater Manchester's health care budget.



Objectives

The main aim of our research was to discover where patients were coming from to access their health care. What boundaries were being acrossed by patients and was their a particular reason for this occurrence? Many factors such as patient preference, the services provided by particular medical centres for example are patients travelling due to the specialisms of the medical centres and location were analysed.

The report looked at the reasons why patients with long-term conditions in Gorton are travelling further to receive their health care. The most common long-term conditions of that area and the existing provisions were also analysed, along with generic travel times from specific LSOAs to a practice.



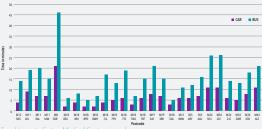
Method

We used quantatitive research methods to inform our study. The council provided us with the intial dataset that needed to be analysed. We received further data from an NHS employee in relation to patients who had long-term conditions. Local health also provided relevant statistics and data outputs such as maps.

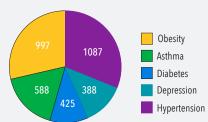
The information was compiled and analysed in Microsoft Excel. The data was then transferred into several different outputs, such as maps(via ARC), pie charts, bar graphs and percentage tables.

Two reports were produced a citywide report and a Gorton specific one; both detailed information about particular areas, travel times and long-term conditions. We provided some recommendations for the council teams to assess.

Key Findings









Conclusion

- The research indicates that cross border patient flows are heavily influenced by the unique geography of Manchester, this means that patients do not realise they are travelling outside of their locality or CCG in order
- The analysis of West Gorton medical practice, in particular, illustrates that the location of the integrated care services will have to be in a close proximately of the existing medical centre.
- As Gorton medical centre has the more localised patient population of the two practices maybe the new integrated services can be implemented in a few different locations around the locality.
- All the existing research indicates that the services will be based around the provider and not the user, maybe it would be more beneficial if the service location was designed with both patient and care provider in mind.