



*Herefordshire*

*Clinical Commissioning Group*

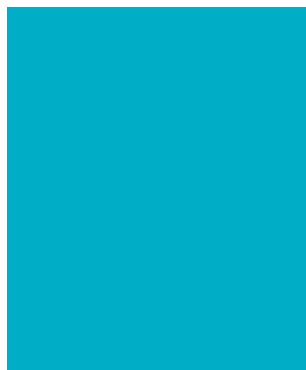


Arden, Herefordshire & Worcestershire Area Team  
and Herefordshire CCG

Herefordshire Health and Social Care  
Overview & Scrutiny Committee  
Accountability Session



4<sup>TH</sup> April 2014



# Introduction

## Purpose

- To clarify the role and responsibilities of the Herefordshire CCG, NHS England and the Arden, Herefordshire & Worcestershire Area Team
- To describe how we relate to health and care organisations, patients and the public in Arden, Herefordshire & Worcestershire
- To review the AT and CCGs work programme over the past year
- To describe our key challenges in 2014/15

# NHS England

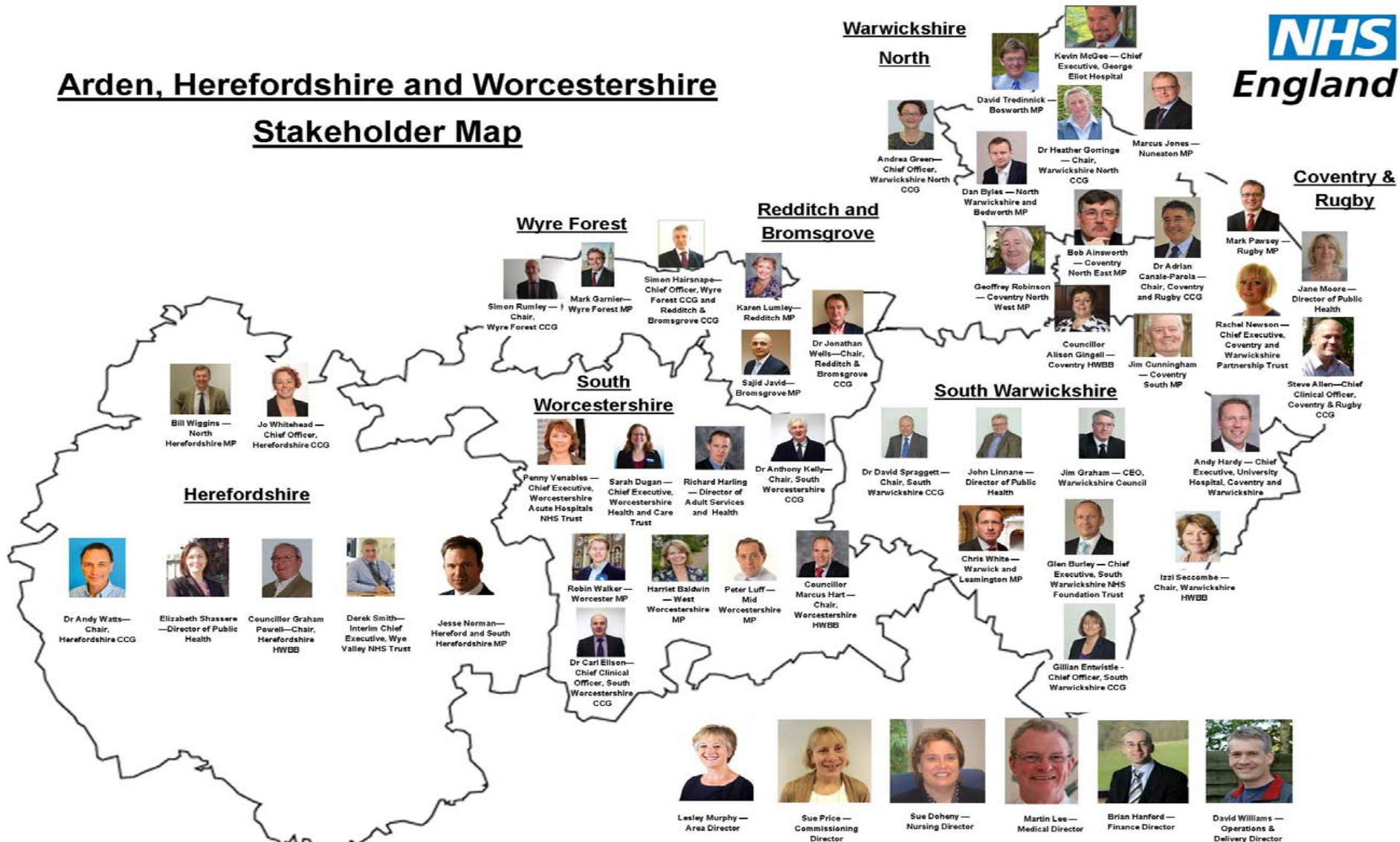
- Established in April 2013, formerly known as the NHS Commissioning Board
- ‘Arms length’ from central government
- One body with a single operating model across national team, four regional teams and 27 area teams
- Annual *Mandate* from Secretary of State for Health determines business plan, priorities and programmes
- Duties in relation to clinical commissioning groups as well as some direct commissioning responsibilities

# NHS England Area Teams

- All Area Teams directly commission local primary care services from primary medical, dental, pharmacy and optometry contractors as well as primary care public health programmes such as immunisations and screening and dental public health
- Area Teams provide support and assurance to clinical commissioning groups (CCGs) to ensure that they are securing safe, effective and appropriate services and the best health outcomes for the populations they serve

# Arden, Herefordshire and Worcestershire Area Team

## Arden, Herefordshire and Worcestershire Stakeholder Map



# Arden, Herefordshire and Worcestershire Area Team

Area Team Director Lesley Murphy				
<b>Operations and Delivery Directorate</b>  Director: David Williams	<b>Nursing &amp; Quality Directorate</b>  Director: Sue Doheny	<b>Medical Directorate</b>  Director: Martin Lee	<b>Direct Commissioning Directorate</b>  Director: Sue Price	<b>Finance Directorate</b>  Director: Brian Hanford
<b>CCG Assurance (Delivery &amp; Development)</b>  <b>Local System (Delivery &amp; Development)</b>  <b>Service Planning</b>  <b>Emergency Planning Resilience &amp; Response</b>	<b>Service Quality</b>  <b>Patient Experience</b>  <b>Safeguarding</b>	<b>Clinical Strategy Development</b>  <b>Medical Professional Revalidation</b>	<b>Primary care Medical/Dental/ Pharmacy and Optometry Services – Commissioning &amp; Support</b>  <b>Immunisation and screening services on behalf of Public Health England (Section 7A of the Health and Social Care Act)</b>  <b>Dental Public Health &amp; Secondary Dental Care Services</b>	<u><b>Financial Management:</b></u>  <b>Area Team (Corporate &amp; Commissioning)</b>  <b>CCG (Support and Assurance)</b>

## Review of 2013/14 – CCG Development

- All 7 CCGs developing and delivering (with ongoing support); having had any remaining conditions removed and following 3 of 4 joint assurance meetings undertaken with full Area Team during 2013/14
- CCGs and Area Team 2 – year operational plans on track for completion / submission on April 4<sup>th</sup> 2014
- CCGs with their respective Health and Wellbeing Boards and health and care providers have developed proposals for the pooled Better Care (Integration) Fund in 2014/15 and 2015/16

## Review of 2013/14 – System Development

- Director - level membership of all 4 Health and Wellbeing Boards
- Ongoing support for delivery of Urgent Care Strategy, Acute Services Review and Integration Pioneer Programme in Worcestershire
- Rapid Review of Quality in relation to hospital mortality rates and ‘hands on’ support for Clinical Strategy Development in Herefordshire
- Commissioner oversight with respect to George Eliot Hospital Strategic Procurement Project, support for Stroke services reconfiguration across Arden



## Review of 2013/14 – System Development

- All CCGs and Area Team commissioning are being supported to develop and agree by 20 June 2014, 5-year strategies and service models and across their local systems including:
  - A wider model of primary care (at scale)
  - A modern model of integrated care
  - Access to the highest quality urgent and emergency care
  - A step change in the productivity of elective care
  - Specialised services concentrated in centres of excellence
- Ongoing assurance of emergency planning, resilience and response (EPRR) through joint (with Director of Public Health) leadership of 2 Local Health Resilience Partnerships (LHRPs) across Arden, Herefordshire & Worcestershire

## Review of 2013/14 – Direct Commissioning

- Quality dashboard developed in support of quality and performance review and reduction in variation in primary care
- Facilitation of *Call to Action* events across AHW to co-develop future models of primary care services with providers, patient representatives and co-commissioners (CCGs)
- Re-procurement of major public health programmes to ensure sustainable, high quality service provision.

## Challenges in 2014/15

- Maintain focus on quality and delivery whilst delivering ambition in 2-year and 5-year transformational plans including Better Care Fund
- Continuous improvement in access to emergency and urgent care services in line with principle of right care, right time, right place
- Sustainability of current pattern of services in light of tightening fiscal envelope and growing demand

## Herefordshire CCG

- Established April 2013
- Responsible for commissioning (buying)
  - Hospital services
  - Community services
  - Mental Health and Learning disability services
  - Continuing health care
  - Out of Hours services
  - Ambulance services
  - GP prescribing
- Working with Commissioning Support Units

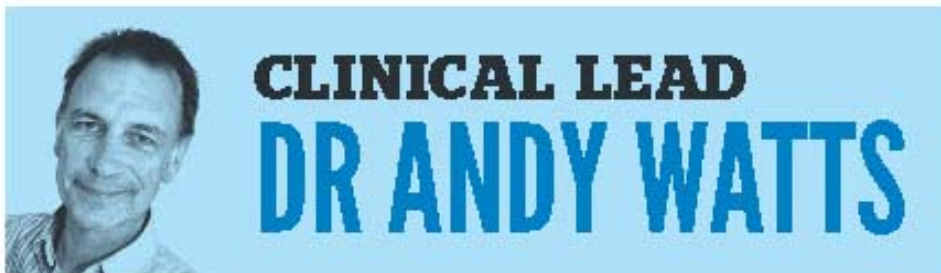
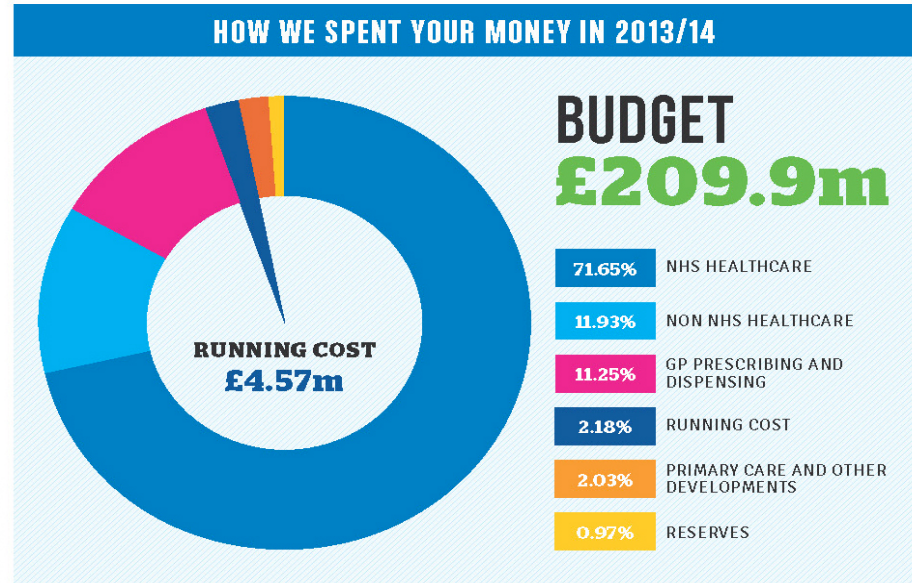
# Herefordshire CCG



## Herefordshire Clinical Commissioning Group

A MEMBERSHIP ORGANISATION THAT COMPRISES OF

**24**   
**GP PRACTICES**  
**+1 WALK-IN CENTRE** 



*Responsible for commissioning*

- *hospital care*
- *community services*
- *urgent and emergency care – the out-of-hours GP service, ambulance call-outs, A&E*
- *community health services*
- *mental health and learning disability services*

More information can be found at  
[www.herefordshireccg.hs.uk](http://www.herefordshireccg.hs.uk)

Find us on Twitter at #herefordshireccg

# Herefordshire 13/14 Plans

- Four key themes
  - Preventing ill health and improving health
  - Improving Planned Care
  - Improving Urgent Care
  - Leading the local system
- Underpinned by series of initiatives and programmes
- And delivery measured against key outcomes and NHS constitution

# Herefordshire CCG 2013/14 Operational Plan

<b>Strategic Context</b>	181000 population, 24 practices plus 1 walk in centre and geographically dispersed population	13/14 £208m budget 13/14, QIPP £9m	High and rising population aged >65	High and rising prevalence of LTC
<b>Vision</b>	High quality, sustainable, integrated health economy with patients and the public and patient at the heart of everything we do.			
<b>Strategic Themes</b>	<b>Preventing ill-health and improving health</b>	<b>Improving Planned Care</b>	<b>Improving Urgent Care</b>	<b>Leading the local health system</b>
<b>Aspirations</b>	<b>Increased healthy life expectancy</b>	<b>Improved access to specialist opinion and continuous improvement in quality of care</b>	<b>Rapid access to high quality care wherever you live</b>	<b>Sustainable Health and Social Care system</b>
<b>Strategic Goals</b>	<ul style="list-style-type: none"> <li>•Putting prevention at the core of our work</li> <li>•Keeping people healthier longer</li> <li>•Enabling patients to take responsibility for themselves</li> <li>•Providing care closer to home</li> </ul>	<ul style="list-style-type: none"> <li>•Providing care closer to home</li> <li>•Giving stakeholders and clinicians responsibility for managing pathways and incentivising them to deliver outcomes</li> <li>•Commissioning the best available care for Herefordshire residents</li> <li>•Improving quality and safety of care with defined outcomes</li> </ul>	<ul style="list-style-type: none"> <li>•Rapid access to high quality care wherever you live</li> </ul>	<ul style="list-style-type: none"> <li>•Demonstrating clinical leadership</li> <li>•Fostering integrated working across the whole health system, including social care</li> <li>•Reducing variations in quality of primary care.</li> <li>•Working with partners to embed social inclusion</li> </ul>
<b>Key work programmes &amp; Objectives</b>	<ul style="list-style-type: none"> <li>• Roll out use of a risk stratification tool to identify the patients at highest risk of unplanned hospitalisation and enhance care planning</li> <li>• Implement a locality-based chronic pain management service, focused on supported self-management</li> <li>• Optimise the use of medicines in primary care</li> <li>• Implement the Cardiovascular strategy, and reduce inequalities in health outcomes</li> <li>• Deliver improved pathways, with support from public health, for alcohol, obesity and smoking</li> <li>• Develop and implement a primary care commissioning strategy in conjunction with NHS England</li> </ul>	<ul style="list-style-type: none"> <li>• Embed integrated pathways through Map of Medicine</li> <li>• Improve access to specialist opinion through e-consultation</li> <li>• Implement a community-focused memory service for people with dementia</li> <li>• Match Mental Health rehabilitation provision to local need</li> <li>• Re-commission person-centred respite and short break services for children</li> <li>• Develop transformation plans for Children services</li> </ul>	<ul style="list-style-type: none"> <li>• Prepare for the outcomes-based re-commissioning of urgent care services in 2014/15</li> <li>• Deliver the Urgent Care Recovery Plan</li> <li>• Implement the Rapid Assessment Interface and Discharge (RAID) scheme for patients with mental health needs in Wye Valley Trust</li> <li>• Develop a local Cancer forum &amp; work with the regional stroke network to deliver a revised stroke pathway</li> <li>• Develop community teams through the piloting of Virtual Wards and Neighbourhood Teams</li> <li>• Develop a Clinical Decisions Unit and co-ordinated Health and Social Care Hub</li> <li>• Improve access to the mobile delivery of urgent care</li> </ul>	<ul style="list-style-type: none"> <li>• Lead the development of the Wye Valley Trust Futures Programme</li> <li>• Develop a high-performing CCG</li> <li>• Embed the Patient and Public Involvement strategy into all our work</li> <li>• Foster a culture change for NHS services based on transparency, openness and support for those raising concerns</li> <li>• Implement an Enhanced Quality Assurance Framework to improve the patient experience and assure the quality and safety of health services</li> </ul>
<b>CCG Key delivery/outcome measures</b> <small>(N.B. delivery against NHS constitution measure monitored monthly, those indicators that are also part of constitution indicated with asterix)</small>	<ul style="list-style-type: none"> <li>•Reduction in referrals for dermatology, gastro and cardiology by 5% in 2013/14.</li> <li>•Improved Patient &amp; Carer Experience (inc Friends and Family test) from March 2013 performance of 70%</li> <li>•Reductions in admissions, re-admissions and length of stay for people with a LTC (12/13 baseline to be determined)</li> </ul>	<ul style="list-style-type: none"> <li>•Increase Dementia diagnosis rates to 40% expected by prevalence in 13/14, an increase from 34% in 12/13.</li> <li>•Increase in proportion of people with MH disorders receiving psychological therapies from 6% in 12/13 to 12.5% in 13/14.</li> <li>•Growth of Elective FFCEs limited to 1% in 2013/14.</li> <li>•Maximum 18 week wait RTT (maintained above 95%)</li> <li>•Reduction in CDiff and MRSA rates with a target of 55 and 2 instances respectively during 13/14.</li> </ul>	<ul style="list-style-type: none"> <li>•Reduction in non-elective admissions in 2013/14 by 1.2%.</li> <li>•Reduction in non-elective FFCE by 2% in 2013/14.</li> <li>•A&amp;E Waiting times (max 4 hrs) (performance maintained at &gt;95%)</li> <li>•Maintain A&amp;E attendances at 2012/13 levels</li> <li>•Minimise Ambulance Turnaround greater than half an hour</li> <li>•Max 2 wk prior to 1st outpatient appointment for suspected cancer (93%)</li> <li>•Reduction in number of people with Length of stay &gt;30 days</li> <li>•Reduction in delayed discharges/performance maintained &gt; 2%</li> </ul>	<ul style="list-style-type: none"> <li>•Delivery of Financial QIPP Savings (13/14 £8.2m, 14/15 £9m)</li> <li>•Achieving 'green' finance rating as part of CCG Assurance Framework</li> <li>•Removal of all authorisation red considerations and legal directions by March 2014</li> <li>•Improved Patient Experience (inc Friends and Family test) based on Qtr 1 score 2013/14 to Qtr 2 2014/15</li> <li>•Plan for flourishing and sustainable future for</li> </ul>
<b>Key Enablers</b>	<ul style="list-style-type: none"> <li>•Information Management &amp; technology strategy aimed to support delivery of integrated services in Herefordshire</li> <li>•Robust governance supporting transparent and open decision making</li> <li>•Credible Organisational Development Plan promoting an agile and proactive organisation with the right skills to deliver transformational change in Herefordshire</li> <li>•Development of a robust and credible evidence base (i.e. sound Clinical &amp; financial analysis, information &amp; modelling) to inform clinically based commissioning</li> <li>•Strong Partnership working</li> </ul>			
<b>Core Values</b>	<ul style="list-style-type: none"> <li>•High Reputation, High Performing CCG</li> <li>•Close links to front-line practice</li> <li>•Equality and equity of services and outcomes</li> <li>•Meaningful staff engagement and involvement</li> <li>•Embedding a culture of Openness and Transparency</li> </ul>			

## So far, the CCG has achieved...

### ✓ *Hospital @ Home*

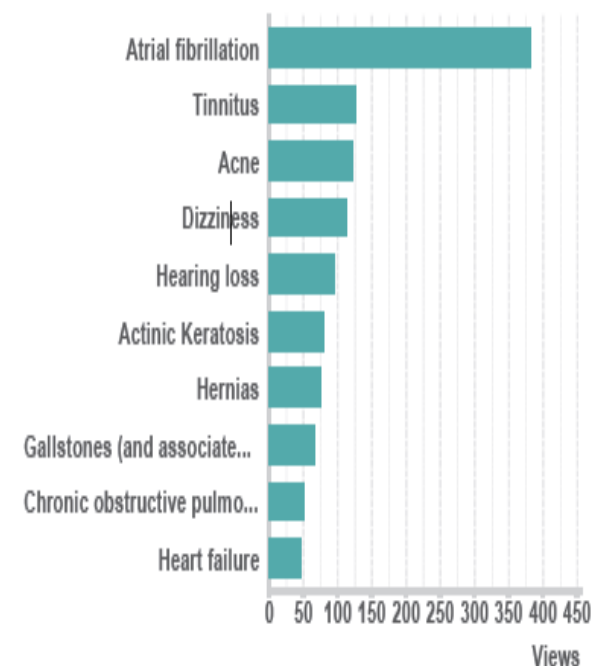
- 98 patients – early supported discharge
- 92 patients – Admission avoided
- Plus 319 patients – supported to leave hospital with limited support from H@H (e.g. follow-up phone call, phone call to relative)

### ✓ *Virtual Wards*

### ✓ *Map of Medicine (more explanation on map)*

- 15 locally agreed (between primary and secondary care) maps published and in use
- 300+ national maps accessible

Top Care Maps - 2013





## So far, the CCG has achieved...

- ✓ **E-Referral** new NHS e-Referral Service will be launched to replace the current Choose and Book service
  - Pilot has shown concept is sound
  - National support to continue towards paperless referrals by 2015
- ✓ **Mental Health (with LA)**
  - Revised Dementia strategy; enhanced dementia services supporting residential homes, post diagnosis support, linked to primary care.
  - Increase in Access Psychological Therapy availability
  - Joint Autism Strategy in place
- ✓ **Children's (with LA)**
  - Review and development of quality standards for CAMHS
  - New short breaks offer for children with disabilities
  - Local Herefordshire Transition protocol agreed

## So far, the CCG has achieved...

- ✓ **Clinical modelling**
  - ✓ Analysis and profiling of key clinical services that need to be provided in Herefordshire
  - ✓ Significant positive engagement with primary and secondary care clinicians
- ✓ **Primary Care Strategy**
- ✓ **Patient engagement**
  - ✓ Involvement in Urgent care Developments
  - ✓ Membership scheme developed
  - ✓ Use of user groups to support diabetes and dementia improvements

**So far, the CCG has NOT achieved at the speed we were hoping...**

- A risk stratification tool
- Psychiatric In reach to WVT
- Stroke Pathway
- Chronic Pain Service
- Cardiovascular Strategy
- Linkages with Public Health on Alcohol, Obesity, Smoking

## So far, we have NOT achieved...

- An increase in dementia diagnosis rates
- Reduce referrals to hospital for some services
- Speed up the discharge of patients from hospital
- Achieve some waiting time targets

## **You said:**

“We want to receive care closer to home”

“Autism services in Herefordshire for adult service users do not always meet local needs”

“Diabetes patient hand held record could be improved”

## **We did:**

- Set up 'Virtual Wards' delivered in the patients' own home based on hospital care and treatment
- Met with service users to understand their experiences. Joint working with local authority to develop a clear strategy and plan to address feedback
- Sought feedback on how improvements could be made, and improved records. Ongoing evaluation in progress to ensure records are effective for service users

## **Patient response**

*"I haven't felt like this many people have cared about me before, thank you"*

*"This is marvellous service and all the staff I have met so far are fantastic"*

*"When you say you're going to do something you do it"*

*"I've have had a full night's sleep after your initial visit which is the first time in three months, because I feel someone is there for me and to help me feel better"*

*Early thoughts on our DRAFT 5 year CCG strategy.....*



**Herefordshire  
Clinical Commissioning Group**

