

North East Hampshire and Farnham **Clinical Commissioning Group**

CCG Strategic Objectives 2017/18 mid-year review



Working in partnership to deliver excellent health care **OBJECTIVE 1: Ensure local people receive high quality services** that are safe, improve outcomes for people, and are delivered with kindness and compassion. Where care does not meet required standards, take action to improve the quality of these services.

Leads: Emma Holden, Andy Whitfield, Peter Bibawy

Progress on actions

- Quality Improvement Programmes
 - Care home programme
 - Primary care quality framework
- Patient Safety
 - Serious incidents and complaints
 - Sign up to safety
 - Sepsis / tissue damage
- Quality Assurance
 - Infection prevention and control
 - Quality insight visit programme
- Safeguarding
 - Primary care children's safeguarding
 - Section 11
- System wide Quality
 - Sustainability and transformation partnerships
 - Hampshire CCGs partnership

OBJECTIVE 1: Ensure local people receive high quality services that are safe, improve outcomes for people, and are delivered with kindness and compassion. Where care does not meet required standards, take action to improve the quality of these services.

Leads: Emma Holden, Andy Whitfield, Peter Bibawy

- **Provider Quality**
 - **Care Quality Commissioning ratings**
 - Frimley Health leadership changes
 - Child and Adolescent Mental Health Services (CAMHS)
- Resources
 - Workforce
 - CCG
- Infection prevention and control
 - New national requirements
- Mortality
 - Delivering the learning disability and acute mortality programmes
- System wide Quality Framework
- Sustainability and transformation partnerships / accountable care systems

OBJECTIVE 2: Deliver the actions within our **Operating Plan for 2017/18** to increase prevention and improve the quality, outcomes and performance of services.

Leads: Ruth Colburn-Jackson, Peter Bibawy

Progress on actions

- Prevention strategy to be signed off in September, social prescribing model in place, aligning priorities with councils and system partners
- Planned Care performance constitutional targets mostly attained, reduced referrals and outpatient attendances, co-ordinated programmes across Frimley Sustainability & Transformation Plan
- Enhanced Recovery and Support at Home service is having a positive impact on patients, Integrated Care Teams moving to pro-active case management of patients at highest risk (including frailty) and improved management of Continuing Healthcare service in Hampshire through the Partnership
- Partnership working in Frimley STP well established to deliver the urgent and emergency care agenda (improving patient flows in and out of hospital)

OBJECTIVE 2: Deliver the actions within our **Operating Plan for 2017/18** to increase prevention and improve the quality, outcomes and performance of services.

Leads: Ruth Colburn-Jackson, Peter Bibawy

- A&E 95% constitutional target continues to be missed though the locally agreed trajectory is being achieved
- South East Coast Ambulance Lack of demonstrable improvement and lack of sight of agreed action plan
- Planned care implementation of programmes with Frimley Health is taking longer due to commitment to collaborative service design
- Delivery of targeted secondary care activity reductions and the evidence of savings by the integrated care teams
- Timeline for delivery of procurements including 111 and community services is very challenging

OBJECTIVE 3: Achieve **Frimley Health and Care STP** priorities working collaboratively with all constituent partners.

Leads: Ruth Colburn-Jackson, Edward Wernick, Peter Bibawy, Steven Clarke

Progress on actions

- Significant and demonstrable development of partnership working with Frimley Health around clinical pathway design and contractual mechanisms
- Good progress made between STP CCG leadership teams generating a consistent and at times single Commissioning view
- Reducing Variation work stream is progressing well in terms of engagement, testing new ways of working and clinical service redesign outputs
- Investment bids for Capital and Revenue developments underway seeking support from a variety of funding streams

- Variation in financial positions for organisations in year and forecast future
- Governance and decision making processes need testing in real terms
- Coherence between the STP programmes with clarity about impact and opportunities of the whole
- Relationship progress outside of the traditional Health sector organisations is not as well developed

OBJECTIVE 4: Achieve key Hampshire wide health and social priorities by operating at scale to deliver the Hampshire and Isle of Wight STP in collaboration with the constituent partners of **'the partnership'** of four Hampshire CCGs, West Hampshire CCG and Hampshire County Council.

Leads: Ros Hartley, Andy Whitfield

Progress on actions

- The Partnership established 1st April 2017
- Clinical and Managerial Leadership structure to be finalised September 2017
- Collective objectives and outcomes agreed across The Partnership e.g. Continuing Health Care, Delayed Transfers of Care, Mental Health, Children's
- Closer relationship with Hampshire County Council
- Tripartite arrangement established between Hampshire County Council, West Hampshire CCG, and The Partnership
- STP Clinical Leadership Group established. CCG Chairs attend.

- Ensuring successful relationship between The Partnership and West re management of collaborative
- Ensure rapid focus on transformation in addition to systems and processes
- Ensure 'tricky' issues jointly owned between Hampshire County Council and The Partnership e.g. Delayed Transfers of Care
- Ensure focus on entire population including North East Hampshire & Farnham

OBJECTIVE 5: Delivering the General Practice Five Year Forward View. Sustainability of Primary Care.

Leads: Ruth Colburn-Jackson, Steven Clarke

Progress on actions

- Implementation of Vanguard funded locality plans proceeding and delivering new models of care including expanded primary care workforce including international recruitment
- Extended access services mobilising with first 2 localities due to commence delivery on the 4th September; all hubs to be live by the 30th September
- Successful implementation of eConsult pilot in Fleet locality; roll out to further 6 GP practices in September followed by all GP practices by end of March 2018
- Co-design of reception and administrative staff care navigation training completed with first courses commencing in September; approximately 200 staff to receive training
- Implementation of Estates Technology Transformation Fund schemes proceeding (2 estates, 2 IT)
- Self-assessment project completed with GP practices; General Practice Sustainability Plan in draft form and currently being engaged on

- Future commissioning of Vanguard funded locality plans as part of the broader out of hospital care model to be commissioned
- Alignment of priorities to adequately mitigate identified risks such as whether the
 actions we have planned will actually result in recruiting and retaining a new model of
 primary care workforce

OBJECTIVE 6: Delivering the Five Year Forward View for Mental Health.

Leads: Ruth Colburn-Jackson, Jane Dempster

Progress on actions

- Delivering on Improving Access to Psychological Therapies (Talking Therapies)
 trajectories and are on target to meet the Five Year Forward View
- Delivering on perinatal new service which is meeting its targets
- Achieving the EIP (Early Intervention in Psychoses) national access standards and Physical Health checks for Severe Mental Illness
- Commitment from Executive team and Clinical Directors to generate detailed mental health strategy during September/October
- Integration: Integrated Mental Health posts developed in Primary care in process of finalising what we want from these posts

- Physical Health checks 2017/18 target has increased to 60% but there is currently a lack clarity on measurement
- Integration: full integration of Mental Health will take more time to achieve at service level
- Supported Employment (Individual Placement Support) is a gap. Opportunity to bid for national money in November - plan to do this with Hampshire County Council

OBJECTIVE 7: Strengthen and embed robust processes to **engage and co-design** with the local community, ensuring that their views and experiences directly influence CCG priorities, plans and delivery.

Leads: Ros Hartley, Jane Dempster

Progress on actions:

- Over 4,400 responses on the primary care and extended access survey
- Community ambassador programme good practice example nationally
- Annual General Meeting focus on patient perspective on impact of service transformation
- Innovation conference projects underway with showcase in November 2017
- Empowering engagement cohort 2 starting in September 2017
- Lots of opportunities to share our learning
- Staff 'meet the' sessions
- External website development
- New community forum planned

- Targeted recruitment for ambassadors
- Resource and capacity challenges to delivery the leadership and support of the Frimley health and care and Hampshire and Isle of Wight STPs, The Partnership, the Vanguard and the CCG

OBJECTIVE 8: Further improve and embed the arrangements through which **member practices** operate within and contribute to the work of the CCG, in order to accelerate planned service improvements.

Leads: Ruth Colburn-Jackson, Steven Clarke

Progress on actions

- TARGET days include CCG business section
- Reinstatement of quarterly GP practice forums
- Increased use of locality meetings to consider future commissioning priorities
- Weekly emails from the commissioning team provides opportunity for regular updates

- Locality meetings could be used better to enable practices to contribute to planned service improvements
- Practice Council role currently unclear and requires reviewing to improve effectiveness
- Ensuring member practices are clear of their role in commissioning decisions
- Managing conflicts

OBJECTIVE 9: Further develop and strengthen the **partnerships** we need to improve health and health services for our population.

Leads: Ros Hartley, Andy Whitfield

Progress on actions

- Partnerships with CCGs across Hampshire progressed
- Continually assessing formal/informal working relationships with other CCGs e.g.. Surrey Heath, Berkshire East, West, Isle of Wight, Surrey CCGs
- Continued relationships with other non-NHS partners e.g. Police, Fire and Rescue, District and Boroughs
- Membership of Health and Wellbeing Board Surrey and Hampshire

- Consideration for framework for other CCGs joining The Partnership
- Ensure focus on other partnerships in addition to The Partnership e.g. Frimley Health and Care Partnership, Hampshire & Isle of Wight STP
- Develop stakeholder analysis across The Partnership
- Consideration of level of involvement in Surrey-wide issues

OBJECTIVE 10: Ensure collaborative commissioning arrangements deliver effective patient outcomes and are financially viable.

Leads: Ros Hartley

Progress on actions

- Mental Health Blackwater Valley Alliance established following the Surrey Mental Health collaborative dissolution
- Focus on delivery of Five Year Forward View for Mental Health as well as developing new Models of Care across Frimley STP
- Working with West on collaboratives they lead on e.g. Mental Health / Learning Disabilities / Continuing Health Care. Focus to date has been on improving current systems and processes
- Children's and maternity collaborative. Close working with Hampshire County
 Council to improve outcomes/agreement to integrated approach to developing new
 services. New team structure being implemented
- Model agreed for community paediatrics action plan in place for service transformation

- Delivery of new Mental Health Five Year Forward View targets
- Requires more focus on service transformation as well as systems and processes
- Performance of Child and adolescent mental health services
- New model for community paediatrics
- Performance of Continuing Health Care and Delayed Transfers of Care

OBJECTIVE 11: Deliver our financial plan, achieving value for money and meeting our financial obligations.

Leads: Roshan Patel, Edward Wernick

Progress on actions

- 2016/17 fully audited and closed. No risks identified for 2016/17
- On track for delivery of the CCGs financial plans for 2017/18
- QIPP saving plans currently delivering over 90% of planned savings
- Activity currently tracking to plan, and cost per case Acute contracts marginally below plans
- Task & finish group established to manage Continuing Health Care
- Focus moving to 2018/19 and ongoing funding of Vanguard programme

- 0.5% Contingency remains uncommitted
- Growth in continuing health care expenditure and failure to deliver planned savings / transformation
- Additional funding requirements to support Community Paediatrics
- Evaluation of Vanguard interventions to support ongoing investment
- Procurements; Community Services, 111 & Clinical Assessment & Treatment Service (CAATs)

OBJECTIVE 12: Refresh and implement our **organisational development plan**, developing our people, culture and clinical leadership to enable innovation and excellence, managing within our running costs.

Leads: Ros Hartley, Peter Bibawy

Progress on actions

- Staff values and supporting behaviours launch at celebratory event
- Localised Staff survey developed to address key points from National Staff survey
- Workshop for local Patient Participation Groups, Practice Managers and GPs
- Continue to roll out the Clinical lead TARGET sessions and supporting e-News
- Empowering engagement cohort 2 starting
- Staff partnership forum meeting regularly and taking the lead on key staff issues
- 2020 programme 2017/18 underway
- Leadership Development Programme undertaken for the majority of staff

- Leadership and capacity
- Partnership vs local arrangements
- Staff development requirements during significant organisational change
- Keeping staff informed and briefed of key changes and developments, ensuring they are kept involved and informed in a helpful way.