



GOVERNING BODY MEETING

Date of meeting	18 July 2017	Agenda item number	11
Title of report	2030 Vision for Health and Care		
Paper Presented by:	Peter Tinson, Chief Operating Officer		
Paper prepared by:	Pippa Hulme, Senior Planning & Performance Manager		

CCG strategic objective supported by this paper: (please tick ✓)	Develop and maintain an effective organisation	✓
	Commission high quality, safe and cost effective services which reduce health inequalities and improve access to healthcare	✓
	Effectively engage patients and the public in decision making	✓
	Develop excellent partnerships which lead to improved health outcomes	<input type="checkbox"/>
	Make the best use of resources	✓

Purpose of report
This report provides an integrated update on the progress of schemes that contribute towards the delivery of the CCG 2030 Vision.
Recommendation
Members of the Governing Body are asked to note the report and approve the rate of progress being made across the commissioning projects.

Please indicate which Group this has been discussed with (please tick ✓)			
Executive Management Team (EMT)	<input checked="" type="checkbox"/>	Quality Improvement Governance and Engagement Committee (QIGE)	<input checked="" type="checkbox"/>
Clinical Commissioning Committee (CCC)	<input checked="" type="checkbox"/>	Finance and Performance Committee (F&P)	<input checked="" type="checkbox"/>
Audit Committee	<input type="checkbox"/>	Remuneration Committee	<input type="checkbox"/>
Council of Members	<input type="checkbox"/>	Other/Not Applicable	<input type="checkbox"/>
Patient and Public Engagement:	Shaped the Vision and is part of the standardised commissioning process.		
Equality Impact Assessment:	Forms part of the standardised commissioning process.		
Resource Implication(s):	Forms part of standardised commissioning process.		
Are there any associated risks? If so, are the risks on the risk register? If yes, please include risk descriptor and current risk score	Forms part of the standardised commissioning process.		
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GOVERNING BODY – TUESDAY 18 JULY 2017
2030 VISION FOR HEALTH AND CARE

1. BACKGROUND

- 1.2 This report provides an integrated update on the progress of schemes that contribute towards the delivery of the CCG 2030 Vision.

2. EPISODIC CARE

Key Achievements/activities since last report:

- 2.1 Following the evaluation of the Pharmacy+ service which was presented to the Clinical Commissioning Committee in June 2017, the scheme has been extended for a further 12 months. There are thirty three accredited pharmacies signed up to deliver the service and twenty nine are operational. The remaining four pharmacies are expected to become fully operational in July 2017.
- 2.2 Following successful delivery of six scenario training sessions to assist “front of house” staff in triaging patients appropriate for referral to the Pharmacy+ clinic, scheme a further two sessions have been planned in Fleetwood and Lytham.
- 2.3 The interim NHSE GP extended access service continues to be available 7 days a week from two locations in Fylde and Wyre and is available to all GP practices. Going forward, the GP extended access service forms part of the primary urgent care service development.
- 2.4 The Directory of Services commenced testing on 3rd July with local stakeholders including service users; district councils commissioning leads and clinical leads. Full launch is expected in mid-August 2017.

3. Multi-speciality Community Provider (MCP)

- 3.1 The MCP Leadership Team has met twice; meetings are held on a monthly basis. The group have agreed to hold a workshop with Vanguard workstream leads in order to discuss the possibility of the MCP focusing on these workstream areas as an initial priority.
- 3.2 An extraordinary meeting was held on 27th June 2017 with MCP partners and Capsticks Solicitors to review and agree the content of the Alliance Agreement. A final version of the agreement will be shared with partners on 3rd July 2017 for consideration and sign off.
- 3.3 The MCP Chair role has been advertised, the closing date for applications is 7th July 2017. The Programme Lead and Programme Support Officer roles job descriptions have been agreed and will be advertised imminently.

4. Lancashire and Cumbria Alliance Innovation Test Bed (LCIA)

- 4.1 Following submission of a detailed proposal, approval has been given by NHS England to extend the period of recruitment to the Test Bed by 3 months to the end of September 2017.
- 4.2 The LCIA Test Bed continues to work closely with the Fylde Coast Vanguard and fortnightly Clinical Operational Groups are held with commissioners and providers to monitor progress.



- 4.3 103 patients have been consented to Cohort 1 (high risk) and 49 have Philips' Motiva monitoring systems installed in their homes which monitor weight, blood pressure and oxygen levels. Six patients have also been recruited to the Dementia Cohort, 5 of which have Philips' Motiva systems installed.
- 4.4 A range of services including the Neighbourhood Teams, Pulmonary Rehab and Falls Team have been identified to commence recruitment of patients to cohort 2 (medium risk). Recruitment has begun for Cohort 3 (low risk) with 15 patients from Over Wyre Medical Practice being consented to the programme and the uMotif App uploaded to their phones.
- 4.5 Technology has now been fitted into 296 homes across the Test Bed project area to support condition monitoring and self-management including Bluetooth weighing scales, pulse oximeters and heart rate and blood pressure monitors.
- 4.6 Filming took place on Thursday 15th June 2017 commissioned from NHS England to produce a short and engaging video from the perspective of patients and clinicians involved in the LCIA Test Bed. The purpose of the video is to provide an insight into the impact the programme has made on the working lives of healthcare professionals and the day to day lives of patients. The video will be showcased at the quarterly event on the 6th July 2017, along with one from all other Test Bed sites across the country. Members of the Extensive Care Team supported the filming.
- 5. Whyndyke Garden Village (WGV) Healthy New Town**
- 5.1 Fylde and Wyre CCG met with colleagues at West Lancashire CCG in June 2017 who have developed Well Skelmersdale, to share good practice and identify shared learning. Further opportunities are being explored to secure support from Well North who have significant experience of creating better health and wellbeing through vibrant and connected communities.
- 5.2 A number of themes have been identified i.e. Health facility, Digital technology to promote self-care for long terms conditions, encouraging physical activity, developing homes for lifelong living and developing community asset ownership and community engagement, which reflect the NHS England agreed priorities for Whyndyke Garden Village.
- 5.3 Each theme has set deliverables which are identified from the phase 2 delivery plan and are being progressed through theme leads, the outcomes of which all feed into the plans for the development and implementation of the Village.
- 5.4 Work is underway to bring together the school, health facility and other community facilities to develop a community hub and Professor Sumi Helal from Lancashire University has commenced scoping the vision and design requirements for the digital technology elements of the village.
- 5.5 Understanding the current community assets available across Blackpool, Fylde and Wyre to support the encouragement of physical activity is underway in the identification of public spaces, gyms etc. to inform the requirements of the design plans avoiding duplication and maximise the types of facilities available.
- 5.6 A team from Whyndyke Garden Village attended the NHS England collaborative, Community Engagement event. The outputs from the event are being used to develop the Whyndyke Garden Village Communications and Engagement Strategy. A community engagement event with residents of the bordering Mereside estate will be held on the 2nd August 2017.



6. ACHIEVEMENTS – OTHER PROGRAMME AREAS

6.1 The Clinical Commissioning Committee in June 2017 received the following service evaluations –

6.1.1 *Pharmacy+ Clinic Evaluation*

The service will continue to be provided for a further 12 months from all four Fylde and Wyre neighbourhoods and will remain open to further expressions of interest. From November 2016 to April 2017 the service saw an average of 260 consultations per month and has potentially saved 1,478 GP appointments, 4 A&E attendances and 37 Primary Urgent Care Centre attendances. Further scoping and development of the service will be undertaken including, trailing of EMIS within community pharmacies, development of a Pharmacy+ clinic website and inclusion of Patient Group Directions (PGD's).

6.1.2 *Home Oxygen Assessment and Review Service Evaluation*

The committee agreed to the continued provision of the interim service to 31st July 2018 and noted that options for procurement of the substantive service will be submitted for consideration in January 2018. The service will continue to provide specialist assessment and review for patients prescribed home oxygen therapy.

6.2 The Clinical Commissioning Committee also approved the following in June 2017 –

6.2.1 *Fylde Coast End of Life Strategy 2017-22*

The committee agreed the 5 year strategy which sets out the aspirational view of end of life care across the Fylde Coast. The strategy has been collectively developed and agreed with Fylde Coast partners.

6.2.2 *New Progress Housing Care Home lifting service pilot*

The committee agreed a 6 month pilot extension of the existing lifting service for provision to care home patients. The service will provide an assisted lifting service in the Wyre Integrated Neighbourhood (WIN) to care and residential home patients that have fallen and are uninjured. The pilot aims to have a positive impact on reducing ambulance call outs and help to educate care home staff regarding the prevention of falls and increase the overall awareness of falls in care homes.

7. REVISED GOVERNANCE AND ASSURANCE PROCESS

7.1 A revised reporting and governance process commenced in June 2017 to support assurance and oversight of projects and focus on the achievement of savings plans.

7.2 The existing bi-weekly reporting process via the CCG internal PMO has been maintained with exceptions being reported to the EMT for consideration. This has been further enhanced with a 'live' reporting process for all Task and Finish groups.

7.3 All Task and Finish groups will attend EMT on a monthly basis to update on progress, issues and actions and walk thorough their identified saving delivery plans. This will support timely delivery of programmes and projects as planned and support project leads in resolving blockages in a timely manner.



8. SAVINGS PLANS OVERVIEW

- 8.1 The CCG has a £6.84m financial savings target for 2017/18 and a £5.0m target for 2018/19; however the aspiration is to deliver the combined target of £11.9m in 2017/18.
- 8.2 The totality of savings schemes identified across the entire task and finish groups currently equates to £7m and £5.6m for 2017/18 and 2018/19 respectively. If all identified savings opportunities are delivered to plan, individual savings targets for both years would be achieved; however there is a gap of identified plans of £4.9m to meet the financial ambition of £11.9m in 2017/18.
- 8.3 A more detailed analysis of the current savings position is provided in the financial update to the membership and going forward will identify any further potential risk to delivery identified based on the actual monthly monitoring of the delivery of these schemes in year.
- 8.4 To address the £4.9m gap in identified plans to meet the £11.9m target, there will be a focussed challenge session at the September 2017 Clinical Commissioning Committee. The session will cover all task and finish groups associated delivery plans and the potential for additional opportunities or further stretch to identified plans.

9. RECOMMENDATION

- 9.1 Members of the Governing Body are asked to note the report and approve the rate of progress being made across the commissioning projects.

Peter Tinson, Chief Operating Officer