

NHS North Tyneside CCG Service Plans 2018/19

**Report for Adult Social Care Health & Wellbeing Board Sub-Committee
July 2018**

Introduction

Adult Social Care Health & Wellbeing Board Sub-Committee requested a report on the CCG's Service Plans for 2018/19. In this report, the CCG's financial position at the end of 2017/18 and moving into 2018/19 is described. This sets the way forward for how the CCG will meet the expectations and requirements of the national Planning Guidance and how, locally, the CCG's Commissioning Priority Areas 2018/19 were developed.

Financial Summary

The CCG has successfully implemented its financial recovery plan. Over the last three years, it has delivered savings of around £39m. This work has put the CCG in recurrent financial balance and it has started to repay the deficit it accumulated. The deficit peaked at £19.3m and is £12.2m at the start of 2018/19.

The CCG's financial objective is to meet its financial duties and support the delivery of its other objectives.

The CCG's 2018/19 financial plan demonstrates that it will deliver the £3.5m control total set by NHS England, along with the other key business rules, including the Mental Health Investment Standard, investing in the GP Five Year Forward View and holding a 0.5% contingency. The plan is based on prudent assumptions, including increases in line with the national expectations to fund growth in A&E and non-elective activity and to tackle increases in waiting lists. By the end of 2018/19 the CCG plans to maintain a 1% underlying surplus and have reduced its carried forward deficit to around £8.7m. It plans to repay the remainder of the deficit over the following three years.

In terms of efficiency savings, the CCG's target is much lower in 2018/19 than in previous years. The success of previous years has reduced the opportunity for savings but has also put the CCG in a strong position where high levels of savings are not required. A robust plan to deliver around £6.5m (1.8%) savings is in place. Medicines Optimisation, changes to the delivery of intermediate care and ensuring packages of care are proportionate are key areas within the plan. There are risks to this delivery but there is mitigation set aside to cover this risk.

Much of the CCGT's success in turning around the financial position is as a result of the financial governance arrangements put in place. This includes a strong

Programme Management Office. We will maintain these arrangements and continue to develop, in particular by further support and training for our managers.

Delivery of the CCG's financial targets is only important because it will allow the CCG to commission high quality care for patients on a sustainable basis. The financial plan supports providers and the key Future Care development. The improved financial position allows the CCG to look forward to investing in service developments. In the current financial climate this will remain a challenge but we are now in a stronger position to deal with this.

Key to the sustainability of our plans is collaboration with our partner organisations. We are and will continue to work with fellow commissioners, our providers and the local authority to make the money work both within North Tyneside and on the larger footprints of Integrated Care Systems and the STP. For example, we are represented on the Cumbria and North East Finance Leadership Group, the Northumberland Tyne and Wear STP finance group and our directors are developing closer working with the other CCGs North of the Tyne. We will continue to build on these and existing networks to pool expertise, review payment methods, and develop different ways of working to tackle the financial pressures we all face.

The CCG is pleased that it is no longer under special measures or legal directions.

Operational Plan Update

The national Planning Guidance for 2018/19 was published in February 2018. Because 2 year contracts had already been entered into during 2017/18 and Operational Plans written accordingly, the 2018/19 guidance required CCGs to provide a refresh of the existing Operational Plan.

CCGs were directed to take into account of priorities identified in the national guidance which, for 2018/19 focused on protection of investment in mental health, cancer services and primary care and also continued development of system-wide plans to describe how commissioners and providers will collaborate to improve services and manage budgets.

Our approach in North Tyneside was to review the 2017/19 Plan to provide the updates required by the national guidance but also to use the opportunity to update on other areas of progress. The document describes how the CCG will continue to work to achieve the nationally identified nine "Must Do's" (which include the areas mentioned in the paragraph above) as well as other pathway and quality changes and developments.

In line with national and local requirements, a draft submission of the CCG's Operational Plans for 2018/19 was made to the national NHS England team on 8 March (with the Finance plan submitted to the local NHS England team on 1 March). The final submission was required on 30 April, with the Finance plan local submission a week earlier.

Much of the work already started in North Tyneside is to address the key priorities of the national planning guidance and key strategic documents such as the NHS Five

Year Forward View, Mental Health Forward View and the GP Forward View. The CCG is already progressing towards the development of a local approach towards integrated services for older people and reshaping primary care to meet future demand. Improving and developing the integration of health and social care is also an important cross cutting priority for both the CCG and Local Authority.

Many of the CCG's plans are based on the Future Care Programme, which brings together existing strands of work to deliver sustainable care closer to home, with hospital by exception. A central component of Future Care is development of a new model of community and primary care provision to support a move in resources from acute to primary and community services, as well as working in four localities across North Tyneside to support local delivery where appropriate. Some more detail is given on this in the Service Development & Transformation Section below.

A key feature of the 2018/19 Operational Plan is the CCG's achievement of delivering recurrent financial. The CCG plans to achieve an in-year surplus for financial year 2018/19 and repayment of the remainder of its deficit over the following three years. This will help the CCG to commission high quality care on a sustainable basis in the future and allows the CCG to look forward to investing in service developments. The Operational Plan also has a section focusing on how the CCG will align its finance and activity plans during 2018/19.

The CCG is very conscious of the various standards and performance requirements and always strives to achieve high quality care. The CCG's ambitions for achievement of the NHS Constitution Performance standards are detailed in the Operational Plan. This includes achievement of current mental health standards, progress in achieving the cancer standards and also how the CCG continues to work with the Northumberland & North Tyneside Local A&E Delivery Board to achieve the A&E and Ambulance standards.

The Operational Plan outlines information from the Northumberland Tyne & Wear and North Durham Sustainability & Transformation Plan (NTWND STP), and continues to describe how the CCG's local plans will align to the STP and how the CCG will work in collaboration with our partner organisations to help deliver the CCG's vision for healthcare in North Tyneside.

The Operational Plan outlines how the STP priorities are to:

- Scale up prevention and health & well-being
- Develop models of out-of-hospital care
- Make best use of acute hospital sector

These are to be delivered within the context of addressing a £641m potential funding shortfall by 2020/21 if nothing changes.

The interventions that the STP expects to be led and delivered locally (i.e. at CCG / Local Authority level) are to support self-care and health promotion, develop primary care, develop community and other out-of-hospital provision support, secondary care commissioning and collaboration with voluntary sector and public engagement. The CCG's commissioning plans reflect this contribution.

The document also describes key quality improvements that the CCG intends to implement over the next year. This includes how the CCG manages the various quality systems and processes in place to provide assurance that requirements are being met.

Finally, a Plan on a Page, has been developed which provides an “at a glance” summary of the CCG’s vision, the high level initiatives which will help the CCG to achieve its vision, and the enablers which underpin how the CCG will undertake its work.

It is relevant to note that, as part of the process for 2018/19, contract variation documents were signed with Northumbria Healthcare NHS Foundation Trust, Newcastle upon Tyne Hospitals NHS Foundation Trust and Northumberland, Tyne & Wear NHS Mental Health Foundation Trust and the Ambulance Service, as well as the smaller contracts with other non-statutory organisations.

The CCG’s Governing Body and Clinical Executive both received draft copies of the CCG’s 2018/19 Operational Plan and Commissioning Priority Areas as they were developing and Governing Body signed off the final versions at its meeting in April 2018.

Service Development & Transformation

Overview

The CCG’s Strategic Principles are as follows:

- High quality care that is safe, effective and focused on patient experience
- Services coordinated around the needs and preferences of our patients, carers and their families
- Transformation in the delivery of health and wellbeing services provided jointly with the local authority, other public sector organisations and the private and voluntary sector
- Best value for taxpayers’ money and using resources responsibly and fairly
- Right services in the right place delivering the right outcomes

The CCG’s Commissioning Priority Areas document has also been updated to reflect the new Planning Guidance, the Health & Well-Being Board Work Plan as well as the CCG local priorities for 2018/19.

The CCG undertook a process of engagement to gain input into and feedback on the Commissioning Priority Areas document which valuable feedback received from the CCG’s Patient Forum, Council of Practices, Clinical Executive and Governing Body.

The CCG is committed to developing an improved way of working with the voluntary sector, including any considering any potential commissioning opportunities. Work is underway to develop those closer working relationships, to develop a compact

between the CCG and the voluntary sector and to identify opportunities where the voluntary sector can enhance service provision in North Tyneside.

The CCG has quality of patient provision at its heart and constantly seeks to ensure that, through the work with our partners, we continue to improve the quality of services for the patients in North Tyneside. Considering the CCG's vision and principles that we have described in the document, we strive to find and implement new ways of working which will mean that care will be closer to home and people will only be in hospital when it is really needed.

The areas described below are only some of those contained in the Commissioning Priority Areas document but which we expect will be key to future service provision and/or to assist the CCG meet its efficiency programme for 2018/19.

Future Care

Future Care is a key component of the CCG's strategic direction to achieve the above, working with our partners to achieve its aim and vision. Future Care brings together existing strands of work to deliver sustainable care closer to home (with hospital by exception). The foundations of this are built upon a Primary Care Home delivery model which builds upon the work to date and includes:

- Care Plus
- Realignment of Community Services
- Delivery of the Primary Care Strategy & Extended access
- Urgent Care
- Enhanced Health in Care Homes

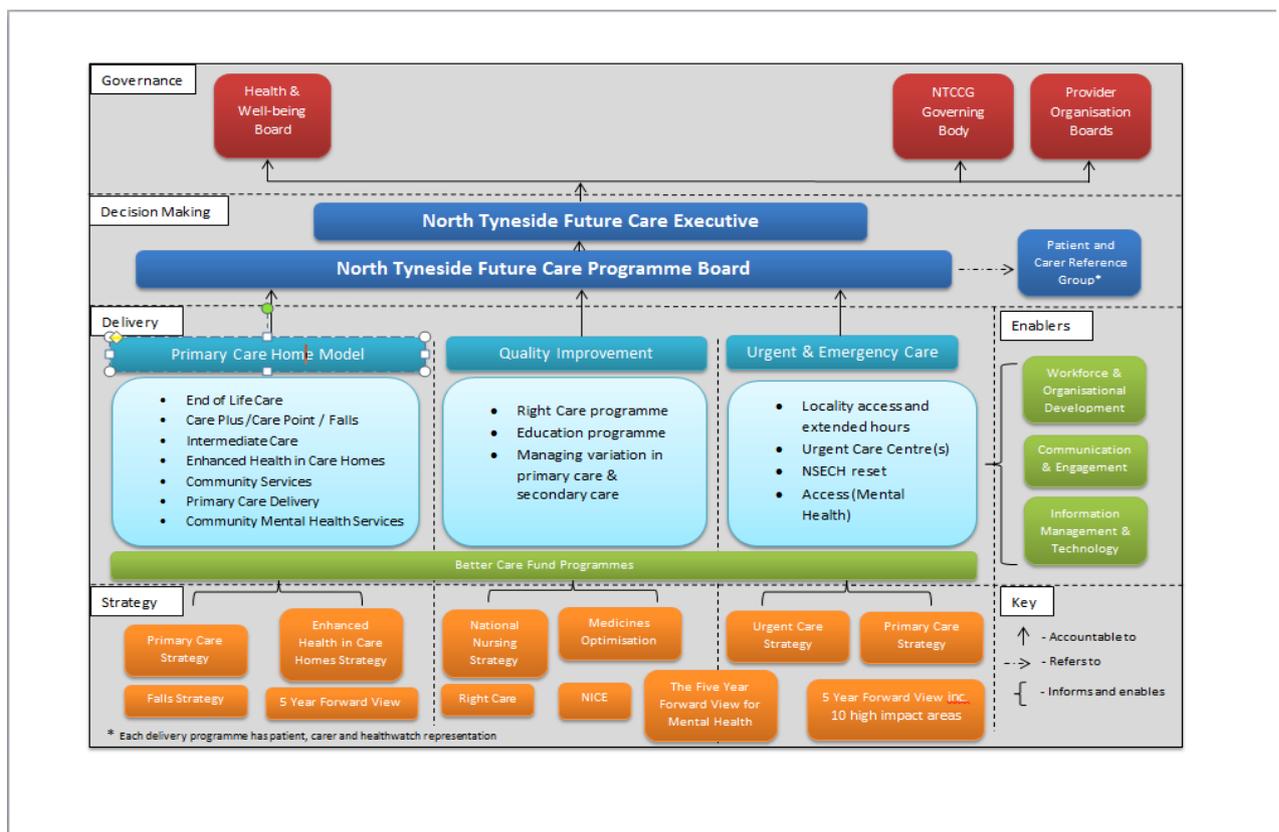
This potentially positions North Tyneside for the development of a MCP model. However it is important to focus on the quality and productivity of patient delivery rather than organisational form.

The box below describes the principles of how we expect that Future Care will be implemented.

Principles

- Locality working – c.50k population
- Innovation / transformation
- Agile workforce
- Shift from Acute to Primary / Community
- Care closer to patients home
- Support new models of care
- Patient at centre of decision making
- Managing resources efficiently and effectively
- Right care, right place, right person, right time

The schematic below provides details of the services that fall within the Future Care banner and how the governance structure around Future Care will operate. The particular schemes detailed are those which have been highlighted as priority areas for the CCG and also because they do link in with one another and therefore successful implementation of Future Care will rely on each of the areas being developed as part of an integrated, unitised approach.



Medicines Optimisation

In 2018/19 Medicines Optimisation continues to be an important feature of the CCG's planning intentions into 2018/19, as it has been in previous years. During the next year, we intend to undertake a number of initiatives as described below.

- Implement interventions to support optimal medicine taking to enhance the quality of life and experience of care for people with long term conditions,
- Reduce waste within the overall system through use of electronic prescribing and repeats systems and avoidable waste in care homes,
- Support the judicious use of antibiotics to appropriately manage infections and minimising the risk of the development of healthcare acquired infections
- Support local implementation of NICE clinical and technical guidance supporting the development of local integrated pathways and guidance, allied to effective horizon scanning.

We expect that the combination of the above initiatives will ensure efficient use of our prescribing budgets within our service transformation proposals, enabling people

to manage their health, reduce the need for acute intervention and maintain independence. It will also be integral to and play a key role in the development of a new paradigm of healthcare in line with the 5 year forward view.

Urgent Care

The CCG has commissioned a new integrated urgent care service from 1st October 2018. The service will consist of a single Urgent Treatment Centre and a co-located Out of Hours service providing 24 hour access to healthcare for patients with minor injuries and minor ailments.

The core aims of the service will be to:

- provide safe, high quality, care to all service users;
- reduce pressure on type 1 A&E departments by minimising the number of escalations and facilitating the redirection of low acuity patients from ED;
- operate as a fully bookable service, placing greater emphasis on the use of NHS 111 and a 'talk before you walk' approach to self-presentation;
- integrate with other relevant services (e.g. extended access primary care hubs and NHS 111);
- remain financially sustainable.

The provider of the new integrated urgent care service will be required to join the regional alliance to support the delivery of the NHS 111 Clinical Advisory Service (CAS). This will see local clinicians being more closely involved in the delivery of telephone-based care and ensure that patients can be transferred seamlessly between the two services. The CAS will assume responsibility for the 'speak to' dispositions which were previously passed from NHS 111 to a locally-commissioned GP Out of Hours Service from 1st October 2018.

RightCare

We will continue to make best use of comparative information to identify savings opportunities across common pathways. We have already developed work on the following areas, with stakeholders and partners:

- Musculoskeletal
- Respiratory
- Circulation
- Gastrointestinal
- Cancer
- Trauma & Injuries

The CCG is reviewing the opportunities from the above service areas to determine if there are any further efficiencies or improvements that can be made. An example is that, following a review of the respiratory pathways, we will be looking at the asthma pathway as the RightCare data indicates that asthma activity is higher in comparison to other CCG areas of a similar demographic to North Tyneside.

The CCG is also seeking opportunities in other services, specifically:

- Neurology
- Genitourinary Medicine

Most of the change programmes that we have developed or are developing are with Northumbria Healthcare NHS Foundation trust. We therefore work closely with Northumberland CCG but also with other neighbouring trusts and CCG where this is appropriate. We recognize that Work collaboratively with Northumberland CCG & Northumbria Healthcare NHS FT to develop change programmes

Health and Wellbeing

Health and Wellbeing is another key part of the Operational Plan. The document highlights the population changes expected over the next 5 years. It also describes how these population changes will impact on how services need to be provided to ensure that the CCG and partners meet local need and address both health and inequalities challenges.

As the Committee will be aware, the North Tyneside Health & Well Being Board updated its own Work Plan for 2018-2020 following a refresh of the Joint Health & Wellbeing Strategy and the Joint Strategic Needs Assessment. The CCG has used this Work Plan to inform the Operational Plan priorities, clearly demonstrating the close synergy between the CCG and Local Authority priorities.

The CCG is also looking at ways to support for people to address their common health problems through self-management or using low-intensity solutions to common health problems. Discover why people find it difficult to lose weight, exercise, stop smoking, drink less alcohol and make it easier for them to adopt these behaviours.

The CCG is promoting 'patient online' and other e-solutions to improve the convenience and accessibility of GP services and alternative community provision

Working with partner organisations, the CCG is also developing more intervention to direct people to the right solutions for their problem (e.g. directly bookable services through NHS 111, streaming at front-door of A&E, use of community pharmacy for minor ailments)

Many of the self-care and supporting patients to make the right choices initiatives are reliant on a culture change which we recognise takes time to effect and realise tangible benefits.

Engagement of key stakeholders in initiatives can be an issue to successful delivery, but the CCG is actively working to minimize these and ensure that appropriate stakeholders are involved in our initiatives, such as RightCare.

Funding, workforce capacity and clinical leadership is an inevitable risk to delivery of new initiatives, such as those included in the Primary Care Five Year Forward View, but the CCG expects that resources will be managed to ensure that the initiatives are delivered.

Conclusion

In previous years, the CCG has gained "Substantial Assurance" from the Internal Auditors in relation to its Planning process and, as Committee will be aware, is

currently rated as “Good” by NHS England. The 2018/19 refresh document was submitted within the national timescales to NHS England with no requirement for amendment.

Committee will be aware that the CCG’s Constitution requires that it must “Ensure its expenditure does not exceed the aggregate of its allotments for the financial year”. The CCG has now begun to reduce its financial deficit, having delivered a small in-year surplus in 2017/18, and we plan to reduce the deficit further over the next few years. This has enabled the CCG to begin to focus more on service developments and we have described the key areas for development or transformation above. These do not constitute all of our service developments or Commissioning Priorities and these can be found on our Commissioning Priority Areas document which will be published on the CCG website.