NHS Sunderland Clinical Commissioning Group

Item No. 7

SUNDERLAND HEALTH AND WELLBEING BOARD

25 July 2014

Sunderland Health & Social Care System Strategic Plan

1. Purpose

The purpose of this report is to provide the Health & Wellbeing Board with an update on the development of the 5 year strategic plan for the Sunderland Health and Social Care System.

2. Background

In December 2013, NHS England produced national guidance 'Everyone Counts: Planning for Patients 2014/15 – 2018/19. Within this guidance NHS England highlighted the fact that the healthcare system is facing the challenge of significant and enduring financial pressures and outlined the need to innovate and transform the way we deliver high quality services, within the resources available, to ensure that patients, and their needs, are always put first.

The guidance set out a framework outlining the need for commissioners to work with providers and partners in local government to develop strong, robust and ambitious five year plans to secure the continuity of sustainable high quality care for all and maximise the best possible outcomes for local communities.

The guidance set out the need for CCG's to:

- Develop a two year CCG operational plan;
- Take the lead in developing a 5 year Strategic plan for the health and social care system in Sunderland;

In developing these plans a number of requirements were outlined:

- CCG's must have an outcomes focused approach, with stretching local ambitions expected of commissioners, alongside credible and costed plans to deliver them;
- Ensure citizen inclusion and empowerment to focus on what patients want and need;
- Ensure more integration between providers and commissioners;

- Ensure more integration with social care and ensure cooperation with Local Authorities on Better Care Fund planning;
- Ensure plans are explicit in dealing with the financial gap and risk and mitigation strategies. No change is not an option.

Initially there was a requirement to submit the final version of the 5 year strategic plan by 20th June 2014, however, NHS England have since advised that further time will be given for health and care systems to work through their 5 year strategic plan with a final version being submitted in Autumn 2014.

3.Current Position

NHS England has identified that any high quality, sustainable health and care system in England will have the following six characteristics:

- A completely new approach to ensuring that citizens are fully included in all aspects of service design and change and that patients are fully empowered in their own care;
- Wider primary care, provided 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.

The Strategic plan is focused around these six characteristics highlighting both examples of good practice currently in place across the Sunderland health and care system as well as key programmes of work identified as a priority going forward across the whole system.

In line with this approach, a 5 year health and care system plan on a page for Sunderland has been developed which outlines the key programmes of work being undertaken across Sunderland including the 10 transformational changes identified by the CCG as a priority for the next two years and the key BCF schemes This can be found at Appendix 1 for ease of reference, however the full Plan also accompanies this report.

Through the sharing of organisational plans via the Transformation Board, it has also been possible to identify the financial savings required to be made across the system, outlined in the table below:

NHS Sunderland Clinical Commissioning Group

	14/15 £M	15/16 £M	16/17 £М	17/18 £M	18/19 £M
NHS SUNDERLAND CCG	2.9	3.9	6.0	3.0	3.0
SUNDERLAND CITY COUNCIL (Peoples) DIRECTORATE	10.7	12.0?	10	10	10
CITY HOSPITALS SUNDERLAND NHS F.T	16.3	14.1	18.5	15.6	15.5
SUB TOTALS (MAINLY SUNDERLAND)	29.9	30	34.5	28.6	28.5
NORTHUMBERLAND TYNE & WEAR NHS F.T	11.3	10.8	10.7	??	??
SOUTH TYNESIDE NHS F.T.	13.8	??	??	??	??
NORTH EAST AMBULANCE SERVICE F.T	6.0	??	??	??	??
SUB TOTALS (Will include an element of Sunderland)	31.1	??	??	??	??

From the table above it can be seen that the organisations whose focus is "mainly" on Sunderland need to save in excess of £150m over the life of the strategic plan. Other organisations that also provide services into Sunderland will need to deliver efficiencies so it is feasible the wider "public" sector economy in Sunderland will need to save circa £175m in the next 5 years. The detailed figures for Sunderland CCG are highlighted in the "financial plan on a page", however from the table above the context for the wider public sector economy can be seen.

Fundamental to the successful delivery of the savings above, will be the need to transform "pathways of care" from traditional secondary care settings where appropriate into community / primary care settings. At the heart of our plans is the expectation that non elective admissions can be reduced by 15% over the life of the plan. For the CCG and our main acute providers this impacts from 2016/17 onwards whereas for some economies the need is now. Sunderland does have the time to

work through with partners the granularity of its plans to deliver its Vision and three strategic objectives and ensure 'universal' sign up.

Underpinning the pathways of reform work will be the need to finance non recurrent projects and double running costs. Sunderland CCG is in a fortunate position given its sound financial situation which will be used to support the "reform" agenda. We have signalled a phased "draw down" of the financial surplus reported by the CCG at the end of 13/14, commencing in 15/16 which gives the wider economy a unique advantage to finance change effectively.

In addition to the phased draw down of the surplus delivered at the end of 13/14, Sunderland has also reviewed its short term plan for 14/15 and will increase its planned surplus by a further £2m. Following all these adjustments the planned surplus for each year will be as follows:

	14/15 £,000	15/16 £,000	16/17 £,000	17/18 £,000	18/19 £,000
Original Plan Surplus (13/14)	16,987	16,987	16,987	16,987	16,987
Add Surplus Delivered in 14/15	2,000	2,000	2,000	2,000	2,000
Draw down of Surplus		(3,000)	(3,000)	(3,000)	(3,000)
Revised Plan Surplus	18,987	15,987	12,987	9,987	6,987

The "draw down" of surplus is controlled at a national level following discussion between Treasury and NHS England. We will not know if our plans are agreed until later in the year when the plans of all CCG's have been scrutinised and the "planned" level of draw down is known.

Using this money wisely is key to success going forward. Failure to do this will result in a missed opportunity which is unlikely to come around again.

4.Next Steps

- Receive Health & Wellbeing Board feedback on the content of the strategic plan;
- Receive further partner and provider feedback on the strategic plan and key initiatives within this;
- Agree further key programmes of work to be funded via the operational resilience and planning process and amend the plan to reflect these;
- Assess the impact of the LA efficiencies to be made from the LA contribution to the pooled Better Care Fund and agree the risk sharing arrangements for the pool
- Further develop the vision for each of the six characteristics
- Further review of the financial savings in the latter three years of the plan for those organisations currently not outlined in the table below;
- The final version of the strategic plan will be submitted in Autumn 2014.

5.Recommendations

The Health & Wellbeing Board is recommended to:

Provide feedback to inform the continuing development of this plan

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Debbie Burnicle & Chris Macklin Sponsors 10th July 2014

	Sunderland Hea	lth &	Care	e Syste	em 20)14/15	5 — 20	018/19	All together 9 Sunderland!
۲	Better Health for Sunderland								
Vision	Transforming Out of Hospital (through Integration and 7 day w							Enabling Self Care and Sustainability	
Outcomes	Reduce years of life lost by 7% by 2019 LTC by 8.9% by 2019	Emer Admis	duce rgency sions by by 2019	Increase the p of older peop independently following disct hospital by 5%	y at home harge from		eof e eby h	Improve patient experience of out of nospital care by 8% by 2019	Make significant progress towards eliminating deaths in hospitals*
	High Quality Sustainable System Characteristics		- Finitiatives						
	Citizens fully included in all aspects of service design and change and fully empowered in their own care Communications & Engagement Strategy (including My NHS) Shared decision making Personal health budgets Intelligence Hub Wellness Service Shared decision making Personal health budgets Intelligence Hub Wellness Service Wider Primary Care, provided at scale GP Alliance Proactive and personalised Primary Care programme Alignment of IT systems across Primary , Community & Secondary Care								
	A modern model of integrated care	Communi Intermed Improvin Implemer Dementia	Community integrated locality teams Community Connectors model Intermediate care hub 24/7 Improving health care in care homes in all localities Implementation of deciding right initiatives in practices Dementia Friendly Communities NEAS Advanced Practice Paramedic (TBC)						
	Access to the highest quality urgent & emergency care	City Hosp	GP Led Urgent Care Centres City Hospitals Sunderland Urgent Care Centre 'Big Front Door' GP Out of Hours service						
	A step change in the productivity of elective care	New End	Surgery & Theatres Efficiencies programme (STEP) New Endoscopy Unit at City Hospitals Sunderland Improved community mental health pathways						
	Specialised services concentrated in centres of excellence		City Hospitals Sunderland's position as a recognised provider of complex care in the North East developed in line with national strategy for specialised services						
	Enabled by Localities / Joint Commissioning / Contract Management (CQUIN) / Medicines Optimisation / Evidence based Approach / Research & Development *Zero Tolerance MRSA. At least 10% increa	Heal	Governed Vide Transforr th & Wellbein CG Governing Integration Bo	nation Board g Board Body bard	Achieve Delivery of	Measured by uality & Safety of Services vement of Outcome ambitions of £150m efficiencies across the system		One system for F Patie Parity 7 da Team based work	<u>Ind Principles</u> Health and Social Care Int Centred y of Esteem y services ing across Sunderland

*Zero Tolerance MRSA. At least 10% increase in the reporting of medication errors. Achievement of Cdifficile nationally set traiectory