NHS
Sunderland
Clinical Commissioning Group

2018-19 Operational Plan

Contents

Welcome to our 2018/19 plan

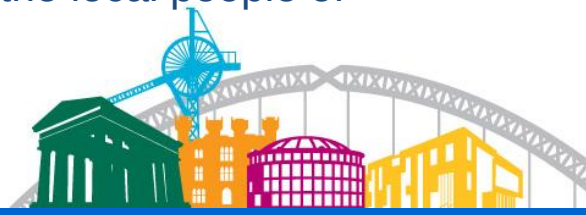
NHS Sunderland Clinical Commissioning Group

This plan needs to be read in the context of Sunderland Clinical Commissioning Group's (SCCG) two year operational plan, published in December 2016, covering the period 2017 – 2019, which are years four and five of our 2014 – 2019 strategic plan.

Our Vision remains to achieve **Better Health for Sunderland** with a continued focus on three key strategic objectives: to **transform in hospital care**; to **transform out of hospital care**; and to **ensure self-care and sustainability**. Our operational plan, summarised on the 'plan on a page' sets out how we will deliver our Vision and strategic objectives.

In planning for 2018/19 we are not 'starting from scratch' but refreshing the existing two year plan that we have. The 2018/19 operational plan reflects the progress we have made to date in 2017/18 and we have a lot to be proud of. We continue to be at the forefront of national developments as a named vanguard for New Models of Care around closer integration of community services and have continued to make great strides in 2017/18 in implementing our vision for a Multi-Specialty Community provider (MCP) as it is our belief that many of the challenges that we face can, in part, be managed by this approach. As a co-commissioner and through the Vanguard we have continued to make good progress in supporting General Practice to transform and be sustainable. Together with South Tyneside CCG and South Tyneside and Sunderland Health Care Group we have continued the work to address the challenges faced by our hospital sector.

This refresh sets out our transformation plans for 2018/19 to meet the needs of our local population and drive improvements in health and wellbeing, quality of care and the efficiency of local NHS services to ensure sustainable services for the local people of Sunderland.



Our Vision

NHS Sunderland Clinical Commissioning Group

*To improve the health, wellbeing and life expectancy of the residents of Sunderland, by providing joined up health and social care, underpinned by effective clinical decision-making, reducing the disparities in health across the city and achieving '**Better Health for Sunderland**'.*

The seven core values, informed through local engagement with member practices, patients and local people, continue to shape and underpin all of the work we undertake to deliver our vision.

We will deliver our Vision through three key strategic objectives:

- Transforming in hospital care
- Transforming out of hospital care
- Enabling self-care and sustainability

Quality and safety are implicit in our vision and values and our recently revised Quality Strategy – **Quality and Safety are Everyone's Business** – and the underpinning quality framework will enable us to ensure that quality is at the heart of everything we do.

Strategic Context

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Our plan also needs to be understood in the context of NHS England's Five Year Forward View (FYFV), the Next Steps on the Five Year Forward View ('Next Steps') published in March 2017 and the requirements of national NHS planning guidance published in December 2015, September 2016 and February 2018.

The FYFV is a national plan that sets out a vision for a better NHS by 2020/21. It highlights three areas where there are gaps between where we are now and where we need to be in 2020/21: the health and wellbeing of the population; the quality of care that is provided; and the finance and efficiency of NHS services.

Consistent with the expectations of the FYFV and planning guidance our operational plan reflects the national service priorities ('must-dos') of primary care, cancer, learning disabilities, mental health, urgent and emergency care and maternity. This plan is a key way of enabling the changes needed to deliver service improvements in these areas and improve quality to lead to better health. Our transformation plans for in and out of hospital will improve the way services are organised and integrated and align with the FYFV and planning requirements to deliver improvements in care and put services on a sustainable footing.

Our Strategic Approach

NHS Sunderland Clinical Commissioning Group

Working in the Northumberland, Tyne and Wear and North Durham Sustainability and Transformation Partnership

In Northumberland, Tyne, Wear and the northern part of County Durham (NTW ND), NHS providers and commissioners including SCCG and local authorities came together in 2016 and developed an new five year umbrella improvement plan known as a **Sustainability and Transformation Partnership** (STP) plan, for health and care in this wider area.

The umbrella plan builds on the existing plans of the organisations within the partnership as well as developing additional proposals for transformation across common priorities recognising that some services are better organised on a bigger population basis. The STP plan sets out proposals to improve the health and wellbeing of the population; the quality of care that is provided; and the finance and efficiency of NHS services

Our 2018/19 operational plan will support and continue to contribute to the delivery of the transformational objectives of this system wide improvement plan including: **scaling up work on ill-health prevention** and **improving well-being**; **improving the quality and experience of care** by **increased collaboration** between organisations providing out of hospital care and making the best use of hospital based services; and closing the gap in local finances.

South Tyneside and Sunderland Local Health Economy (LHE)

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A formal alliance (South Tyneside and Sunderland Healthcare Group) was established in March 2016 between City Hospitals and South Tyneside Foundation trusts, working in partnership with NHS South Tyneside and Sunderland CCGs, to jointly review and plan hospital services as part of the strategic transformation programme known as the **Path to Excellence** programme. The work between the four organisations aims to make the health systems across South Tyneside and Sunderland both clinically and financially sustainable for the long term. At the core of the programme is a series of clinical service reviews to develop options for change to invoke improvements in quality and safeguard sustainable service delivery.

For South Tyneside and Sunderland, the Path to Excellence is our local health economy response to the STP.

In 2018/19 we will continue to work with South Tyneside CCG and the Healthcare Group on the Path to Excellence programme in relation to the outcome of phase one - stroke, obstetrics (maternity) and gynaecology services and paediatric (children's) emergency services – and work to be undertaken for phase 2 across a range of hospital specialties.

During 2017/18 together with NHS South Tyneside CCG, we have continued the work with City Hospitals Sunderland and South Tyneside Foundation Trusts to understand the significant financial challenges faced by our local South Tyneside and Sunderland system. In 2018/19 we will continue to build on and strengthen our collaborative approach to system working to develop a single LHE plan with the aim of bringing the system back into financial balance though redesign wherever possible, recognising that difficult decisions about services, in the future, may also need to be taken.

Strategic Commissioning

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In April 2017, our Governing Body set the strategic direction for SCCG to become a more strategic commissioner with seven priority areas to support the delivery of this aim:

- Ensuring sustainability of the system
- Establishing an integrated out of hospital system
- Delivering in hospital integration
- Developing our role as a competent, capable and credible strategic commissioner
- Growing our strategic profile as a system leader
- Streamlining the way we manage our business
- Developing system leadership and organisational capability

We were assessed by NHS England in 2016/17 as an outstanding CCG in 2016/17. Having undergone a full Investors in People (IiP) re-assessment in December 2017, we achieved our aim of Platinum Status only achieved by 0.5% of organisations. This achievement demonstrates our commitment to investing in our staff and demonstrates we have a clear understanding of what we want to achieve as an organisation and across the system working with partners.

Quality and Safety

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Our Quality Strategy on a page: 2018 - 2021

We want to SEE quality: Safe, Effective Experience

Quality and safety are everyone's business and must be at the heart of our commissioning processes and intentions

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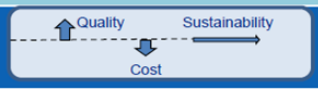
NHS Outcomes Framework		How will we do this in Sunderland CCG? Done via our Quality Review Groups, Safeguarding arrangements and reported into our Quality and Safety Committee and Governing Body
Domain 1 Preventing people from dying prematurely	CLINICAL EFFECTIVENESS	Examples: • Mortality and morbidity rates • Findings from Clinical Audits • Implementation of NICE Guidance • Monitoring of improvement activity • Clinical Quality Visits
Domain 2 Enhancing quality of life for people with long-term conditions		
Domain 3 Helping people to recover from all episodes of ill health or following injury		
Domain 4 Ensuring people have a positive experience of care	= PATIENT EXPERIENCE	Examples: Patient stories; Friends & Family Test; Public engagement; Complaints; Safe staffing levels and skill mix
Domain 5 Treating and caring for people in a safe environment and protecting them from avoidable harm	= PATIENT SAFETY	Examples: • Learning from serious incidents • Monitor rates of incident reporting • Quality impact assessments • Statutory safeguarding arrangements & safeguarding leadership • Less patient harm recorded • Ensure incidents of Health Care Associated Infections are reduced • Supporting quality in commissioned services

As a result of system wide learning we will also check whether the services we commission are:

CARING	How.....quality assurance visits; quality review groups; patient feedback
RESPONSIVE & PERSON CENTRED	By listening to patient stories; how providers respond to patient's needs, & provide choice
WELL LED	Do they demonstrate open, transparent, collaborative learning environments, with clear direction?
SUSTAINABLE & EQUITABLE	Do they show: improvements to reduce health inequalities, are they accessible to all, demonstrate financial control, and Build capability? 

Quality and Safety

NHS Sunderland Clinical Commissioning Group

Overall goals 2017-2019

Quality is everybody's business

Progress in 2017/18

- Reviewed and refreshed the Sunderland CCG Quality Strategy, that was approved by the Governing Body in January 2018.
- Developed and implemented a Quality Impact Assessment Policy for the assessment of all transformational schemes, particularly those relating to QIPP to ensure they do not impact on the quality and safety of commissioned services.
- Worked closely with other commissioners, such as NHS England, Sunderland City Council and other CCGs, to ensure a joint approach to quality assurance across Sunderland.
- Provide support, oversight of audits and learning processes and challenge to the various groups that monitor quality and safety, for example, provider quality review groups, the CCG's QSC and NHS England's (NHS E) quality surveillance group (QSG).
- Provided assurance to the governing body that the quality and safety of services is being robustly monitored and action has been taken when required to make improvements.

Deliverables in 2018/19

- Continue to review transformational schemes using the quality impact assessment policy.
- Continue to provide support, oversight of audits and learning processes and challenge to the various groups that monitor quality and safety, for example, provider quality review groups, the CCG's QSC and NHS England's (NHS E) quality surveillance group (QSG).
- Continue to provide assurance to the governing body that the quality and safety of services is being robustly monitored and action is taken when required to make improvements.
- Continue to ensure considerations relating to safeguarding children and adults are integral to commissioning services and robust processes are in place to deliver safeguarding duties.
- Continue to support the CCG's contracting and performance team to provide assurance that commissioned services are delivered to the required standards of performance under the terms of the NHS Constitution, the NHS standard contract and any other national / local performance metrics as may be stated within individual contracts and via regulators. the-NHS-constitution-for-EnglandNHS-standard-contract

Quality and Safety

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Progress in 2017/18

- We have ensured that considerations relating to safeguarding children and adults are integral to commissioned services and that robust processes have been in place to deliver safeguarding duties.
- Supported the Safeguarding Children Improvement Board and the LSCB as well as ensuring the CCG maintained compliance with it's own statutory responsibilities.
- Supported the CCG's contracting and performance team to provide assurance that commissioned services have been delivered to the required standards of performance under the terms of the NHS Constitution, the NHS standard contract and any other national / local performance metrics as may be stated within individual contracts and via regulators.
- Provided assurance in relation to patient equality and inclusion.
- Provided oversight and learning from patient experience reports, litigation, complaints and serious incidents.
- Ensured quality and safety representation on procurement panels.
- Ensured the governing body was sighted on how commissioned services and member practices were delivering safe and effective services via a number of early warning systems.
- We have supported providers to develop a culture where learning from patient safety incidents and from patient experience is embedded in everyday practice.

Deliverables for 2018/19

- Continue to provide assurance in relation to patient equality and inclusion.
- Continue to provide oversight and learning from patient experience reports, litigation, complaints and serious incidents.
- Continue to ensure quality and safety representation on procurement panels.
- Continue to ensure the governing body is sighted on how commissioned services and member practices are delivering safe and effective services via a number of early warning systems.
- Continue to support providers to develop a culture where learning from patient safety incidents and from patient experience is embedded in everyday practice.
- Continue to provide leadership to safeguarding arrangements in line with revised statutory guidance alongside the Local Authority and the Police.
- Continue to provide leadership to the statutory Child Death Review Process in line with revised statutory guidance alongside the Local Authority.
- To ensure safeguarding is 'core business' in strategic plans.

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Strategic Objectives

Transforming Out of Hospital Care

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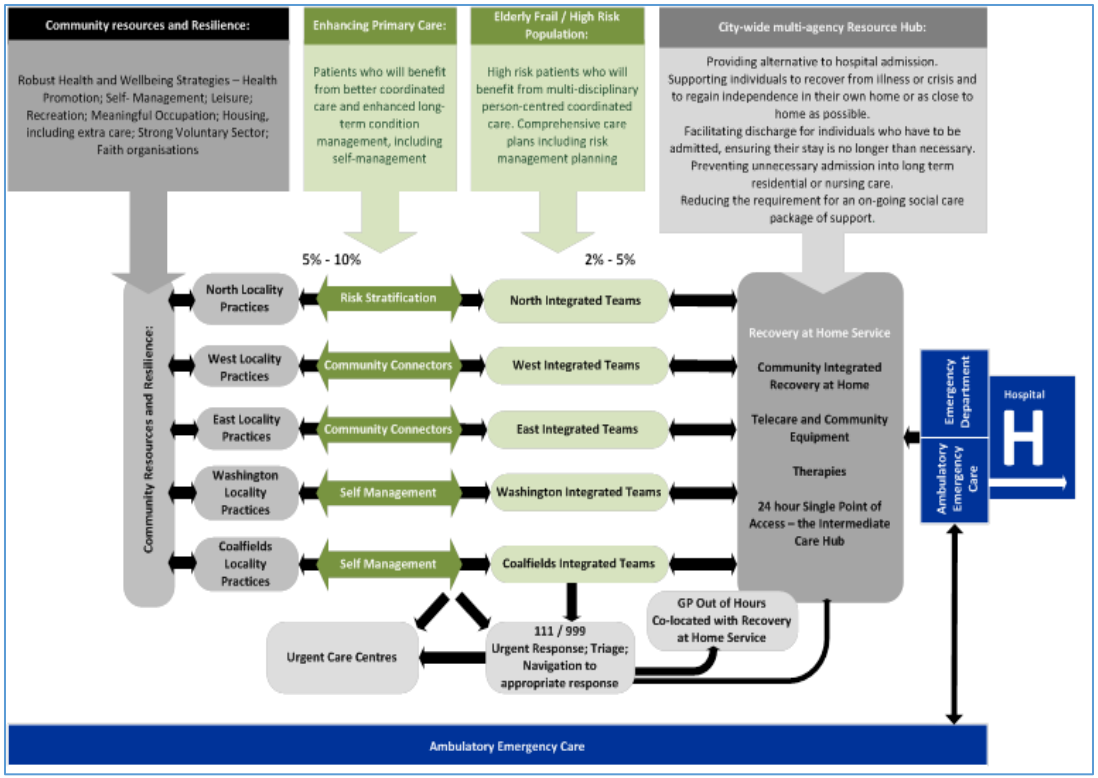
Closer integration between services in the community is a fundamental part of both national policy and of local strategy with the aim of promoting health and wellbeing, delivering quality care for patients/service users, and ensuring sustainability of the local system.

Our journey to transform the out of hospital care model started in May 2013, when we agreed a vision with Sunderland City Council, supported by the main local providers, for the future of community services with the aim of moving from fragmented services to integrated services providing more effective person centred care. This led to Sunderland's selection to join the NHS England vanguard programme with the intention to develop a new care model – the multi-speciality community provider (MCP) model.

The **All Together Better** (ATB) Sunderland Vanguard Programme has been in place since 2015, and through the unified vision and combined efforts of health and care commissioners and providers, has made significant progress with the development and implementation of an integrated out of hospital care model illustrated in the diagram.



Transforming Out of Hospital Care (ctd)

NHS Sunderland Clinical Commissioning Group

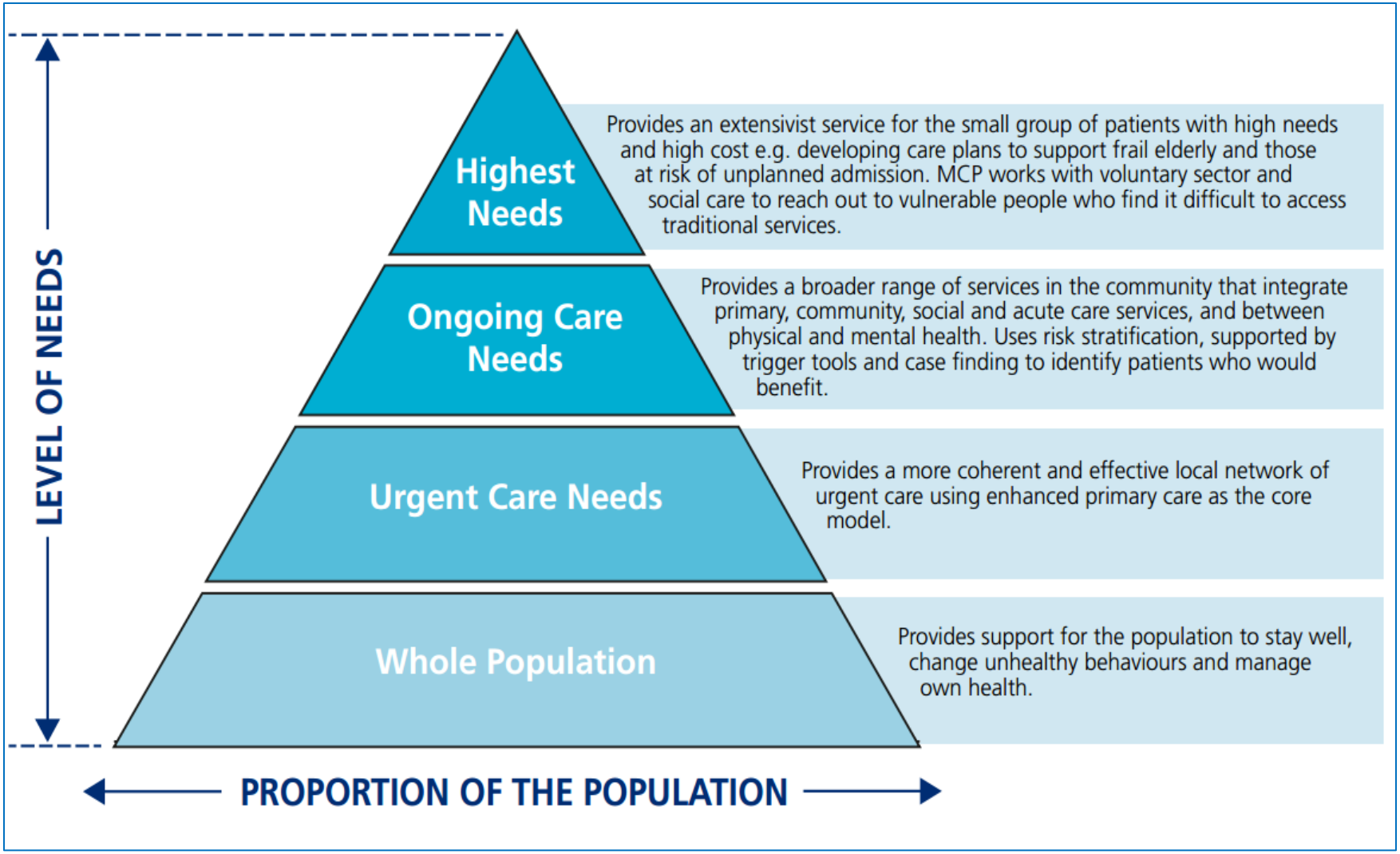
The ATB programme has delivered significant improvements to the care and support of individuals in the community resulting in tangible benefits for patients identified through the risk stratification. It therefore provides a solid foundation to support further transformation of the services intended to be in the MCP.

As the ATB programme is planned to come to an end in March 2018, we wish to secure and enhance the Out of Hospital Care Model for the longer term by commissioning a MCP to bring together the delivery of primary care and community based health and care services.

The MCP care model is place based, serves the whole population and operates at four levels, with the offer to deploy the integrated budget flexibly so the provider can reshape care delivery around what works best for different groups of patients.

Transforming Out of Hospital Care (ctd)

NHS Sunderland Clinical Commissioning Group



Transforming Out of Hospital Care (ctd)

NHS Sunderland Clinical Commissioning Group

Our vision for the MCP is to provide:

***A focus on person centred, proactive and co-ordinated care which will support appropriate use of health and care services, will improve patient and carer experience and outcomes, ensuring people will live longer with better quality of life*.**

This vision is under pinned with the high level outcomes:

- To improve care quality, including safety, clinical effectiveness and patient experience.
- To improve health and wellbeing.
- To improve sustainability creating a sustainable health and care system.

During 2017/18 we have undertaken a range of activities to deliver the aim of commissioning a MCP including: an Outline Business Case; drafting of a prospectus describing our vision to commission the MCP care model; market and public engagement exercise with general practices, potential providers, stakeholders and the local community regarding the commissioning of a MCP. In February our Governing Body approved the commissioning strategy to secure a MCP via an Alliance Agreement. Work in 2018/19 will progress the development of the Alliance including an Alliance Agreement and new governance arrangements so that MCP Alliance is ready to take responsibility for the overall MCP Care Model as set out in the Prospectus from April 2019.

Enhancements/variations to the care model implemented by the ATB programme during 2017/18 (e.g. enhanced care in care homes) will progress in 2018/19 along with plans to deliver efficiencies related to the overall scope of services within the MCP Alliance care model.

Transforming in Hospital Care

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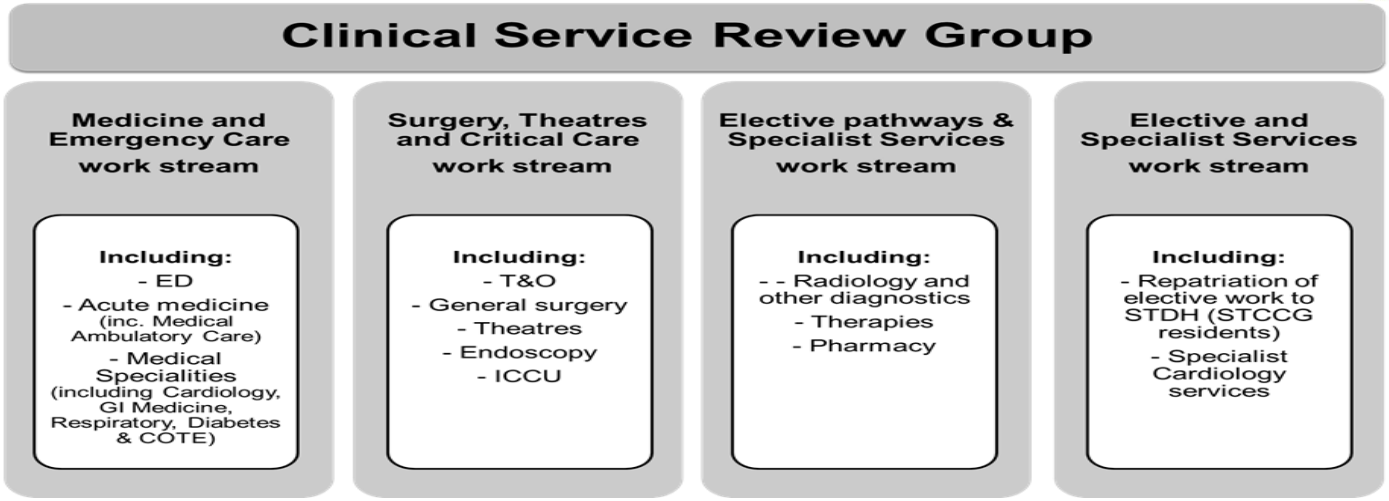
Path to Excellence (PtE) is a transformational programme established to identify new and innovative ways of delivering safe, high quality, and sustainable hospital services in order to secure the future of local hospital services across Sunderland and South Tyneside now and in the future.

The importance and value of having local hospitals providing a range of services continues to be recognised however medical workforce pressures, exacerbated by service duplication across the South Tyneside District Hospital and Sunderland Royal Hospital present challenges to the delivery of safe, high quality services.

Clinical service reviews are the foundation of the transformation and reform process in the PtE programme, with clinical service directors leading multi-professional teams. Teams draw upon a range of data to review current and benchmark performance to assess national clinical guidance and research evidence as well as considering patient insight and feedback and learning from other organisations. Clinical and non-clinical challenge is applied through the Clinical Services Review Group, as well as Foundation Trust and CCG leadership bodies. As South Tyneside and Sunderland CCGs are responsible for planning and buying healthcare services on behalf of patients we have led the consultation process for phase 1 of PtE including patient, carer and service user feedback across the areas of care to inform the options development process. A joint health overview and scrutiny committee has been established by Sunderland City Council and South Tyneside Council. Elected members will review and scrutinise the processes for engagement and consultation, as well as form a view on any future options or scenarios for change.

Transforming in Hospital Care

NHS Sunderland Clinical Commissioning Group



Starting in 2016 and continuing through out 2017/18 the focus in phase 1 was stroke, obstetrics (maternity) and gynaecology and paediatrics (children's) emergency and urgent services because they faced an unprecedented sustainability challenge driven predominantly by a limited medical workforce resulting in service continuity, quality and financial pressures.

The consultation process on phase 1 lasted 14 weeks from 05 July to 15 October using a range of methodologies and concluded in February 2018 with a meeting in common where South Tyneside and Sunderland CCGs came to decisions on the three services based on the review of the clinical evidence and feedback from the consultation process.

PtE is a five year transformation programme and will continue in 2018/19 undertaking clinical service reviews across a range of specialties.

Ensuring Self-Care and Sustainability

NHS Sunderland Clinical Commissioning Group

Prevention is built into our transformation plans, wherever possible. Examples include:

Cancer – smoking cessation and NHS Health checks specifications have been refreshed and offered to General Practice by Sunderland City Council. Cancer Research UK has visited practices to review their practice profiles and develop action plans to improve screening rates. We continue to support the 'Be clear on cancer' campaigns, linking with Sunderland City Council and general practices, to ensure the message is spread across Sunderland.

Cardiovascular disease – CVD is highly preventable through proven treatments for high risk conditions, e.g. hypertension, atrial fibrillation. Working with and supporting GP practices we are adopting a mixed strategy to improve detection of disease and ensure optimal care and drug treatment.

Within CVD diabetes is a key priority area in 2017/18 and 2018/19. In 2017/18 we have collaborated with other NHS CCGs to secure a STP wide Diabetes Prevention Programme targeting groups of patients with non-diabetic hypoglycaemia to prevent or slow down their progress to type 2 diabetes. We are also working with practices to ensure patients diagnosed with diabetes receive optimal care and drug treatment across the 3 NICE recommended treatment targets.

Ensuring Self-Care and Sustainability

NHS Sunderland Clinical Commissioning Group

Out of hospital care model – we have supported a local communication programme building on the regional and national winter communications about self-care, 'Stay well this winter'. A common childhood illness app is now available for parents to download.

Self care and patient activation was an area for development in 2017/18 in the All Together Better programme. A self-care strategy was developed, underpinned by a delivery plan, incorporating the use of technology, e.g. My COPD, Florence text messaging service and Patient Activation Measures (PAM) supported by a training programme for staff across partner organisations.

A website has been developed and built to become the main tool/directory in assisting the workforce and public in identifying community resources for supporting self-care and personalised care planning. An app is under development linked to the website to support people to find local services in the community that can support them to self-care and self-manage their own conditions.

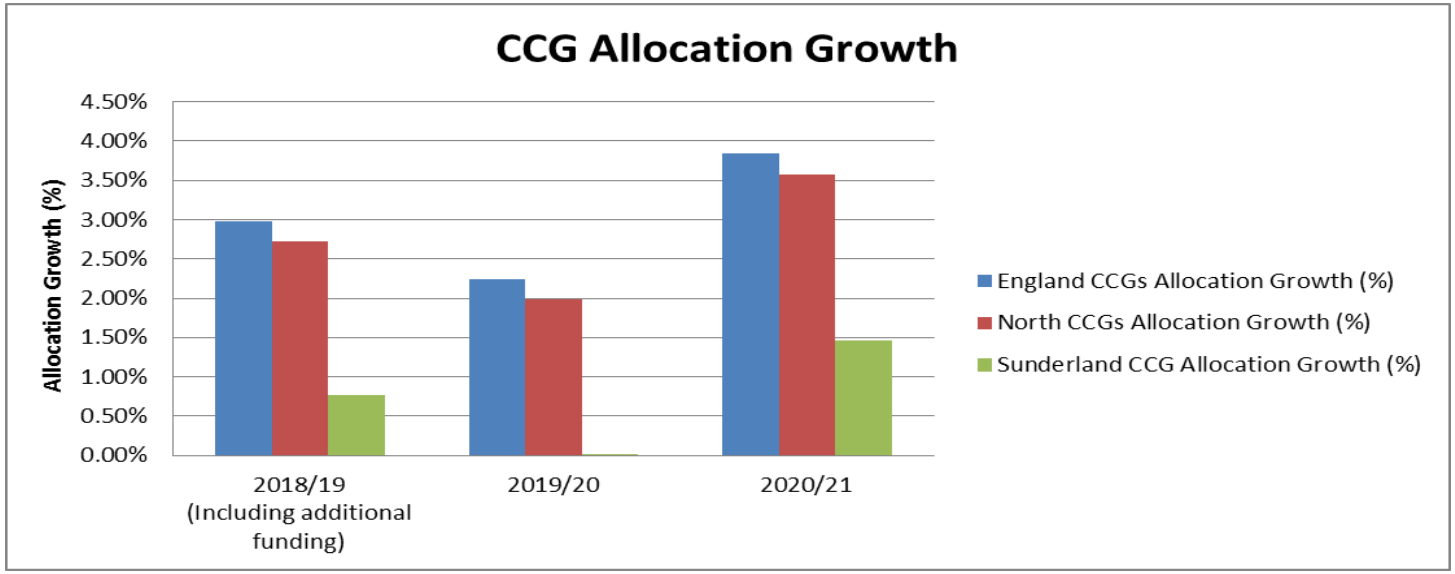
Prevention programme – Sunderland's Transformation Board agreed in 2016 for alcohol and tobacco to be the priorities for implementation of the 'Making every Contact Count' (MECC) behavioural change approach across the system. This work will continue with oversight of the Board.

Ensuring Self-Care and Sustainability

NHS Sunderland Clinical Commissioning Group

Funding and efficiency challenge 2018/19 – 2020/21

Sunderland CCG is deemed to be the most overfunded CCG in England outside of London. The opening distance from target allocation for SCCG in 2018/19 is 15.19%. As a result we will continue to receive minimal growth funding in the period 2018/19 to 2020/21, as outlined below.



Ensuring Self-Care and Sustainability

NHS Sunderland Clinical Commissioning Group

2017/18 and 2018/19 will be the most financially challenging period in the CCG's history and productivity requirements – QIPP - will need to be achieved to remain within our available allocations. However, we have a strong track record of delivery against financial plans and statutory financial duties and we are on target to deliver all statutory duties and business rules for 2017/18.

Overall we are on track to deliver the 2017/18 QIPP of £14.3m following the low levels of allocation growth.

Target	Outcome	Target Met
Delivery of 1% cumulative surplus on total revenue allocation	Forecast cumulative surplus of £18,181k (3.4%) against a total revenue resource allocation of £528,814k.	✓
Maintain running costs within the running cost allocation	Forecast surplus of £236k on running cost budgets.	✓
Maintain capital spending within capital allocation	No capital resource provided to the CCG and no capital spend in year.	N/A
Ensure cash spending is within the cash limit set	Cash forecast to be managed within available resources.	✓

The additional financial allocation for 2018/19 announced in the Autumn Budget in 2017 will enable us to meet the planning requirements, such as the Mental Health Investment Standard and fund activity driven pressures in relation to achieving the Constitutional Standard for referral to treatment (RTT) and fund growth in emergency activity to support improvement in the A&E 4 hour standard. It will also support the wider system recovery plan currently under development across the Sunderland and South Tyneside Local Health Economy.

Ensuring Self-Care and Sustainability

NHS Sunderland Clinical Commissioning Group

Due to significantly lower levels of growth than other CCGs we still face significant financial challenges despite the additional funding announced by the government. QIPP plans of £11.3m will be required in 2018/19 (2.3%) utilising £4.9m of drawdown funding to support LHE transitional sustainability in 2018/19, mitigate QIPP delivery risks and to fund Career Start Practice Nurse scheme in 2018/19.

2018/19 Financial Risks

- Demand growth above expected funding requirements (e.g. Acute, Prescribing, Packages) - £4.1m in 2018/19.
- Non delivery of productivity plans - £1.3m in 2018/19
- Other risks arising within system - £2m in 2018/19

We currently expect to be able to mitigate financial risks in 2018/19. Any potential reductions in the drawdown for 2018/19 due to wider CNE pressures will significantly impact on our ability to mitigate pressures and deliver the financial plan for 2018/19.

Ensuring Self-Care and Sustainability

NHS Sunderland Clinical Commissioning Group

NHS RightCare programme

NHS RightCare is a national NHS England supported programme committed to delivering the best care to patients, making the NHS's money go as far as possible and improving patient outcomes.

NHS RightCare have published comprehensive data packs at CCG and STP which highlight inconsistencies around the type of care patients receive - variation in the number of people seeing a GP, being referred to hospital, receiving operations not explained by clinical need, outcomes – and the opportunities to ensure the best possible care is delivered as efficiently as possible.

In 2017/18 we reviewed the RightCare data packs and identified three areas (MSK, cardiovascular disease and endocrine) where opportunities to improve quality and outcomes for patients and deliver efficiencies (QIPP). We have developed plans in year and are moving forward with these. We are committed to expanding the programme in 2018/19. Our current thinking is to implement the RightCare approach in respiratory and gastroenterology and genitourinary services .

Ensuring Self-Care and Sustainability

Sunderland and South Tyneside System Collaboration

NHS Sunderland Clinical Commissioning Group

The Sunderland and South Tyneside local health economy faces significant financial efficiency requirements in the period 2018/19 to 2020/21 in order to deliver sustainable services as outlined below.

Do Nothing position	2018/19	2019/20	2020/21	Total
	£m	£m	£m	£m
STCCG	7.00	3.00	6.00	16.00
Sun CCG	12.00	12.00	5.00	29.00
STFT	22.71	6.41	6.41	35.53
CHS	23.47	12.07	10.37	45.91
Contract difference (LHE)	5.50			5.50
Contract difference (Durham CCGs)	0.50			0.50
Contract difference (NHSE)	1.00			1.00
Total Scale of challenge	**72.18**	**33.48**	**27.78**	**133.44**

As a system, consisting of South Tyneside CCG, Sunderland CCG, City Hospitals Sunderland and South Tyneside Foundation Trusts, we have committed to work across organisational boundaries to tackle the financial challenge. We have previously submitted an expression of interest for a shared control total. Formal agreements are yet to be agreed however all parties are aligned to this principle as a direction of travel to ensure stability for all organisations during a period of significant transition and service change in the locality. The agreement of contract values across all four organisations builds on the work done within 2017/18 and is an indicator of closer working relationships and the appetite for change going forward. In addition it is the intention to develop a shared control total agreement between the four organisations in line with final planning deadlines for 2018/19 at end April 2018; this agreement will then support the basis for a system financial recovery plan in early 2018/19.

Ensuring Self-Care and Sustainability

NHS Sunderland Clinical Commissioning Group

Sustainable services

The Path to Excellence and MCP care model in 2018/19 – the All Together Better Sunderland programme from 2016 onwards - programmes aim longer term to deliver clinically and financially sustainable services.

The South Tyneside and Sunderland Healthcare Group are working together to respond to the workforce challenges (recruitment/staff shortages) they face to ensure quality of care is provided through the best use of their most important resource, their staff. Joint workforce planning will enable a consistent approach to recruitment and retention and skill mix to reduce the need to use expensive agency staff.

A GP Workforce group has been in place now for three years and will continue to support the recruitment and retention of staff via a range of initiatives and in line with the CCG's commissioning strategy for general practice and the GP Forward View with its focus on workforce.

The successful implementation of the MCP care model will be dependent on workforce. We will build on the workforce, strategy, including organisational development and educational plans, developed in 2017/18.

Plan on a Page

NHS Sunderland Clinical Commissioning Group

Plan on a page 2017/18 - 2018/19 (Years 2 & 3)

Our Vision	**Better Health for Sunderland**						
Delivered by:	Transforming care out of hospital (through integration and 7 day working)			Transforming in hospital care, specifically urgent and emergency care (7 day working)		Enabling self care and sustainability	
Measured by: national targets	CANCER Continue to perform well	DEMENTIA Improve to performing well		DIABETES Improve to performing well	LEARNING DISABILITIES Improve to performing well	MATERNITY Improve to performing well	MENTAL HEALTH Continue to perform well
local targets	Reduce emergency admissions by 12% by 2019	Maintain the number of smoking quitters at 2015/16 levels		Reduce years of life lost by 15% by 2019	Improve health related quality of life for people with LTCs by 8.9% by 2019	Deliver a productivity plan of £22.6m	Deliver prescribing savings of £7.3m
Underpinned by our values	Patient centred	Inclusive	Responsive	Innovative	Empowering	Integrity	Open and Honest

Transformational Changes 2017/18 - 2018/19

Sustainability Maximise the use of resources to improve outcomes for the people of Sunderland	**In Hospital**	Ensure a safe and sustainable model for acute services by delivering a single clinical operating model across the local health economy.
	Community Care System	Jointly commission a fully integrated unplanned and planned community care system that interfaces effectively with specialist serv
	General practice	Sustain and transform general practice in line with the General Practice Forward View
	Mental health	Deliver the Mental Health Forward View in full, including Child and Adolescent Mental Health Services Transformation Plan
	Learning disabilities	Continue Transforming Lives programme including the Primary Care Learning Disabilities/Autism strategy
	Childrens & maternity	Ensure safe and sustainable services for improved outcomes in maternity and ensure the best start in life
	Cancer	Improve cancer outcomes, reducing smoking, increase screening uptake, early diagnosis and improve patient cancer pathway experience including survivorship and end of life care
	Cardiovascular disease	Optimise the length and quality of life for patients with, and at risk of CVD, through robust primary and secondary prevention, streamlined pathways and integrated services that meet national standards
	Prevention	Implement a whole system approach to increase healthy life expectancy and reduce smoking and alcohol related admissions through prevention with an initial focus on self-care, making every contact count and smoke-free NHS premises

Enabled by	Joint commissioning & Better Care Fund	IT infrastructure	Contract management (CQUIN)	Organisational development	Medicines optimisation
	Primary care co-commissioning	Telehealth	CCG Localities	Research and development	Reform methodology
Governed by	CCG Governing Body		Transformation and A&E Delivery Board		Health & Wellbeing Board
Underpinned by system wide principles	One system for health and social care		7 day services	Mental health and physical health of equal importance	Effective, safe care and positive patient experience
	Evidence based approach		Prevention focused		
To deliver	NHS England The Five Year Forward View				
Its triple aims	Better Health		Care and quality		Sustainable funding
Implementing	Northumberland, Tyne and Wear and North Durham Sustainability and Transformation Plan (NTW ND STP) at a local level				
Transformation priorities	Scaling up prevention, health and welbeing		Out of hospital collaboration		Optimal use of the acute sector

Version 0.5 12.04.2018

2017/18 A Year In Review

NHS
Sunderland
Clinical Commissioning Group

- Forecast full delivery of 2017/18 QIPP requirements
- Forecast full achievement of financial statutory duties for 2017/18
- The development of CAMH/School links including the establishment of a mental health lead role
- Development and launch of a charter mark to promote mental health and emotional well-being in schools based on the work of the Sunderland Youth Parliament
- Development and launch of an app to support the mental health of young people
- Review of neurodevelopmental pathways including Attention Deficit Hyperactivity Disorder and Autism Spectrum Disorder
- The expansion of the psychiatric liaison service to support the mental health needs of children and young people.
- Urgent Care strategy workshops held with stakeholders, including two co-designed events let jointly by SCGG and the Multi-speciality Community Provider Executive Team. These events resulted in an agreed proposed potential UC clinical model for the future. The events also provided the opportunity for all stakeholders to 'stress test' the proposed potential model
- Completion of the Urgent Care Outline Business Case, signed off by the SCCG Governing Body
- 5 GPs and 6 Practice Nurses recruited to the Career Start scheme
- Implementation of the Sunderland General Practice Quality Premium to reduce bureaucratic burden for General Practice whilst ensuring quality improvement in key areas.
- New Quality Strategy and implementation plan
- Relaunch of Quality Impact Assessment (QIA) for all commissioning decisions
- Support to Together for Children/Ofsted Improvement via the Improvement Board and SSCB
- Alignment of the Designated and Named Assurance Group and Quality Review Groups across Sunderland and South Tyneside CCGs
- Completion of a Strategic Outline Business Case for the MCP
- Completion of a large scale engagement exercise with general practice, the public (including stakeholders) and the market about commissioning an MCP.
- Produced Patient Group Directions for sexual health and contributed to those for Urgent Care Centres

2017/18 A Year In Review ctd

NHS Sunderland Clinical Commissioning Group

- Commissioned pharmacist–led medicines optimisation support for GP Practices and care homes
- Implemented regional workstreams for gluten free and over the counter medicines
- Reviewed SCCG antimicrobial strategy to focus on the reduction of overall antimicrobial prescribing
- Digital signage installed in all GP practices
- Wi-fi fully deployed across all GP Practices
- Award winning 'Care Home Tablet' has been deployed to 43 care homes, to enable health care staff to monitor individual patient's condition
- Rolled-out a messaging service to all GP practices (MJOG) for appointment confirmation, reminders and health promotion messages
- Refreshed patient check in systems
- Developed a standardised process for inpatient Community Treatment Reviews(CTR)/Care Programme Approach (CPA)
- In line with transforming care and the Winterbourne Review, the de-commissioning of the Craigavon was completed by 31st March 2016, the new Grindon Mews respite provision was successfully commissioned
- Developed and implemented a Learning Disability and Autism Primary Programme
- Developed a Sunderland End of Life Strategy with partners and stakeholders
- Commissioned training for staff involved in end of life services, including General Practice and Care Homes
- Developed a set of metrics to measure improvement in the end of life pathway that link in with national guidance ' Ambitions for Palliative and End of Life Care'
- Implemented direct access pathways to MRI and CT for people with vague symptoms
- Aligned the majority of practices to Care Homes to enable better relationships
- Supported mergers of practices and provided resilience support to reduce the likelihood of practices handing back contracts

NHS
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Delivery Plans

Community Care System (Out of Hospital)

NHS Sunderland Clinical Commissioning Group

The aim of this transformation programme is to jointly commission a fully integrated unplanned and planned community care system, known as a MCP model of care, that interfaces effectively with specialist services. This programme covers:

- **Altogether Better Programme** is the 2015-2018 transformation programme for Out of Hospital (OoH) care in Sunderland. Significant investment through the national Vanguard programme has supported the delivery of the care model and enabled us to accelerate delivery and testing of the MCP approach.
  The programme comprised three large scale transformation projects: 24/7 rapid response **Recovery at Home** service; establishing **Community Integrated Teams** based in 5 localities bringing together primary care and social care with third sector to provide a proactive approach to care for a risk stratified population; and establishing **Enhanced Primary Care** (EPC) providing at scale services to reduce pressure in hospital and in general practice, delivering services in the community with a focus on people with long term conditions.
  In 2017/18 the scope broadened to include **self-care and prevention**; **falls** strategy development; **Emergency Department Interface** and **learning** and **sharing within the NTW ND STP**.
- **MCP Commissioning** Early in 2017 each of the boards of local commissioners (Sunderland CCG and Sunderland City Council) and providers agreed a Joint Statement of Intent to work together to explore the viability of a single entity providing all out of hospital services over a longer term contract period. A Joint Strategic Leadership Group was established to oversee the development of a MCP to lead, develop and deliver an effective integrated community health and care model in Sunderland. To realise the **shared vision** of '… person centred proactive and co-ordinated care which will support appropriate use of health and social care services, will improve patient and carer experience and outcomes, ensuring people will live longer with better quality of life', we have undertaken a range of activities to secure a Multi-specialty Community provider to lead and develop and deliver effective, integrated out of hospital and community care model in Sunderland

Community Care System ctd

NHS Sunderland Clinical Commissioning Group

- **MCP Commissioning ctd:** This has led to the agreement to secure the MCP via a collaboration business model with existing providers forming an Alliance with Commissioners to act as if they were one organisation, whilst retaining their separate statutory responsibilities, sharing resources in order to deliver the MCP model of care. The parties to the collaboration will be bound together by an Alliance agreement which sits above any individual contracts. The aim is to have the agreement and new governance arrangements in place by June 2018 with the MCP Alliance fully operational from April 2019.
- **Urgent Care** We are currently working on the transformation of urgent care services in Sunderland in line with our Urgent Care (UC) strategy, underpinned by five design principles to guide the redesign of Urgent Care services and ensure that UC provision is fit for the future in Sunderland.

  From engagement activities members of the public and patients have told us the current system of Urgent Care is too complicated and they don't know where to go to get the healthcare they need. People have also said they want to be able to see a GP when they have an urgent care need, and if they have a long term conditions they want continuity of care because their needs are more complex.

  Our ambition is to simplify the system making it easier to navigate, reduce duplication and enable people to care for themselves, and their families, where this is appropriate. Our UC provision also needs to meet the requirements set out by NHS England and build upon the out of hospital reform already undertaken in Sunderland.

  We have worked with partners to co-design a proposed potential urgent care clinical model. During spring and early summer 2018 we will take this proposed potential model and clinical scenarios to formal public consultation. The feedback from this consultation will be used to inform the final urgent care clinical model. This clinical model is completely in line with the MCP Model of Care and with the MCP Design Principles.
- **End of Life** Our vision for End of Life Care is **'To provide high quality and equitable palliative and end of life care services to patients regardless of diagnosis'**. We have developed a five year strategy (2017 - 2022) in consultation with stakeholders to deliver the national Ambitions of the Palliative and End of Life Care and the national End of Life, 'Six Steps,' strategy.

Community Care System ctd

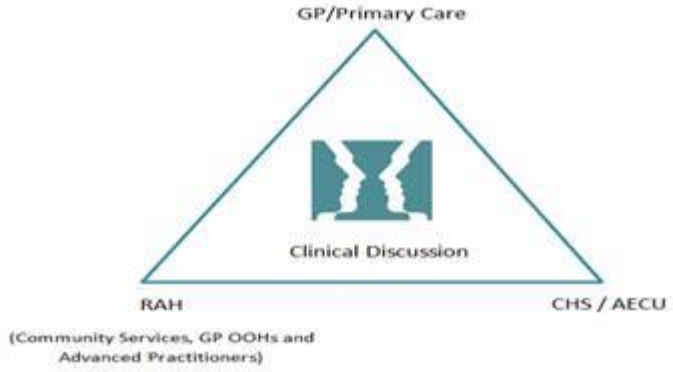
NHS Sunderland Clinical Commissioning Group

- **Ambulatory emergency care (AEC)**

  AEC is a key priority for Sunderland as it is acknowledged that this way of working (managing a significant proportion of emergency patients on the same day without admission to a hospital bed) will support the sustainability and delivery of the urgent and emergency care system.

  Sunderland's shared purpose for AEC is as follows:

  "Clinical discussion between key partners to ensure the right patients benefit from AEC, in the right place, time and by the right professional thus providing a simple and seamless pathway to patients across different sectors - AEC is not a location but a philosophy of care".



AEC has delivered successful outcomes to date. an AEC strategy is currently being developed in 2018 and will need to align with the high level MCP model of care and design principles.

MCP Care Model

NHS
Sunderland
Clinical Commissioning Group

Overall Goals for 2017-2019

The MCP care model brought a wide range of specialist care providers together to explore how best to work collaboratively as one team and improve services for local people in line with the NHS Five Year Forward View

Progress in 2017/18

- A reduction of non-elective admissions for our risk stratified population
- A significant reduction (28%) in delayed transfers of care
- Reduction of GP referrals into secondary care
- High levels of staff satisfaction with the new ways of working across community services
- Self-care and prevention – rolled out of the Patient Activation Measure tool into General Practice, community and the voluntary sector, training of the workforce to undertake self-care discussions and how to tailor their approach
- Development of the Falls Strategy by a new multi agency group, including housing and the fire and rescue service, to develop a new model of operation
- ED Interface – providing streaming and triage at the front door of CHS to ensure patients were seen by the right professional at the right time in the right place
- Restructure of the dedicated PMO resource to take Sunderland journey to the national stage. Building key relationships within the STP footprint
- Deep dives undertaken on Multi-disciplinary Teams (MDT) broadening the risk stratified group to care home patients and frequent attenders to continuously improve the model

Deliverables for 2018/19

- Care model development including delivery of Falls Strategy, the delivery of the model of care in care homes, ensuring delivery in line with best practice, Community Integrated Teams (CIT) development and Urgent Care reform

MCP Commissioning

NHS
Sunderland
Clinical Commissioning Group

Overall Goals for 2017/19

Jointly commission a fully integrated unplanned and planned community care system that interfaces effectively with specialist services

Progress in 2017/18

Scoping and Feasibility – achieved / complete

- A large scale programme of engagement with General Practice – including TITO May 2017 and each locality. Outputs informed the development of the design principles in the prospectus for the MCP
- The approach to Market Engagement and a communications and engagement strategy for the public
- The final draft scope
- The Outline Business Case has been agreed at Governing Body September 2017.

Shadow running commencement

- The Sunderland Out of hospital efficiency and reform group has been established and Joint Plan drafted

Secure MCP

- Draft prospectus completed, includes; design principles, scope, financial framework, outcomes, contract model, areas of development and public engagement,
- Large scale Public Engagement and Market Engagement complete (Nov and Dec 2017)
- Contracting approach agreed
- Plan for ongoing engagement with General Practice in place
- Integrated Support and Assurance Process (ISAP) early engagement completed.
- We have participated in National Procuring Sites Group, providing information to other areas as required.
- Business model to secure the MCP via collaboration/alliance agreement agreed by Governing Body, taking account of the outcomes from the market, public and practice engagement along with legal and national business models team advice
- Final MCP Prospectus agreed

Deliverables for 2018/19

- We aim to have agreement from the MCP Alliance and governance arrangements in place by the end of June 2018
- We aim to have the integration and transformation programme for 2018-20 and 20-21 agreed by the end of September 2018
- We will continue to participate in the New Business Models programme
- We aim to have the MCP Alliance fully operational and delivering the MCP as set out in the Prospectus by April 2019

Urgent Care

NHS
Sunderland
Clinical Commissioning Group

Overall Goals 2017-19

Ensure patients in Sunderland are able to have both their urgent and planned health and care needs met in a safe, effective and efficient way in the community

Progress in 2017/18

- Events involving SCCG and the Multi-specialty Community Prover Executive Team resulted in an agreed proposed Urgent Care model clinical model
- The Urgent Care Outline Business Case has been written and signed off by the Governing Body
- Patients ringing 111 can be booked an appointment slot in either Houghton, Washington and Bunny Hill Urgent Care Centres.
- We have worked with partners across the city and in neighbouring areas to reduce the numbers of Delayed Transfers of Care (DToC). Where appropriate patients are discharged home rather than to a community bed
- Sunderland Care Model Assurance Group has been established with assure the transformation of the Out of Hospital system including Emergency Department Interface, Ambulatory Emergency Care and General Practice at scale
- We have an agreed action plan in place for the Sunderland Local A&E Delivery Board
- We have commissioned an Extended Access Service in General practice from the Sunderland GP Alliance (SEAS). Appointments are booked via 111 or the patient's own practice. All patients registered in Sunderland can access SEAS appointments and the SEAS hubs have read/write access to patients GP record. The service operates out of 5 community locations, weekdays between 18:00-20:30. Weekend and Bank Holidays

Deliverables in 2018/19

- The Urgent Care Decision Making Business Case will be assured with NHS E via the Stage 3 Sense Check
- Following public consultation the new UC clinical model is scheduled to be mobilised as part of the MCP from 1st April 2019
- The proposed new UC clinical model will include an Urgent Treatment Centre in-line with national requirements
- SCCG is working with member practices to implement standardised triage
- We will co-commission the regional Integrated Urgent Care service
- Work is underway to enable the existing services to increase capacity to be able to undertake any home visits which would have been carried out by the GP OOHs service
- Work will continue with NEAS and CHS to reduce handover delays at CHS
- We will continue to participate in discussions in the regional roll-out of the Paramedic Pathfinder approach with NEAS and the North East Urgent and Emergency care network
- We will continue winter planning via the Sunderland Local A&E Delivery Board
- We will continue to manage Delayed Transfers of Care (DToC) from all hospitals locally and regionally
- We will continue to work with the Surge group to address DToC

Urgent Care ctd

NHS
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Clinical Commissioning Group

Progress in 2017/18 ctd

- We have facilitated the SEAS hub at Pallion Primary Care Centre to support streaming from the Emergency Department by accepting patients from Pallion UCC during times of surge.
- We have provided recurrent funding to CHS to lead the work towards the provision of 7 day working. This includes the development of an action plan in response to a recent national audit.
- We have implemented ways of working to take a whole system resilience approach to winter and surge planning. This has resulted in the whole system being able to respond quickly to surges, or anticipated surges.
- To ensure a timely and effective discharge CHS undertake a daily review of patients that have been in hospital longer than 7 days and any issues are managed through Surge arrangements.
- We have increased capacity by opening a new ED department at CHS.
- We have commissioned streaming by a CHS clinician to Pallion UCC to ensure patients are seen in the right place at the right time by the right clinician.
- We have provided the Surge Group with a budget to spot purchase care home beds and provide additional staffing during times of Surge.
- We have rolled out the red bag scheme into care homes and continue to promote the use of the bags

Deliverables in 2018/19 ctd

Urgent Care ctd

NHS Sunderland Clinical Commissioning Group

Progress in 2017/18	Deliverables in 2018/19 ctd
• SCCG has commissioned a 24/7 acute mental health liaison team which operates from CHS. • We have continued to commission the Paramedic Pathfinder scheme that has increased the number of 999 calls being treated on the scene. • We have undertaken winter planning 2017/18 on behalf of the Local A&E Delivery Board (LAEDB) using the driver diagram methodology. This has enabled the identification of operational issues and allowed a multi-agency solution focused approach for partners to work together to develop solutions across organisational boundaries (e.g. SEAS working with CHS to see patients streamed from Pallion.	

End of Life

NHS
Sunderland
Clinical Commissioning Group

Overall Goals for 2017 – 2019

To continue to implement the Sunderland End of Life Strategy 2017 – 2011, which aims *'To provide high quality and equitable palliative and end of life care services to patients regardless of diagnosis'*

Progress in 2017/18

- We have developed a Sunderland End of Life Strategy with our partners and stakeholders.
- We have continued to engage with stakeholders through the End of Life Operational Steering Group.
- We have commissioned training for staff involved in end of life services including General Practice and Care Homes.
- We have commissioned an e-learning training package for end of life, for use in General Practice.
- We have identified both a clinical and administrative lead in each GP practice.
- We have developed an anticipatory drug protocol for use in General Practice.
- We have worked in partnership with secondary care to establish the contributory factors for patients who do not die in their preferred place of death.
- We have developed a set of metrics to measure improvement in areas of the end of life pathway that link in with the national guidance 'Ambitions for Palliative and End of Life Care'.
- We have supported the regional and national programme to develop the Electronic Palliative Care Co-ordination System (EPaCCS) and have developed a plan to implement.
- We have contributed to the Vanguard action plan to provide support to care Homes in relation to end of life.
- We supported the annual national Dying Matters Awareness Week.

Deliverables in 2018/19

- Continue to work with our partners and stakeholders to implement the Sunderland End of Life Strategy.
- Develop an end of life training strategy.
- Develop a policy for General Practice for the use of Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) forms.
- Implement the Anticipatory Drugs policy in general Practice.
- Develop an action plan from the results of the hospital after death audit to increase the number of patients who die in their preferred place of death.
- Develop end of life profiles for each GP Practice that shows they are preforming in the key metrics for end of life.
- Implement the national guidance ' One chance to get it right for the dying patient' documentation into General Practice.
- Carry out carer/family engagement to seek the experiences of the end of life service for those who have been recently bereaved.
- Continue to implement EPaCCS in Sunderland and support the national and regional programme.
- Continue to support the Dying Matters Awareness Week.

Ambulatory Emergency Care

NHS Sunderland Clinical Commissioning Group

Overall Goals for 2017 – 2019

'Ambulatory Care is not a location but a philosophy of care'

Progress in 2017/18

- National recognition by the Ambulatory Emergency Care Network (AECN) for leading the way in delivering a successful whole system AEC project.
- **Ambulatory Care Pathways and Point of Care (PoC) Testing**
  - Continued to deliver successful and improved cellulitis and DVT pathways.
  - Pathways have standardised assessment and treatment criteria across primary care.
  - Pathways have reduced the number of emergency admissions, and increased the number of patients being treated at the right time in the most appropriate setting.
- **Ambulatory until proven otherwise** – Senior Decision Making Pilot between GPs and the AEC Unit, that resulted in a better experience by patients and staff and the following percentage of patients being managed in the community rather than secondary care:
  - Acute Medicine – 24%
  - Care of the Elderly – 50%
  - Acute Surgery - 9%
  - Paediatrics – 90%
- An audit and PQ analysis were undertaken that resulted in the development of a service specification and a framework to monitor and inform future ways of coding and costing of local AEC services.
- Developed a patient and staff engagement strategy focused around the decision maker project, 200 patient responses collated to date to help improve the project.

Deliverables for 2018/19

- Continue with **Ambulatory Until Proven Otherwise** project including other specialties across urgent and planned care.
- **AEC Strategic Event** – to support the development of an AEC contracting framework, the development of an AEC strategy for the next three years to identify service outcomes and links with the wider out of hospital reform across the city.
- **AEC Coding and Contract Framework** – monitor the framework and implement or trail any required changes for the future coding or contracting of the AEC service in Sunderland.

General Practice

NHS Sunderland Clinical Commissioning Group

As a member led organisation, we benefit from strong relationships and leadership with member practices. There are 43 GP practices within Sunderland split across five localities co-terminus with the Local Authority. Each locality has a strong leadership team, i.e. Locality Commissioning Manager employed by the CCG, Locality Practice Manager Support, Locality Practice Nurse Support and a GP Executive aligned to each locality with dedicated time funded by the CCG. This enables the CCG to work with groups of practices and communicate effectively.

Taking on responsibility to co-commission general practice in 2015 led to the development of a five year commissioning strategy for general practice, supported by a financial plan, with the overarching aim ' to sustain and transform general practice'. This put us in a strong position to implement the national vision for general practice, the General Practice Forward View (GPFV), published in 2016 in recognition that general practice is under pressure after years of relative under investment. The GPFV is a **national programme** to i**nvest £2.4 billion** by 2020/21, tacking **workload**, building the **workforce** and **stimulating care design**.

Co-commissioning is an enabler because of the need to ensure sustainability for general practice as the front door of the NHS and because of the central role of general practice in out of hospital care. The role of general practice is fundamental to the MCP care model as reflected in the number of design principles relating to general practice.

Sunderland has a GP Alliance Federation which plays a key role within the All Together Better Vanguard programme and supports the development of primary care at scale such as ambulatory ECG hubs. We are also supporting practices to develop at scale working, building on our General Practice Strategy in line with the GP FV. We are supporting practices to work together collaboratively through formal and informal working arrangements. This includes providing advice, practical support and some financial support for practices merging, as well as working with NHSE on list dispersals following the handing back of contracts.

We are also making use of the Estates and Technology Transformation Fund to support at scale working through investment in a collaboration tool. Support is focussed on building sustainability in general practice, minimising duplication, sharing skills and learning with the aim of ensuring the continued provision of high quality care and delivery of improved outcomes for patients.

General Practice Plan on a Page (DRAFT)

NHS Sunderland Clinical Commissioning Group

Our Vision	**Sustain and transform General Practice in line with the General Practice Forward View**			
Delivered by	Workforce	Care Redesign	Better Workload Management	Infrastructure
Measured By	Primary Care Access	Primary Care Workforce	Patient Experience	

Programmes of Work								
Workforce Development	Supporting General Practice to increase capacity and build the workforce							
General Practice Resilience	Support General Practice by reducing workload and providing support for practices to increase capacity and build the workforce							
10 High Impact Actions	To support practices to implement the 10 HIA in practice to release capacity and upskill the workforce and support sustainability within General Practice							
Primary Care at scale	Commissioning a citywide extended access service							
Improving Practice Infrastructure	Invest in improving GP buildings and technology to improve services for patients and enable a wider range of health services closer to where they live							
Enabled By	Primary Care Co-commissioning	IT Infrastructure	Localities	Sunderland GP Alliance	Medicines Optimisation	Reform	Investment	
Governed By	Primary Care Commissioning Committee		CCG Governing Body			Localities		
Underpinned By our Values	Patient Centred	Inclusive	Responsive	Innovative	Empowering	Integrity	Open and Honest	

General Practice Workforce Development

NHS Sunderland Clinical Commissioning Group

Overall Goals for 2017-2019

Sustain and transform general practice in line with the General Practice Forward View.

Progress in 2017/18

- **GP Recruitment**
  - Golden Hellos scheme approved and seven application received to attract new GPs to the city
  - NHSE has chosen the North East model for an early start for International GP Recruitment. Initial work to determine the level of vacancies has been undertaken. Funding in place to support local recruitment team to attend BMJ recruitment fair. And link with GPs in Portugal

GP Career Start

  - First cohort have completed the scheme – 5 have taken substantive posts within the City
  - Cohort 2 has seen 5 GPs recruited on two year contracts commencing between May and September 2017

- **Practice Nurse Career Start**
  - Cohort 1 – Nine Practice Nurses working in nine practices
  - Cohort 2 – there are fine practices signed up to the scheme
- **Health Care Assistant programme** - Expressions of interest continue to be sought for Cohort 2 of the HCA programme However it has been reported that there is a lack of interest by practices for the initiative
- Pharmacist-led medicines optimisation support for; general practice has been commissioned

Deliverables for 2018/19

- **GP Recruitment**
  - To monitor the success of the Golden Hellos scheme
  - To participate and advertise the International GP recruitment scheme, supporting member practices in accessing the scheme
- **GP Career Start**
  - To continue to monitor the GP Career Start programme
  - To recruit for Phase 3 of the Career Start programme.
  - To evaluate the National Golden Hello scheme and consider potential for further scheme
- **Practice Nurse Career Start and HCA Programmes**
  - To evaluate the success of the Practice Nurse Career Start scheme and decide the next steps
  - Work with practices to support access to TITO and localities to attempt to improve sign-up of the HCA Programme

General Practice Workforce Development - ctd

NHS Sunderland Clinical Commissioning Group

Progress in 2017/18

- Physicians Associates –
  - 4 Physicians Associates undertaking placements in three practices in the city.

Training and Development Plan

- **Practice Managers Association Programme**
  - Training on; Conflict Resolution, Partnerships and Federations, Understanding accounts and Risk and Governance have taken place.
- **Practice Nursing Mentorship**
  - SLA out for consultation.
- **Community Education Provider Network**
  - Work continues re the engagement of practices to take nursing students 2-3 from Sunderland University and 4-5 from Northumbria University.
- **Practice Nursing**
  - A 10 point plan for nurses has been developed.
  - Respiratory training for nurses in spirometry to fulfil national registration requirement – two cohorts covering total of 24 nurses have taken place awaiting results.
- **Practice Manager Development**
  - Two practice managers have accessed apprenticeship funding and are undertaking a CMI degree programme.
  - Aspiring and New Manager programme.

Deliverables in 2018/19

- Physicians Associates –
  - We will continue with the placements.

Training and Development Plan

- Evaluate the Practice Managers Association Programme and arrange further dates/topics as required.
- Practice Nursing Mentorship.
- Community Education Provider Network -
  - Work to continue engaging with practices to take the required number of students for 2018/19.
- Practice Nursing -
  - Practice Nurse sub group to work with the Diabetes Transformation Programme on the development of link Practice Nurses with a mentorship/support role.
  - To focus on the Advanced Nurse Practitioners programme that is locally aligned to apprenticeship funding as highlighted from Workforce Toolkit reports.
- Practice Manager Development
  - Two further Practice Managers to undertake CMI programme.
  - Continue to monitor and evaluation the modular PM programme.

General Practice Resilience

NHS Sunderland Clinical Commissioning Group

Overall Goals for 2018/19

Sustain and support General practice in line with the General practice Forward View.

Progress in 2017/18

- Promotion of the Exceptional Circumstances policy - 8 practices accessed funding via the policy including practice undergoing mergers.
- NHSE Resilience Programme
    - 1 practice successfully applied for funding.
    - Worked with practices to apply for funding identified in January 2018.
- Supporting General practice to merge/close (branches)
    - 2 Practice mergers supported and completed.
    - 2 further mergers were approved at the Primary Care Committee in February 2018.
    - APMS procurement completed.
- Development of General practice Quality Premium
    - 2017/18 QP launched and evaluated.
    - Proposals for 2018/19 QP in development.

Deliverables for 2018/19

- Continue to support practices to access the Exceptional Circumstances Policy.
- NHSE Resilience Programme
    - Encourage practices to apply for funding in the new scheme.
- Continue to support practices who want to investigate the possibility of merging.
- Evaluation of the 2018/19 Quality Premium scheme.
- Develop the 2019/20 Quality Premium scheme.

General practice 10 High Impact Actions

NHS Sunderland Clinical Commissioning Group

Overall Goals for 2017-2019

Sustain and transform general practice in line with the General Practice Forward View.

Progress in 2017/18

- Active signposting - provider identified to deliver training, dates arranged.
- New Consultation Types –
  - 5 practices identified to lead the roll-out of new consultation types.
  - Events held to showcase possible software providers.
  - National Dynamic Purchasing System (DPS) procurement process to begin.
  - Telephone consultation training to take place.
- Reduce DNAs - MJOG (bi-directional text messaging) embedded into practices.
- Develop the Team – TITO, Locality meetings, training as agreed at workforce group, Career Start programmes, Practice Manager and Practice Nurse Away days.
- Productive workflows – SGPA embedding training into practices following Workflow Optimisation work.
- Personal Productivity – EMIS training sessions have been held as part of the Technology User Group, Practice Manager training.
- Social Prescribing – West locality have scoped out potential project.
- Support Self-Care – Linked to active signposting, Vanguard Group re self-care work across the city.
- Develop QI Expertise – North locality have undertaken some QI work as part of resilience funding.

Deliverables for 2018/19

- Active signposting - evaluate the training and look at further training opportunities to enable the sustainability of the scheme.
- New Consultation Types – to look to roll-out following the evaluation of the pilot of the new consultation types.
- Reduce DNA's – In 2018/19 we plan to further support the use of the MJOG to its maximum including the use of smart templates and the app.
- Develop the Team – We plan to continue develop and evaluate the programmes.
- Productive workflows - Continue to work with the SGPA and practices to evaluate the scheme and decide whether further training in required.
- Person Productivity – Continue to work with NECS and EMIS to provide training including GDPR and EMIS.
- Social Prescribing – To continue to work with the West locality re Social Prescribing. Consider roll-out of project to other localities.
- Supported Self-Care – Evaluate the Active signposting training, and continue the Vanguard group work.
- Develop QI expertise – Evaluate the scheme undertaken by the North Locality and share the learning citywide

Improving Infrastructure in General Practice

NHS Sunderland Clinical Commissioning Group

Progress in 2017/18

Primary Care at scale

- Extended Access –
  - Service secured with the Sunderland GP Alliance as the integrator of current providers.
  - New ways of working in place.
  - Interoperability across the city.

Improving Infrastructure

- Estates funding -
  - 2 practices were successful in obtaining this funding, building work is underway.
- ETTF (Estates and Technology Transformation Fund) -
  - 5 bids made for funding; 2 for Advanced Telephony, Interoperability, Decision Support and Internal Practice Efficiency.
  - Continued support for practices with the implementation of technology for 2016/17.

Deliverables for 2018/19

Primary Care at scale

- Extended Access –
  - Increase the number of Extended Hours appointment availability – in line with National Guidance.
  - To develop the planned element of the service.
  - To develop the service to support the Urgent Care Strategy.

Improving Infrastructure -

- Estates funding – we will work with practices as required to complete applications for funding.
- ETTF – We will continue to work with practices to implement the technology identified in the bids.
- We will develop a training plan for staff to ensure use of new technology.

Cancer

NHS Sunderland Clinical Commissioning Group

The FYFV identified cancer as one of the NHS' top priorities, a 'must-do'. In Sunderland cancer is the most common cause of mortality accounting for 30% of the deaths. Collectively cancers account for 17.9 % of the gap between the Sunderland and England average for male life expectancy and 29.1% of the gap in female life expectancy. In response we set cancer improvement as a priority in our 2016/17 operational plan and developed a five year local cancer plan to implement the strategic aims and priorities of the national five year cancer strategy. This plan was launched with our member practices in December 2016 and was agreed by the Sunderland Health and Wellbeing Board in March 2017.

Our vision is '**to prevent as many people from ever having to experience cancer in the first place**'.

Our local plan sets out how we aim to improve cancer outcomes by implementing 28 local priorities across six areas: prevention, early diagnosis, patient experience, living with and beyond cancer, investment and commissioning. Progress against the plan is overseen by a multi-agency task and finish group.

The CCG is rated currently as good on the 2016/17 CCG Improvement and Assessment Framework for cancer. In the 2016 Cancer Patient Experience Survey (CPES), an annual survey commissioned by NHS England to monitor national progress on cancer care published in July 2017, respondents gave an average rating of 8.8 for their care where 0 is poor and 10 is very god.

For all cancer standards performance remains in achievement as at and including January 2018 with City Hospitals Sunderland NHSFT achieving all standards for quarter three despite pressures remaining for the 62 day standard.

Cancer

NHS
Sunderland
Clinical Commissioning Group

Overall Goals for 2017-2019

Improve cancer outcomes reducing smoking , increase screening uptake, early diagnosis and improve patient cancer pathway experience including survivorship and end of life

Progress in 2017/18

- We have continued to deliver the Sunderland Local Cancer Plan which features all of the priorities and actions outlined in the National Strategy Plan.
- We have continued to meet the two weeks of an urgent GP referral for suspected cancer.
- We have implemented direct access pathways to MRI and CT for people with vague symptoms.
- We have worked with Urology to develop a proposed new model to address the issues regarding the 62 day standard and implement the 28 day waiting standard.
- We have incentivised practices to undertake significant event audits.
- We have agreed to implement two early diagnosis workers to raise cancer awareness in Sunderland and South Tyneside.
- We have agreed to support CHS to implement the living with and beyond workers funded via the Cancer Alliance.

Deliverables for 2018/19

- Work with the Cancer Alliance to commission recovery packages and stratified pathways and the re-design of the prostate pathway in line with the Sunderland proposal to meet the 28 day standard.
- Continue to support the City Hospitals NHS Foundation Trust to meet the waiting time standards for cancer with oversight and coordination by Cancer Alliances.
- Support the implementation of the new radiotherapy service specification.
- Continue to support the Cancer Alliance to implement the nationally agreed rapid assessment and diagnostic pathways for lung, prostate and colorectal cancers, ensuring that patients get timely access to the latest diagnosis and treatment with the introduction of the 28 day Faster Diagnosis Standard in April 2020.
- Continue to embed the early diagnosis work posts to progress towards the 2020/21 ambition for 62% of cancer patients to be diagnosed at stage 1 or 2,
- We will theme the significant event audits undertaken in 17/18 to spread the learning to reduce the proportion of cancers diagnosed following an emergency admission.
- Continue to support the rollout of FIT in the bowel cancer screening programme during 2018/19.
- Continue explore opportunities to pilot programmes offering low dose CT scanning and we will gain learning from neighbouring CCGs who are currently piloting this programme.
- We will support the Cancer Alliance to progress towards the 2020/21 ambition for all breast cancer patients to move to a stratified follow-up pathway after treatment.

Cardiovascular Disease inc Diabetes

NHS Sunderland Clinical Commissioning Group

We selected cardiovascular disease (CVD) in 2016/17 as a transformation priority because of the health needs of our local population and following a review of NHS RightCare's data packs.

Our delivery plan focuses on AF, hypertension and cholesterol management but also includes diabetes management because of health need and identification through NHS Right Care that improvement could be made in relation to treatment outcome targets for patients. In 2017/18 and 18/19 we will deliver this by working with and supporting primary care to ensure patients with hypertension, hyperglycaemia and atrial fibrillation (AF) receive optimal care and drug treatment.

We have received diabetes transformational funding for the treatment and care of diabetes for 2017/18 and we have implemented a number of innovative activities with GP practices to drive significant improvements in patient outcomes for the 3 NICE recommended treatment targets (HbA1C, blood pressure and cholesterol management. We anticipate that this programme of activities will help us to improve our assessed performance of requiring improvement against the 2016/17 CCG IAF framework.

Cardiovascular Disease incl Diabetes

NHS Sunderland Clinical Commissioning Group

Overall Goals for 2017-2019

Optimise the length and quality of life for patients with, and at risk of, CVD, through robust primary and secondary prevention, streamlined pathways and integrated services that meet national standards

Progress in 2017/18

- Having secured national transformation funding for diabetes treatment and care in quarter 1 of 2017/18 we have:
  - Implemented a community diabetes service with Diabetic Specialist Nurses working in the community targeting high risk patients who have an HbA1c >75.
  - Engaged and worked with 48 GP practices to improve achievement rates for the 3 NICE recommended treatment targets: glucose, blood pressure and cholesterol control.
  - Commissioned 'HELP Diabetes for patients, an on-line structured education programme for people living with type 2 diabetes to help make effective changes to manage their diabetes.
  - Provided face to face education for Practice Nurses, GPs and Health Care Assistants.
  - Rolled out information prescriptions to help patients self-care.
  - Developed a proposal to pilot Consultant Diabetes clinics in GP practices in one locality to manage more complex patients whose glucose, blood pressure and cholesterol are not controlled and to support GP and PN education on diabetes management.
  - Supported workforce development by establishing practice nurse coaching/mentorship structure in each locality.
  - Provided food models in each of our 42 practices to enhance patient education and self-care.
  - Appointed youth workers to work within our secondary care paediatric diabetes service to support patients from the age of 14 to 17 to make the transition from paediatric to adult services.

Deliverables for 2018/19

- Continue with our plans to develop our practice nurse workforce in the management of diabetes using the coaching/mentorship structure established in 17/18.
- Enhance referrals for patients with diabetes into a new rehabilitation service which will be mobilised in 18/19.
- Continue to engage and work closely with GP practices to improve achievement rates for the 3 NICE recommended treatment targets: glucose, blood pressure and cholesterol control.
- Provide 6 more education sessions delivered by secondary care consultant colleagues to practice nurses focusing on more complex subjects relating to diabetes management and the management of CVD in patients with diabetes.
- Deliver the statin switch project for primary and secondary prevention via the Quality Premium in 18/19.
- Begin work to address the variation in PCP and ICD fitting with cardiology at CHS.
- Mobilise the Integrated self-care and rehabilitation service for people with long term conditions.

Cardiovascular Disease incl Diabetes ctd

NHS Sunderland Clinical Commissioning Group

Progress in 2017/18 ctd

- We have incentivised practices to identify patients with undiagnosed hypertension and atrial fibrillation (AF), through the 2017-18 General Practice Quality Premium.
- We have piloted AliveCor (telehealth tool) with some GP practices to identify AF. This is currently being evaluated.
- We have developed a business case to optimise medication for people with hypertension and diabetes to reduce the risk of cardiac episodes by switching statins in line with NICE clinical guidelines (CG181). This is currently being considered as part of our Quality Premium for 18/19.
- We have enabled education sessions to be run for our primary care staff around palpitations, AF and cholesterol.
- We have started to audit variation in our PCP and ICD fitting to inform an agreed approach to addressing this.
- We have piloted and evaluated the use of Diagnostix to identify AF and palpitations in the community.
- We have co-designed a new model of integrated self-care and rehabilitation for people with long term conditions
- We have engaged with North Tyneside CCG, as lead organisation, to commission the National Diabetes Prevention Programme (NDPP) from April 2018.
- We have engaged with 5 practices to become early adopters for the NDPP to identify a cohort of patients with pre-diabetes eligible for the programme.

Deliverables for 2018/19 ctd

- Subject to continuation funding from NHS England we will:
  - Continue and enhance the Diabetes Specialist Nurse (DSN) Service community diabetes service by increasing staff by 1 band 7 DSN who will continue to focus on high risk patients as well as offering support to practice and mentorship to practice nurse coaches and practice nurses.
  - Commission HELP diabetes for a further 12 months.
  - Engage closely with patients on a one to one basis through our outpatient clinics to promote HELP diabetes.
  - Continue to provide support to practices who are late adopters of information prescriptions.
  - Appointment of a DSN to work with young patients making the transition from paediatric to adult services.
  - Continue to provide youth worker support for young people suffering with diabetes who are preparing to make the transition to adult service.

Mental Health

NHS Sunderland Clinical Commissioning Group

Significant transformation of Mental Health has taken place in Sunderland over the past 8 years. The provider led Principle Community Pathways transformation programme has resulted in care now being delivered through a series of service pathways which do not distinguish between community and inpatient care.

In 2018/19 we will continue with ongoing actions to improve access to and availability of mental health services, develop community services, taking pressure off inpatient settings, and provide people with holistic care, recognising their mental and physical health needs.

Our comprehensive Children and Young People's Mental Health and Wellbeing Plan (Transformation Plan) is refreshed annually and sets out the vision:

'We want to improve the mental health and emotional wellbeing of all children, young people living in* Sunderland *and to narrow the gap in outcomes between those who do well and those who do not.'

During 2018/19 we will continue to work with partners to deliver the priorities of the Transformation Plan.

The CCG is currently assessed as outstanding on the 2016-17 CCG Improvement and Assessment Framework for mental health but assessed as requiring improvement for dementia because improvement is needed in dementia care planning and post diagnostic support. We have actions in place to deliver improvement in this area. We consistently achieve 70% estimated diagnosis rate as a result of time we invested in 2014 -16 working with and incentivising our GP practices to improve dementia diagnosis.

Mental Health

NHS
Sunderland
Clinical Commissioning Group

Overall Goals for 2017-2019

Deliver the Mental Health Forward View in full, including Child and Adolescent Mental Health Transformation Plan

Progress in 2017/18

- Sunderland NTW liaison service is now CORE 24 compliant one of only 2 service providers across the country to achieve this status.
- Establishment of pathways for perinatal community health team expansion for 2017-2018 pilot.
- Increased access to evidence-based specialist mental health care we now have 2 perinatal link worker within IAPT and 2 within our Liaison services.
- Implementation of agreed standardised Governance arrangements and process for 117 aftercare.
- A Sunderland CCG and LA s117 Commissioning Panel proforma and process has been developed and now implemented between Sunderland CCG and LA.
- S117 Panel Meetings are now in place and are scheduled on a 2 weekly basis.
- More than 50% of people experiencing a first episode of psychosis start treatment within two weeks of referral.
- The CCG has worked with provider's workforce/training improvement plan towards compliance with NICE recommended treatment.
- All patients within NTW have their baseline physical health checks completed as part of a holistic assessment; this is repeated at annual review and at other times as indicated. Other physical health checks are carried out by a support worker on request.
- Sunderland has four employment coaches' located within our IAPT and EIP teams.

Deliverables for 2018/19

- Build on the work with NTW around improving physical health for those people with a Serious Mental Illness and work collaboratively with our GP practices to increase the number of people on GP practices' Serious Mental Health Register that receive an annual health check.
- Work with NTW to ensure that Sunderland EIP team meets the rating for 'good' services in the CCQI self-assessment by 2018/19.
- Continue to support the NHS England Stopping over Medication of People with a Leaning Disability (STOMP LD).
- Continue to work with the provider's workforce/training improvement plan towards compliance with NICE recommended treatment.
- Continue to support the delivery of STP- level plans to reduce all out of area placements, including the review of all patients placed out of area to ensure they have appropriate packages of care.
- Implement plans to improve access to IAPT services, through Primary Care, for patients with Long Term Conditions.
- Continue to improve the Dementia diagnostic rate to achieve 66.7% of prevalence.

Mental Health ctd

NHS Sunderland Clinical Commissioning Group

Progress in 2017/18	Deliverables in 2018/19
• NTW have delivered a reduction in non-specialist acute mental health out of area placements, in line with our local plans, with the aim of elimination OAP's by 2020/21. • There is routine data collection in place that monitors adult mental health out of area placements (OAPs), including bed type, placement provider, placement reason, duration and cost. • Re patriating plans are in place for all OAPs and work is ongoing to prevent future OAPs.	

Children and Young People

NHS
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Clinical Commissioning Group

Overall goals for 2017-2019

The 2017 – 2019 plan has been taken from the *Sunderland Children and Young People's Mental health and Wellbeing Plan 2015-20* to improve mental health outcomes for children, young people and their families.

Progress in 2017/18

- We have continued to strengthen partnership arrangements to deliver the Children and Young People's Mental Health and Emotional Well-Being Transformational Plan.
- Children and Young People's (CYP) mental health and emotional well-being is embedded within the Children and Young People's Plan.
- We have increased partner engagement in the development and delivery of the Transformational Plan.
- We have commissioned Washington Mind to work with young people to produce an app to support their mental health and emotional well-being.
- We have continued to develop the mental health practitioner role as part of the psychiatric liaison service.
- Public Health have re-commissioned 0-19 Public Health services to deliver services to support the mental health and emotional well-being of children, young people and their families.
- The mental health lead role and school/Child and Adolescent Mental Health Service (CAMHS) cluster meetings are well established in pilot schools.
- We have developed and launched a School Charter Mark for mental health and emotional well-being based on the work of the Youth Parliament.

Deliverables for 2018/19

- Agree a joint commissioning plan and resource to support CYP Mental Health and Emotional Well Being Transformational Plan.
- Agree multi-agency roles and responsibilities to support the commissioning of services in line with the THRIVE model.
- Agree revised service specifications with all CAMH service providers to reflect: requirements of the Five Year Forward View; priorities identified through process and pathway mapping and transformational work streams.
- Continue to work with partners locally, regionally and nationally to plan the expansion of peri-natal mental health service provision (maternity services, adult mental health, IAPT, health visitor services).
- Continue to monitor the effectiveness of the model of peri-natal mental health maternity liaison service.
- Encourage all schools to participate in the CAMHS/school link work including the development of a mental health role, participation in cluster meetings and engaging with the school charter mark for mental health.
- Work to encourage GPs to more actively engage with the Children and Young People's mental health and emotional well-being transformational plan.
- Work with partners to develop and multi-agency parenting offer across Sunderland.
- Explore digital approaches to support children and young people's mental health and emotional well-being including on-line packages and on-line counselling.

Children and Young People ctd

NHS Sunderland Clinical Commissioning Group

2017/18 continued

- We have expanded the RAID service to CYP (3.5 dedicated children and young people's posts) to deliver psychiatric liaison services in hospital.
- We have established community education and treatment review process to prevent unnecessary admission of CYP to in-patient services.
- We have further developed Community Eating Disorder Service to be compliant with access and waiting time standards.
- We have developed and multi-agency NICE compliant pathway for the assessment and management of Attention Deficit Hyperactivity Disorder (ADHD) which will support more proactive early intervention and support for children, young people and their families.
- We have recruited seven Psychological Wellbeing Practitioners (PWP) to support improved access to psychological support as part of the CYP IAPT programmes process mapping to include indirect service provision (scaffolding).
- We have established a complex needs group to support CYP with complex learning, mental health, behavioural and social care needs.
- We have established psychological consultation sessions for residential care staff.
- We have identified the training needs of foster carers.

2018/19 continued

- Offer workshops throughout 2018/19 to support workforce development based on those requested at the 2018 conference.
- Improve access to CAMH service provision to achieve a minimum of 31% of CYP in treatment.
- Identify efficiencies within the system to support improved access (in particular the implementation of the ADHD pathway).
- Improve access to CAMHS by developing more flexible, needs led models of service provision across CAMH service provider.
- Develop a revised service specification for all CAMH service providers based upon outcomes of process mapping, CAMHS transformational work, requirements of Five Year Forward View – increased access to therapies, community eating disorder service provision, access to CORE 24 psychiatric liaison services, access to crisis response services and cost envelope/commissioning plan.
- Improve CAMHS and LD service provision for CYP with Special Educational Needs and disabilities to include:
    - Improved pathways and processes to support Education Health and Care Planning process.
    - Enhanced community service provision for CYP with LD including Positive Behaviour Programmes.
    - Support for implementation of Transforming Care for CYP.
    - Implementation of new care models.
- Implement outcomes of the ADHD Kaizen to include enhanced parenting offer, psychosocial approaches and assessment of learning need.
- Evaluate the PWP role within CAMHS and Sunderland Counselling Service to inform the 2019/20 plan.
- Explore the feasibility of developing therapeutic residential care for young children with complex behavioural, mental health and social care needs – to include residential care, therapeutic support and bespoke education packages.
- Explore the feasibility of establishing MST approached for CYP with complex behavioural mental health and social care needs.

Transforming Care for People with Learning Disabilities and/or Autism

NHS Sunderland Clinical Commissioning Group

In 2015, 48 Transforming Care Partnerships (TCPs) were established across England made up of clinical commissioning groups, NHS England's specialised commissioners and local authorities. We are a member of North East and North Cumbria TCP.

The aim of the national TCP programme is to transform the treatment and care and support available to people of all ages with a learning disability, autism or both, so that they can lead longer, happier lives in homes and not hospitals. Transforming care is all about improving health and care services so that more people can live in the community, with the right support, and close to home.

We will build on the 2017/18 programme of work in 2018/19 to deliver the transforming care agenda and implement a new community model of care across Sunderland. We have shared a number of areas of our practice with other CCGs and Local Authorities. NHS England have recognised areas of our work as best practice, for example: the development and implementation of a standardised process for undertaking inpatient Care and Treatment Review (CTR)/Care Programme Approach (CPA) co-produced with partners, service users, family members, carers and staff; the development and implementation of a standardised approach to community CTRs with the outcome of reducing admission rates by introducing an MDT+; our mortality review process to drive improvements in the quality of health and social care service delivery for people with learning disabilities to help reduce premature mortality and health inequalities.

Through implementing our learning disabilities and autism primary care programme we have made good progress, working with our GP practices, to increase the number of annual health checks for people with learning disabilities. We anticipate that through this ongoing work, which is part of our 2018/19 programme, we will be assessed in 2017-18 as meeting requirement for this indicator.

Learning Disabilities and Autism

NHS
Sunderland
Clinical Commissioning Group

Overall Goals for 2017/19

Continue Transforming Lives programme including Primary Care Learning Disabilities/Autism strategy

Progress in 2017/18

- Development of an inpatient Community Treatment Reviews (CTR)/ Care programme Approach (CPA) standardised process.
    - We worked closely with partners to ensure that CTR's have been undertaken in a person centred approach.
- Tested NHS England Self Assessment Framework (SAF) for quality CTRs:
    - Worked with partners to test the NHSE SAF resulting in changes being made and rolled out across Cumbria and the North East.
- Development of a community CTR steering group and introduction of MDT+ meetings
    - Community CTR process reviewed and the MDT+ process implemented to reduce the number of Community CTRs and provide more proactive care management and the prevention of hospital admissions.
- Development of the Sunderland Local Implementation Partnership Group:
    - Amalgamation of the Sunderland Learning Disability Partnership Board and the Autism Partnership Board and the Local Implementation Group into one group with one action plan to take forward NHS England's 10 High Impact Actions.
- The CCG was successful in its application for three NHS Capital Bids;
    - Monies to be used to facilitate the discharge of three patients from hospital into a bespoke home.

Deliverables for 2018/19

- Increase funding into Sunderland Community Treatment Team (CTT) to increase and expand capacity and expertise within the team, to;
    - Expand the delivery of the 'Step up model'.
    - Develop autism specific expertise within the team to support people who have autism.
    - Ensuring all staff are appropriately trained in Autism.
- Explore development of a Safe Space as well as Step down provision and accommodation:
    - **Safe Space**: With the LA and Transforming Care North Regional Implementation Group looking to develop crisis accommodation when there is a risk of hospital admission.
    - **Step down:** Look to develop accommodation for patients with complex needs and ministry of justice restrictive sections as a step before moving into the community.
- Make an application to access the next round of NHS Capital Bids:
    - To commission bespoke packages of care for people with complex autism to enable discharge from hospital.

Learning Disabilities and Autism ctd

NHS
Sunderland
Clinical Commissioning Group

Progress in 2017/18

- Development of a Mortality Review Learning Disabilities Mortality review programme (LeDeR) process:
    - The process reviews all deaths of people with a Learning Disability, to learn, make improvements in ways of working and develop strategies for effective care delivery.
- Development and implementation of a Learning Disability and Autism Primary Programme:
    - An information and resource for all health professionals within GP Practices.
- Development of a Primary Care Steering Group:
    - Established to support the development and implementation of the Learning Disability Primary Care Programme.
- Flu immunisations:
    - Protocol was developed to support practices increase the uptake of the flu vaccine for people with learning disabilities.
- Craigavon:
    - In line with the Transforming Care Programme Craigavon was de-commissioned and Grindon Mews Commissioned.
    - SCCG Joint Commissioning Manager (MH/LD) received the Carers Award for work around this.

Deliverables for 2018/19

- Reform the Autism pathway to ensure support to people with a Learning Disability and/or Autism.
- Introduce a new Autism post diagnostic project based on the 'All about me' course.
- Continue to roll out the Primary Care Strategy.
- Move to the next stage of the successful Learning Disability and Autism Primary Care Programme:
    - Quality and Productivity: - proposed a new LD and Autism QP scheme for 2018/19 focussing on Health Checks.
- Introduce the Community Care and Treatment Review standardised process:
    - Launch of revised community CTR process.
- Work towards discharge for those individuals who remain in Hospital.
- NHS Sunderland Mortality Review system:
    - To drive improvement in the quality of health and social care for patients with LD

Children & maternity

NHS Sunderland Clinical Commissioning Group

Giving every child the **best start in life** is essential for reducing health inequalities across the life course. What happens during those early years has a lifelong impact on many aspects of health and wellbeing.

Sunderland has higher levels of children living in poverty. Reducing the numbers of children and families who live in poverty needs to underpin our approach to giving every child the best start in life and Sunderland's Joint Health and Wellbeing Strategy has a strong focus on early years. Sunderland also has higher levels of young people aged 16 to 18 who are not in education, employment or training than the England average (Source: Public Health Outcomes Framework for Sunderland (Updated November 2015).

Maternity services were prioritised for change primarily for clinical reasons in phase 1 of the Path to Excellence (PtE) transformation programme – medical workforce pressures to provide separate services to local populations. Safe staffing levels are paramount in the commissioning and provision of high quality, safe services however proposed improvements also took account of local recruitment challenges and lack of investment.

This local maternity transformation is also set against the national service improvement backdrop of *Better Births*, (Five Year Forward View for maternity care, 2016) and a national maternity review. The Review recommends that providers and commissioners work across populations of 500,000 to 1.5 million to develop and implement a local vision to improve maternity services and outcomes to better meet the needs of women and their families. Combining resources across South Tyneside and Sunderland will help achieve this.

The overall goal for maternity services in 2018/19 involves the continuation of improvement activities to make services in South Tyneside and Sunderland safer and more personal. This involves the implementation of *Better Births* both at a local and regional level. The work involves the regional Local Maternity System (LMS), Public Health (PH) and both hospitals, City Hospitals Sunderland and South Tyneside Foundation Trust.

Working with partners, future plans will continue to deliver improvements in women's health to ensure families get off to the best start possible by reducing smoking in pregnancy, increasing flu immunisation rates in pregnant women and improving access to peri-natal mental health services for women.

Children & maternity

NHS
Sunderland
Clinical Commissioning Group

Overall Goals for 2017-2019
Ensure safe and sustainable services for improved outcomes in maternity and ensure the best start in life.

Progress in 2017/18

- The Children's Strategic Partnership has led on the development and implementation of the Children and Young People's Plan.
- CCG and Local Authority jointly appointed Programme Director has led on the development of joint commissioning arrangements for children and young people including the establishment of a joint commissioning group including senior representatives from the CCG, LA and Together for Children.
- We continued to work in partnership with the LA and Together for Children to improve outcomes for children and young people including prevention and early intervention; early help, safeguarding; services for looked after children (LAC); young offenders; and services for children with Special Educational Needs and Disability (SEND).
- We have continued to work with the Local Authority to implement the SEND Code of Practice 0 to 25; including development of Joint Strategic Needs Assessment for Children and Young People with Special Educational Needs and Disabilities; completion of the Self-Evaluation Framework and development of the SEND strategic Plan.
- The CCG has enhanced the local offer by strengthening continuing care process for children and young people, supporting short break offer for children and young people with disabilities; improving the Autistic Spectrum diagnostic pathway and Attention Deficit Disorder assessment and treatment pathway.

Deliverables for 2018/19

- Develop a joint commissioning plan and arrangements to support the delivery of the Health and Wellbeing Board Strategy, the Children and Young People's Plan; the Mental Health and Emotional Well-Being Transformational Plan and the Special Educational Needs and Disability Strategy.
- Work in partnership with Together for Children and the Local Authority to promote healthy lifestyles, physical activity to reduce childhood obesity.
- Work with partners to develop and implement a systematised approach to support for parents (parenting offer).
- Work with NHS England, Northumberland Tyne and Wear NHS Mental Health Trust and Together for children to improve community service provision for children and young people with learning disabilities and autism to develop effective aligned processes with respect to Transforming Care, SEND Code of Practice and Safeguarding to include:
    - Strengthened multi-agency engagement in development of dynamic risk register.
    - Improved CETR process (aligned with SEND and safeguarding).
    - Development of enhanced community support for children and young people with Learning Disabilities and/or Autism including increased use of Positive Behaviour Support.
- Work with Together for Children and City Hospital Sunderland to develop a model of integrated therapies provision for children and young people with autism
- Work with partners to support improved transitions in particular for children and young people with Special Educational Needs and Disabilities and Looked After Children

Children & maternity

NHS
Sunderland
Clinical Commissioning Group

Overall Goal for 2017-2019

Ensure safe and sustainable services for improved outcomes in maternity and ensure the best start in life.

Progress in 2017/18

As part of Path to Excellence transformation programme

- Full consultation with stakeholder and the public to inform the model of maternity services across Sunderland and South Tyneside.
- Full equality, health and health inequalities Integrated Assessment Report commissioned and presented to the Governing Body in respect of proposed changes to the delivery model.
- Travel and Transport impact analysis commissioned and delivered to the Governing Body.
- Communication and engagement strategy for the changes to maternity services developed.
- Governing Body meeting in common - Sunderland CCG and South Tyneside CCG agreed to the development of a freestanding midwifery-led unit in South Tyneside Foundation Trust and a consultant led maternity unit in City Hospitals Sunderland.
- Monies awarded in year from NHS England maternity transformation project funded the delivery of;
    - BabyClear training for midwives, stop smoking staff and healthcare assistants in CHS.
    - Additional Co2 monitors and consumables.
    - Additional training for sonographers from Saving Babies Lives in Sunderland.
    - 2 additional Health Care Assistants (HCA) to support the programme.

Deliverables for 2018/19

- Implementation and mobilisation of the Path to Excellence programme decision by April 2019.
- Deliver improvements from the NHS England Saving Babies Lives , a care bundle for reducing stillbirth.
- Increase the number of women receiving continuity of the person caring for them during pregnancy by March 2019.
- Continue to increase access to specialist perinatal health services, so that overall capacity is increased.
- By June 2018, agree trajectories to improve the safety, choice and personalisation of maternity.
- We will continue to work with partners locally, regionally and nationally to plan the expansion of peri-natal mental health service provision (maternity services).
- We will continue to work with the Local Maternity System to achieve levels of smoking in pregnancy of less than 10% by 2020, and less than 5% by 2025.
- Continue to embed the Babyclear programme across maternity services.
- Work with Public Health to explore alternate models of delivery for flu vaccination.
- Implementation of a model of delivery for flu vaccine delivery to increase coverage in line with or above regional uptake.

NHS
Sunderland
Clinical Commissioning Group

Enablers to Implementation

Medicines Optimisation

NHS
Sunderland
Clinical Commissioning Group

Overall Goals for 2017-2019

Our medicines optimisation (MO) strategy for 2017-19 is closely aligned with our strategic priorities and will support the delivery of the national priorities, including improving quality, and safety and patient experience.

Progress in 2017/18

- We have developed the joint formulary, hosted on a web based platform.
- We have produced guidelines on: Antibiotics, COPD, Blood glucose monitoring, laxatives, Prostate cancer, Gluten free, Cows milk protein allergy, Sip feeds, Drop list, Osteoporosis, Diabetes and Chronic Urinary Tract Infection (UTI).
- We have produced Patient Group Directions (PGDs) for sexual health and supported the production of guidance of PGDs for Urgent Care Centres.
- We have commissioned pharmacist-led medicines optimisation support for; general practice, Care Homes and people being cared for by the Multidisciplinary Teams.
- We have implemented regional work streams for; gluten free prescribing and over the counter drugs.
- We have been an active member of the Sustainability and Delivery Group and the Medicines Efficiency Steering Group across Sunderland and South Tyneside LHE.
- We have supported the sustainability of General Practice by working with the Sunderland GP Alliance on the NHS England (NHSE) clinical pharmacists in general practice pilot in thirteen practices.

Deliverables for 2018/19

- Implement aspects of the formulary that bring benefits to our patients and the healthcare system.
- Produce guidelines on; Asthma, Stoma, Urology, Dressings, De-prescribing, Chronic pain, Sunderland Lipid Modification Strategy (SLiMS).
- Provide and authorise PGDs for member practices to improve access to medicines without the need of a prescriber.
- Implement the regional wound care scheme.
- Continue to make efficiencies in home oxygen, prescribing and the repeat ordering scheme (RPOS), over the counter drugs and the gain share agreement.
- Continue to be an active member of the LHE Medicines Efficiency Steering Group.
- Review the contract for medicines optimisation support in care homes to ensure national guidance on de-prescribing and shared decision making to reduce the medicines burden is implemented.
- Work with secondary care to develop and Sunderland-wide de-prescribing guide.
- Develop and update further shared care protocols starting with those for Disease Modifying Anti-Rheumatic Drugs (DMARDs).

Medicines Optimisation ctd

NHS
Sunderland
Clinical Commissioning Group

Progress in 2017/18

- We have piloted point of care CRP (C-reactive protein) testing in general practice for suspected lower respiratory tract infections.
- We have provided funding and training for GP administration staff to review and improve prescription ordering processes to reduce queries and free-up clinical time.
- The practice MO support service has carried out audits, in practices, to identify patients with a Learning Disability that are prescribed antipsychotic medications to enable review or referral to specialist services as appropriate.
- We have identified children in practices who take medication that may cause weight gain to enable the practice to implement a process to monitor and support them.
- We have worked with Community Pharmacy to support out of hours palliative care and to hold stocks of medication for the cellulitis pathway.
- We have launched an updated and reviewed shared care documentation to support care closer to home for patients with prostate cancer.
- We have supported the cardiovascular work stream to treat patients more cost effectively, using Right Care data.
- We have reviewed Sunderland CCG's antimicrobial strategy that continues to focus on NHSE targets for reducing overall antimicrobial prescribing and broad spectrum antibiotics.

Deliverables for 2018/19

- Continue to support the regional Stop Over Medication of People with a LD (Stomp LD) project.
- Continue to work with Community Pharmacy to hold stocks of medication for the treatment of Clostridium Difficile (C.Diff), support the community pharmacy referral service.
- Support practices to improve identification and optimise treatment of patients with atrial fibrillation, hypertension and diabetes.
- Continue to support prescribers with antimicrobial prescribing.
- Undertake patient facing campaigns to help promote the antibiotic message.
- Install the antibiotic icon EMIS protocol following identification of best practice from other areas in the country.

Informatics

NHS
Sunderland
Clinical Commissioning Group

Overall goals for 2017-2019

Informatics was identified as a key enabler that will underpin the delivery of work programmes to deliver 'Better Health for Sunderland'

Progress in 2017/18

- We have supported the development of information sharing across the city by the introduction of an Information Sharing Group with representation from partner organisations.
- Digital signage was installed within all GP practices to enable key messages to be distributed at practice, locality and CCG level. The CCG Communication Group oversees the content to ensure alignment with the overall communications strategy.
- Wi-Fi has been fully deployed across the general practice estate to enable patient access to the internet and secure access for social care staff.
- Widescreen monitors with inbuilt video cameras and speakers have been deployed to general practices for new consultation types.
- Deployed our award winning 'Care Home Tablet' to 43 care homes across the city to help care home staff monitor a residents condition and communicate with clinical staff using nationally recognised tools.
- A clinical information system and NHS network connectivity was deployed to Sunderland Care and Support (SCAS) to enable digital processes and records to be created as part of the Sunderland MCP.

Deliverables for 2018/19

- To establish a major programme of work to develop and introduce a number of new technologies that will underpin a range of New Consultation Types across general practice.
- Using Estates and Technology Transformation Funding (ETTF) we will improve collaboration across practices, localities, the CCG and other partner organisations by introducing a collaboration tool that will minimise duplication and provide a single source for documentation while also supporting workflow.
- Review the EMIS community system with our community provider, to understand how we can leverage the functionality further and introduce more efficient workflows and reduce the need for paper records and excessive travel.
- Introduce technology to support mobile clinicians within general practice along with enhanced business continuity as a result of lessons learned from the WannaCry Cyber-attack in the NHS in 2017.
- Standardising diagnostic tools across practices such as spirometry, blood pressure (BP) and echocardiograph (ECG) that integrate with the GP clinical system.
- Looking at opportunities to leverage the care home tablet technology further by introducing video capability with emergency clinicians and also new monitoring tools such as skin and falls.

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Progress in 2017/18

- Sunderland GP Alliance (SGPA) has deployed a clinical information system that helps co-ordinate MDT meetings as part of the MCP care model. This is also used for the delivery of a GP extended access.
- Facilitated sharing agreements to enable views of the patient record to be visible to selected staff groups along with documents and tasks that support discharge workflows through EMIS.
- Rolled-out a messaging service to all GP practices for appointment confirmations, reminders and health promotion messages to patients.
- Refreshed patient check-in systems that can be locally configured to collect additional QOF data which help reduce pressure on the front desk.
- We have successfully implemented a number of information sharing projects that enable views of the GP records alongside End of Life (EoL) information. To support the implementation of the Electronic Palliative Care Co-ordination System EPaCCS).

Deliverables for 2018/19

- The establishment of our local node of the Great North Care Record (GNCR) and associated governance to ensure sustainability over the years to come.
- Facilitate the major migration away from the legacy N3 network onto the new Health and Social Care Network (HSCN). This will deliver reduced network costs and new circuits that will underpin digital channels and services being delivered by our plans.
- Continue the work undertaken so far to support delivery of care using technology. E.g. Florence, MyCopd and AliveCor.
- ETTF funding has been awarded.