Co-commissioning of Primary Care

Expression of Interest
Submitted to NHSE on 20th June 2014
Context

• NHSE wrote to all CCGs inviting expressions of interest (EOI) from CCGs to work more closely with NHSE and other CCGs in commissioning general practice.

• TH CCG submitted a formal EOI in collaboration with City and Hackney, Waltham Forest and Newham CCGs on 20\textsuperscript{th} June with the aim of some implementation during 14/15 and more complete co-commissioning for 15/16.

• WELC CCGs have agreed to work together to develop a model for co-commissioning activities with NHSE (both shared and independent), this development is integral to achievement of local CCG / Borough priorities and shared wider objectives such as 5 year strategic plans, Transforming Services Together (TST) and Integrated Care.

• TH has a number of initiatives in place that support co-commissioning but formal arrangements with partner commissioners will enable the full benefits of these developments to be realised – e.g.
  – NIS outcome based contract circa 7m through networks
  – TH multiagency estates group
  – Achieving Excellence in Primary Care Programme Board
  – Common IT platform
Aims

• The aims of the WELC Co-commissioning EOI are:-
  – Improve the quality and outcomes of primary medical services
  – Provide strategic leadership to the development of primary care
  – Work in partnership with other NHS organisations to improve and modernise the primary care infrastructure
EOI Outline

• The joint EOI from the 4 WELC CCG covers the following: -
  – Areas of strategic co-commissioning that the 4 CCGs wish to do together with NHSE
  – Proposed detailed collaborative arrangements for Newham, Tower Hamlets and Waltham Forest that align to 5 year plan, TST and Integrated Care
  – City and Hackney CCG has submitted an additional EOI of proposed activities at Borough level
  – The current EOI describes a focus on general practice but in future inclusion of other contractors (pharmacy, dental and optometry) may be explored as collaborative models of delivery develop against the 3 priority areas of co-ordinated, proactive and accessible care
Guiding Principles for Inclusion in Co-commissioning EOI

- There needs to be sufficient scale to justify the shift in commissioning
- There needs to clarity on governance to ensure there are no conflicts of interest between parties
- The need to ensure consistency across London in the way Area Teams work with CCGs to design their expressions of interest
- The co-commissioning should be locally led, based on patient flows
- The approach should deliver benefits not achievable within the current operating framework
- The approach should maximise the opportunities to deliver the London Quality Standards
Proposed Collaborative Arrangements

LEVEL 1 - Co-commissioning between NHS E and WELC CCGs (Tower Hamlets, Newham, Waltham Forest and City and Hackney)
- Workforce
- Joint Strategic Estates Group for premises developments
- Quality and performance – benchmarking and developing a balanced score card
- Pooling of resources
- WELC wide governance linking in with NHS E

LEVEL 2 – Collaboration between WEL CCGs (Tower Hamlets, Newham and Waltham Forest, NHS England)
- Five year Plan
- Integrated care programme

LEVEL 3 – Borough based initiatives to support levels 1 and 2
Joint Decision Making and Accountability

WEL CCGs Collaborative Governance Overview – TO BE FINALISED

1. Governance
   - Leadership and Strategy
   - Terms of Reference will be adjusted and refreshed

2. Programme Workstreams
   - Each Workstream will have WEL-wide and local initiatives
   - Borough specific and collective improvements

3. Resource and commissioning support
   - Maximizing and flexibility for commissioning and planning

WELC Commissioning Clinical Strategy Group
- WEL Transforming Services Together Strategic Partnership Board
- SPG Working Group and Programme Management Office (PMO)

Transforming Services Together (Overarching Strategic Programme and Plan)
- Transforming Primary Care
- Acute and Specialised Services – Transforming Services Changing Lives
- Enablers
  - Workforce and OD
  - IT and Info Sharing
  - Aligning & Incentives
  - Estates

Commissioning Arrangements
- Joint Management Team
- Resources

CCG Commissioning Teams
- Collaboration across the health economy

Risk Share / Use of Headroom

Enablers
- Workforce and OD
- IT and Info Sharing
- Aligning & Incentives
- Estates

NHS England
- Local Authorities X 3
- Providers

Terms of Reference will be adjusted and refreshed

Major Change Programmes, Joint QIPP and CIPs, and 5 year strategic planning

Borough specific and collective improvements
Intended Benefits

<table>
<thead>
<tr>
<th>WELC CCGs Five Year Plan Objectives</th>
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<tr>
<td><strong>1</strong> Improving additional years of life from conditions amenable to health care (PYLL per 100,000) by 3.2%</td>
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<td><strong>2</strong> Improving the health related quality of life of those with 1+ long-term conditions by 0.37%</td>
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<td><strong>3</strong> 2.38% reduction in emergency admissions</td>
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<td><strong>4</strong> Improving patient experience of hospital based care by 3%</td>
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<td><strong>5</strong> Improving patient experience of general practice and GP out of hours services by 1% in 2014/15 increasing to 5% by 2017/18</td>
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<td><strong>6</strong> Reducing the amount of time people spend avoidably in hospital through better and more integrated care in the community, outside hospital by 11%</td>
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- Improving the quality of services for patients
- Improving access and variability
- Strategic oversight of Primary Pare
- Primary Care Infrastructure Transition
## Phasing 1

<table>
<thead>
<tr>
<th>Joint Commissioning of Primary Care, CCGs and NHS England November 2014</th>
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<tr>
<td>Strategic oversight of Primary Care and a lead role in investments and decision making</td>
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<td>Joint Strategic Estates Development</td>
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<td>Quality improvement through a benchmarking and audit approach</td>
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<td>Workforce development and education</td>
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Phasing 2

Phase 2 - Joint Commissioning of Primary Care, CCGs and NHS England
April 2015 (subject to gateway process and CCG Governing Body approval)

Pharmacy

Public Health Commissioning with Public Health England including vaccinations and screening and medicines use review.

Specific Primary care contracting functions
Next Steps

- Pause pending feedback from NHSE
- Convene a WELC primary care committee
- Convene a WELC Estate Development Group
- Development of a co-commissioning work programme
- Continue stakeholder engagement as co-commissioning plans develop
- Agree how staff will work together across the organisations
- Put in place monitoring and evaluation arrangements