

Appendix 1 Action Plan Template – Long Term Conditions, Cancer and Integrated Care

Outcome Objective

The council and NHS share a vision of an integrated care system in which care is coordinated around the person and is delivered in the most appropriate setting.

The vision is based around three high level objectives.

- More patients, users and their carers empowered
- More patients receiving responsive, coordinated and proactive care including sharing data between providers across the NHS, Council and other provider organisations
- More patients receiving quality of care that is consistent and cost effective

Since the previous action plan, the key strategic and policy developments have been:

- The Care Act
- The Better Care Fund, a significant lever for driving integrated care
- Transforming Services Together Programme which is a five year strategic plan commissioned by Newham, Tower Hamlets and Waltham Forest with 14 workstreams (nine clinical, five enabler)

The action plan sets out high level, high impact priorities for the health and care economy in 15/16

Proposed outcome measures

Measure	Outcome 2013/14	Target 2014/15	Target 2015/16
Under 75 mortality rate from all CVD considered preventable	71.2		For tracking
Under 75 mortality rate from all cancer considered preventable	108.6		For tracking
Under 75 mortality rate from all respiratory disease considered preventable	33.0		For tracking

Under 75 mortality rate from all liver disease considered preventable	26.7		For tracking
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population	667.2	609.5	577.9
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	80.4	84.4	88.9
Delayed transfers of care from hospital per 100,000 population	837.2	581.3	560.0
Non Elective Admissions - Month on Month Rate per 1000 (of the risk bands 1 & 2)	65.7	NA	60.1
Patient/service user experience	Tbc – DH in development indicator on experience of integration		
Unplanned hospitalisation for asthma, diabetes and epilepsy in under 19s	66.9 (provisional data)		tbc
<i>An integrated care system in which care is coordinated around the person and is delivered in the most appropriate setting</i>			
Action/strategy/programme to deliver	Lead	Milestones	Timescale
Implementation of Better Care Funding schemes <ul style="list-style-type: none"> Integrated Community Health Team Mental Health Support and Liaison 	Jane Milligan/ Robert McCulloch-Graham	<ul style="list-style-type: none"> Go live of Section of BCF and mobilisation of service developments Q1 Review Q2 Review Commissioning intentions 	By April 2015 By July 2015 By September 2015

<ul style="list-style-type: none"> • Independent Living • Integrated Care Incentive Scheme 		<p>submitted to providers re new Community Health Services Contract</p> <ul style="list-style-type: none"> • Q3 Review 	<p>By September/October 2015</p> <p>By January 2015</p>
<i>More patients, users and their carers empowered</i>			
Action/strategy/programme to deliver	Lead	Milestones	Timescale
<p>Incorporate resident views into monitoring and development of health and social care services through Healthwatch</p>		<ul style="list-style-type: none"> • Review specification of Health Watch • Contractual monitoring of Health Watch against plan • Input of Healthwatch to key bodies including Health and Wellbeing Board, Clinical Commissioning Governing Body and relevant subgroups 	<p>By April 2015</p> <p>Quarterly monitoring</p> <p>Ongoing</p>
<p>Ensure prevention, information and advice requirements of Care Act are in place</p>	<p>Somen Banerjee</p>	<ul style="list-style-type: none"> • Online universal information and advice in place on council website • E-Marketplace launched • Ongoing updating, monitoring and promotion of information and advice • Making Every Contact Count training available through Council Corporate Training programme 	<p>By April 2015</p> <p>By April 2015</p> <p>April 2015 to March 2016</p> <p>By May 2015</p>

Ensure assessment, eligibility and care planning requirements for adults set out in Care Act are in place	Service Head Adult Social Care (starting March 15)	<ul style="list-style-type: none"> Ongoing monitoring of actions implemented prior to April 15 	April 2015 to March 2016
Ensure assessment, eligibility and care planning requirements for adults set out in Care Act are in place	Service Head Adult Social Care (starting March 15)	<ul style="list-style-type: none"> Ongoing monitoring of actions implemented prior to April 15 Refresh of carers strategy to ensure Care Act requirements are met 	<p>April 2015 to March 2016</p> <p>By July 2016</p>
Piloting of personal health budgets and integrated personal commissioning	John Wardell/Dorne Kanareck	<ul style="list-style-type: none"> Set up programme structure including recruitment of clinical leadership Develop personal budget offer for pilot groups Begin to offer personal budgets to pilot groups Review of process and implications of pilot for commissioning intentions: Begin discussions with providers on impact of programme Contract negotiations with Provider Set up sustainable arrangements 	<p>By April 2015</p> <p>By July 2015</p> <p>By July 2015</p> <p>By October 2015</p> <p>By December 2015</p> <p>By January 2016</p> <p>January 2016-April 2016</p>
<i>More patients receiving safe, responsive, coordinated and proactive care including sharing data between providers</i>			

across the NHS, Council and other provider organisations

Action/strategy/programme to deliver	Lead	Milestones	Timescale
Assessment and further implementation of Transforming Services Together enabler workstreams <ul style="list-style-type: none"> • Population health informatics • Workforce • Organisational development/clinical leadership • Estates • Long, term financial management 	Jane Milligan/ Robert McCulloch-Graham	<ul style="list-style-type: none"> • Plans for enabler workstreams for 15/16 produced • Review proposed changes and implementation for local and collaborative work 	By July 2015 July 2015 to March 2016
Implementation of Better Care Funding schemes <ul style="list-style-type: none"> • Integrated Community Health Team • Mental Health Support and Liaison • Independent Living • Integrated Care Incentive Scheme 	Jane Miligan/ Robert McCulloch-Graham	<ul style="list-style-type: none"> • Go live of Section of BCF and mobilisation of service developments • Q1 Review • Q2 Review • Commissioning intentions submitted to providers re new Community Health Services Contract <ul style="list-style-type: none"> • Q3 Review 	By April 2015 By July 2015 By September 2015 By September/October 2015 By January 2015
Ensure quality and safety requirements of Care Act are in place – adult safeguarding, information sharing		<ul style="list-style-type: none"> • Ongoing monitoring of actions implemented prior to April 15 	April 2015 to March 2016

Develop and implement Virtual Ward for Children		<ul style="list-style-type: none"> • Identify patient cohort: • Establish baseline quantitative and qualitative data: • Recruit clinical staff required to deliver the project: • Implement MDT meetings: • Agree commissioning intentions for 2016/17 (based on mid-year project findings): • Incorporate commissioning intentions into contract negotiations with providers (if required): • Implement 2016/17 commissioning model (if required): • Complete evaluation: 	<p>By Apr 2015 By Apr 2015</p> <p>By May 2015</p> <p>June 2015 – June 2016</p> <p>By October 2015</p> <p>January – March 2016</p> <p>By April 2016</p> <p>By June 2016</p>
<i>More patients receiving quality of care that is consistent and cost effective</i>			
Action/strategy/programme to deliver	Lead	Milestones	Timescale
Assessment and further implementation of Transforming Services Together Clinical Strategy for workstreams	Jane Milligan	<ul style="list-style-type: none"> • Clinical strategy published • Review proposed changes and 	<p>By July 2015</p> <p>July 2015 to March 2016</p>

<ul style="list-style-type: none"> • Diagnostic services • Maternity and newborn care • Children and young people • Surgery • Pathway redesign (long term conditions, including cancer) • Primary care • Integrated Care • Mental Health • Urgent and emergency care coordination 		<p>implementation for local and collaborative work</p>	
<p>Review of Long Term Conditions packages</p>		<ul style="list-style-type: none"> • Review current care packages • Develop new specifications base on review 	<p>By December 2015</p>
<p>Review childrens outpatient pathway review</p>		<ul style="list-style-type: none"> • Undertake audit/review of outpatient data • Based on data analysis, identify top 3-5 pathways for re-design • Re-design pathways, to include widespread engagement with primary/secondary clinicians and patients • Finalise new pathways • Incorporate any pathway changes into contract 	<p>By April 2015</p> <p>By April 2015</p> <p>By August 2015</p> <p>By September 2015 January 2016-March 2016</p>

		negotiations with providers (if required) <ul style="list-style-type: none">• Implement new pathways:	From April 2016
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