Developing and Delivering System Transformation and Sustainability: The CCG's plans for 2017/18 and the Tower Hamlets Together Approach in the future

Introduction and Context

Clinical Commissioning Groups (CCG) have a statutory duty to ensure quality and sustainability in their local health systems. In order to achieve this, the CCG develops service change and transformation schemes in order to a) improve the quality of the services provided and b) reduce cost and spend in the system. The Tower Hamlets health economy needs to identify £10m of system savings per year over the next five years, in addition to the productivity requirements set by NHS England to be delivered by providers of services. However, due to additional pressures within the health economy, the requirement for 2017/18 has been revised up to £15m. Tower Hamlets CCG has always sought to deliver these system savings through schemes that improve quality, seek to change and innovate services, improve productivity and seek to prevent ill health and the need for emergency care. This paper outlines where the CCG feels these opportunities exist, and what plans we have to achieve them.

In addition the CCG is engaged in partnership programmes to deliver system transformation:

- Transforming Service Together: A collaborative programme focusing on the Barts Health footprint (Newham, Waltham Forest and Tower Hamlets). This programme largely focuses on improvements within Barts Health and some system transformation where there are common priorities between the Boroughs. This paper will identify where we expect this programme to contribute to Tower Hamlets' system sustainability in 2017/18
- North East London Sustainability and Transformation Plan: a regional strategy to ensure that opportunities for system sustainability are leveraged across North East London, for example in maternity services, acute mental health and specialist hospital care.
- Tower Hamlets Together: a "New Models of Care" Vanguard site seeking to deliver an
 improved model of care for adults, children, and to accelerate improvements in population
 health. This paper will describe how from April 2017 onwards, this will become the vehicle
 for developing system transformation across Health and Social Care in Tower Hamlets.

Process

The process for developing commissioning intentions and system transformation plans is as follows:

- Data analysis, benchmarking, and best practice: The use of local and national datasets to identify where there may be opportunities for improvements in services, or to identify where current services are providing substandard care. Tower Hamlets CCG is also a wave one site for the NHS England RightCare programme; a suite of improvement tools and data to support local areas. Finally we also review emergent best practice guidance to identify where we can implement evidence based improvements to current services.
- Review of current schemes and services: where the CCG already commissions services, or
 has delivered previous transformation schemes, we review the performance of these to
 identify if there are any further opportunities or if the intended benefits are not being fully
 realised.
- Engagement with members and public: through regular engagement events, or via targeted engagement activities with certain sections of the public and service users, we seek to identify issues with current services that are amenable to a commissioning approach. In addition, through the locality structures within the CCG we seek to get the feedback from our GP membership on current service provision.

Summary of schemes

Below is a summary per CCG programme board or partnership programme. For more detail please see appendix 1. PLEASE NOTE: this is the situation as of 17th October 2016 and is subject to change.

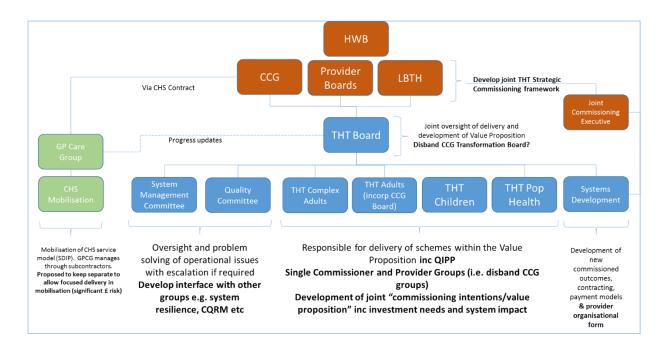
Programme	Areas of Focus	Impact	Estimated Savings (£000s)
Children	Mental Health	Less emergency care	TBC
	0-5s	Improved access to care	
	Complex needs		
Adults	Primary and Urgent	Reduced emergency activity	£3,841
	Care	Improved primary care access	
	Pathway redesign	Reduction in referrals to	
		hospital	
Complex Adults	Integrated Care	Reduced emergency activity	£1,019
	LTC management	More effective LTC support	
	Mental Health		
Transactional/	CHS procurement	Improved productivity and	£3,383
Productivity Savings	Provider Productivity	efficiency	
Transforming	Pathway development	Reduced referrals	£2573
Services Together	Diagnostics and	More appropriate care	
	pathology savings		
Total			£10,816
Savings requirement			£15,000
Variance			£4,184

Development of system transformation in the context of Tower Hamlets Together (THT)

Tower Hamlets CCG is a partner in the Tower Hamlets Together Vanguard, a programme seeking to deliver a new model of care for our residents. As a partnership programme consisting of all providers and commissioners of health and social care in Tower Hamlets, it is a unique opportunity to work together to meet the joint challenges we face in terms of population health, system sustainability and quality.

In delivering the Tower Hamlets Together agenda it has become apparent that there has been a certain amount of duplication of effort both in the development of strategy and the delivery of change. In addition, whilst THT is a collaborative programme, it focuses on a discreet portion of the wider transformation agenda in Tower Hamlets. This is despite the fact that all partners are around the table and engaged in the wider agenda elsewhere. We are missing an opportunity to develop a truly integrated and collaborative approach.

Therefore, it is proposed that from April 2017 the Tower Hamlets Together Board takes on the oversight of all transformation activity happening within Tower Hamlets. This would include a shared view and responsibility of system quality and efficiency challenges, including the financial savings required. Commissioning Intentions and transformation agendas will be built jointly with those providers who have to deliver them. The proposed governance for this is outlined in the diagram below:



In practical terms this will mean that rather than having separate programme boards and oversight boards between the CCG and THT, there will be a single function under the Tower Hamlets Together Board, with shared leadership of the transformational boards feeding into it. It is believed that this will have significant benefits for the development of plans and delivery of schemes:

- It will better align provider side cost improvement programmes with longer term strategy
- Make more efficient use of the transformation resource within the system
- Potentially allow for economies of scale in support functions such as analytics, commissioning support etc
- Reduce unnecessary delays in the annual contracting round by provider colleagues having a full role in the development of plans that impact upon their operations

Conclusion and Next Steps

For planning for 2017/18, the CCG's commissioning teams will be taking forward this programme as follows:

- Risk assessment of current schemes to further refine deliverability and timescales
- Continue to develop existing schemes where impact projections are not yet available
- Develop further schemes to meet gap through review of existing service budgets
- Development of full business cases for schemes, for sign off by the CCG's Transformation Board
- Plan and commence delivery

The CCG will also be working closely with its partners within THT to refine the governance proposal as outlined above, and work to ensure that we can operate as a single system effectively from April 2017/18 onwards, in order to deliver what is required for the foreseeable future.

Appendix 1: Breakdown of CCG Transformation Programmes

CCG	Description	Quality and	Estimated
Programme Board		Productivity Impact	Financial Impact (£000s)
Children's	CAMHS Transformation:	Improved health and wellbeing Increased access to mental health services Reduction in emergency services use	TBC
	O-5 Years Strategy: Improve access to perinatal mental health services Increase choice of birth options Pre-conceptual care for women with diabetes Data analysis to inform further priorities	Improved health during and following pregnancy More births in non-obstetric settings	TBC
	Complex Care: - Expand virtual ward for children - Pathway improvements in secondary care - Delivering personal budgets for children - Developing autism pathway	Reduced emergency admissions Reduced referrals to hospital	TBC
Adults	Improved pathways into hospital: Full year effect of schemes for: - MSK and Pain - Gastroenterology - Dermatology	Reduced referrals into hospital Reduction in unnecessary invasive procedures	£1,651
	Provision of data to GPs to inform referral practice	Increase in appropriateness of referrals	TBC
	Primary Care transformation: - Extended access hubs - Building resilience in general practice - Provider development	Reduction in primary care waiting times Improved stability of Primary Care	TBC
	Integrated Urgent and Emergency Care: - System redesign around primary care hub model - SPA via 111 - Ambulatory Care	Reduced A&E attendances Reduced emergency admissions Improved experience	£2,190
Complex Adults	Integrated Care: - Further development of IC community teams - Reablement and community equipment review	Reduced emergency admissions and A&E attends Improved support for people at home	£1,019

	- LTC NIS development		
	Latent TB infection project	Earlier identification	NA
	Mental Health in Primary Care Pilot	Reduction in referrals Improved management of primary care demand	ТВС
	Last Years of Life: - Education and training programme - Compassionate neighbours programme - Review 24/7 services	Increase in people dying at home	TBC
	Long Term Conditions: - RightCare Respiratory pathway review, inc prescribing - Falls reduction	Reduction in emergency admissions	ТВС
	Mental Health:	Improved quality and experience Reduction in emergency demand Increase in access to IAPT	TBC
Productivity/ Transactional	Community Health Services Procurement Efficiency	Improved service model	£1,800
Savings	Acute provider productivity	Reduction in unnecessary follow-up appointments	£583
	HEMS	NA	£1,000
Transforming Services Together	Pathway development work: - Specialist advice for GPs - Non face to face appointments - LTC bundles - Community ophthalmology - Community gynaecology - Rheumatology	Reduced secondary care referrals	£653
	Reducing unnecessary testing (pathology and imaging)	Reduction in unnecessary diagnostics	£1,920
Total		_	£10,816
Savings target for 2017/18			£15,000
Variance			£4,184