1. Purpose

The NHS is required to make £20 billion of QIPP efficiency savings by 2014/15 due to increasing demand for services. Lewisham Clinical Commissioning Group (LCCG) has begun the process of identifying a number of ways we can improve the quality of services through innovation, greater productivity and prevention (QIPP) using an integrated approach – whilst acknowledging the financial limitations.

The purpose of this briefing paper is to provide the Healthier Communities Select Committee with an overview of the following areas;

- QIPP 2013/14 Successes;
- Our Commissioning Intentions for 2014/15 and 2015/16, including high level Quality, Innovation, Productivity and Prevention (QIPP) schemes, which have been identified to deliver the Lewisham CCGs 5 year Strategy – ‘A Local health Plan for Lewisham 2013 – 2018’.

It is our view that Lewisham CCG has made significant progress in improving care and the quality of services for patients and productivity in 2013/14. Our aim is to continue to build on the progress to date and work with patients, the public and our partners in the wider local health economy to improve health outcomes for our community.

2. Recommendations

Members of the Healthier Communities Select Committee are recommended to note the achievements and challenges in delivering the QIPP programme in 2013/14, our Commissioning Intentions (Appendix 1) and our approach to engaging and involving Lewisham people (Section 4 and Appendix 2).

3. QIPP 2013/14 Successes

The 2013/14 QIPP programme focused on increasing the level of integrated services and ensuring that services were accessible and met the health needs of local people. The Lewisham Clinical Commissioning Governing Body receives a monthly performance report on QIPP at all meetings, including those held in public. At month 9 (2013/14) Lewisham CCG had delivered 99.4% of its 12m QIPP challenge.

3.1 Urgent Care

This year a number of schemes supporting improving access and choice with regard to urgent care produced a reduction in the number of A&E attendances. Supporting the
Urgent Care Centre (UCC) at Lewisham Hospital, Lewisham CCG commissioned GPs to provide dedicated Urgent Care Slots for patients' in local practices during the winter period. This provided an additional 388 appointments per week across Lewisham in practices.

Following the success of a 2 month pilot in 2013 the UCC Assess, Redirect or Treat (ART) Model of care was rolled out in the UCC in October 2013. The model aims to manage adult patients with an apparent non-urgent care need attending the UCC/A&E enabling patients with more complex needs to be seen quicker and managed more appropriately. Patients are assessed by a UCC clinician and receive either:

- immediate treatment (See and Treat);
- are referred to the UCC/Emergency Department for further investigations/treatment;
- discharged with self-care management guidance;
- or appropriately signposted to an alternative health or social care provider appropriate for their health care need.

The pilot demonstrated huge benefits for all patients (pilot and non-pilot) as they experienced shorter waiting times, were informed about services they can access for their health care condition and received advice on how to manage some minor ailments themselves (self-care).

### 3.2 Long Term Conditions (LTCs): Improving Diabetes Care

Lewisham CCGs Improving Diabetes Care Strategy continues to deliver improved care for patients with Diabetes. The number of emergency admissions for diabetes related conditions fell in 2013/14 in comparison to 2012/13. This is in part due to the collaboration of improvements in integrated diabetes services and early diagnosis and treatment (Register, Review and Recall) by local GPs.

Our programme to empower patients to be at the centre of their care has resulted in a 100% increase in the numbers of patients undertaking the DESMOND (Diabetes Education and Self-Management for Ongoing and Diagnosed) course. DESMOND is a UK NHS training course for people with type 2 diabetes that helps people to identify their own health risks and to set their own goals.

In addition, Lewisham CCG remains committed to raising awareness amongst local communities and commissioned a comprehensive training and support programme for Community Champions provided by Diabetes UK.

Fifteen Lewisham residents from mainly Black, Asian and minority ethnic backgrounds have been supporting their communities to better understand the potentially devastating consequences of diabetes. The group, who trained as part of the Diabetes UK Community Champions programme, received awards for their work at a celebration event on Thursday 14 November 2013 at the Broadway Theatre in Catford.

Since the group completed their training in July 2013, they have carried out 24 separate awareness raising events in the borough, reaching an estimated 1,000 residents. The group has pledged to continue to raise awareness with support from Diabetes UK, Lewisham Clinical Commissioning Group and Lewisham Borough Council.
4. Patient and Public Involvement

4.1 Our Approach

- Public engagement in the Commissioning Intentions will build on recent engagement activities to involve patients and the public in shaping the Lewisham CCGs 5 year Strategy ‘A Local health Plan for Lewisham 2013 – 2018’.
- Public appetite to discuss health and social care was demonstrated well at this time, and the CCG has maintained contact with the groups that participated in those initiatives during September and October 2013.
- Feedback received from the public during the Strategic Plan engagement was acted upon to clearly focus the priorities we now seek their views on. Importantly, the forthcoming engagement seeks a clear contribution from the public.
- The engagement is designed to involve patients, carers and members of the public, including young people, in a dialogue to inform the LCCGs two year Operating Plan 2014 – 2016.
- The full Commissioning Intentions document has been reproduced as a Summary Document in response to feedback received from local residents, who formed our Readers Panel to ‘test’ the suitability of the full document.
- The Readers Panel suggested the full document be broken down into a ‘suite’ of documents, empowering the public to choose the areas of importance they are keenly interested in. This framework is being used to structure the questions we will use during engagement.
- The full Commissioning Intentions document will be available at all events and on-line for those who want to read more of the detail.

4.2 Aims of engagement in the Commissioning Intentions

Views gathered during public engagement will be used to inform the Lewisham CCGs two year Operating Plan. The Operating Plan provides further details on the activities and programmes taking place within Contract Frameworks with our major healthcare Providers. The Operating Plan is the key internal guidance framework we use to progress and deliver our Strategic Priorities and Commissioning Intentions.

Engagement is being developed in partnership with London Borough of Lewisham to ensure good coordination of important health and social care initiatives are delivered with respect for participants’ time and energy for engagement. The priorities within the Commissioning Intentions document reflect the Health and Well Being Board priorities. The Adult Integrated Care Programme is a core priority within the Commissioning Intentions, and forms part of the engagement questions.

4.3 Engagement Method/s

We will use a number of methods to attract as many residents as possible; including face to face engagement within the equalities and health inequalities groups (9 protected characteristics groups); social media and on-line communication, and offer the traditional method of ‘freepost’ envelope for return.

We will be delivering:
- Workshops with 8 previously involved community groups
- Sessions with Health and Social Care Forum, Parkinson’s Support Group and Lewisham Pensioners Forum
- Attendance at 5 Community Libraries
- Surveys for GP practices (by Healthwatch)
- Kaleidoscope Children’s Centre (by Healthwatch)
- Distribution to Housebound Residents via Library Service/Healthwatch
- Attendance at Community Advice Hub - Healthwatch
• BME groups to be engaged by Community Health Team

Specific activities are in the process of being organised for community groups that have users of marginalised communities – as we are keen to engage and reflect our commitment to accessing all communities as stated in our Equalities and Health Inequalities groups.

4.4 Communication

Widespread communication of the engagement initiatives will take place through our partnerships within the community and voluntary sector, the London Borough of Lewisham’s Leisure and Community Teams. Our Summary Document will be available in all Libraries and all centrally managed community centres and we have gained the support of the contracted Leisure Centre providers to distribute information to all their membership groups. These partnership activities will raise the awareness to Lewisham residents.

Lewisham CCG has secured 4 pages in the next edition of Lewisham Life and will communicate the participation opportunities. We will also utilise community infrastructure, including pharmacies, GP surgeries, and supported housing and care homes to encourage involvement.

4.5 Outcomes from engagement

An example of our engagement activities in action can be found at Appendix 2. The recent Asthma event is reported and demonstrates how we ‘listen and respond’ to public views. All participants involved in the event will receive feedback and further opportunities to stay engaged with Lewisham CCG.

5. Equalities and Diversity

An Equality Impact Assessment (EIA) was conducted by Public Health on Lewisham CCGs 5 year Strategy: ‘A Local health Plan for Lewisham 2013 – 2018’ (presented to the Healthier Communities Select Committee in September 2013). In order to ensure that Lewisham CCGs fulfils its commitment and duty to eliminate discrimination and promote equality – the Lewisham CCG’s equalities objectives are embedded within the Commissioning Intentions. Our objectives are covered in Appendix 1;

• **Access to GP services:** Section 3.9 ‘Primary Care and Planned Care’;
• **Navigating the NHS System:** Section 3. 8 ‘Adult Integrated Care – Living Well’;
• **Information for patients when discharged from hospitals into the community:** Section 4.1 High Quality of Care’;
• **Communication and understanding of reception staff in a range of settings:** Section 3. 8 ‘Adult Integrated Care – workforce’.