HEALTH AND WELLBEING BOARD					
Report Title	CCG Strategic C	commissioning Plans			
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Class	Part 1	Date:	20 January 2	015	

1. Purpose

1.1 NHS Lewisham CCG's first five year commissioning strategy was presented to the Board in November 2013. The strategy includes the vision and ambition of the CCG, an analysis of population health needs and health outcomes, the financial situation, public engagement feedback, and identifies eight strategic priorities and their supporting aims. Since then the six Clinical Commissioning Groups (CCGs) across south east London have worked together to develop a joint five-year commissioning strategy that complements and builds on the interventions and priorities set out in the Lewisham CCG 5 year strategic plan. The final draft south east London strategy was presented to the Board in July 2014. This report summarises key parts of the CCG strategy and the progress made on the south east London strategy in the last six months and the next steps.

2. Recommendation/s

Members of the Health and Wellbeing Board are invited to:

- 2.1 Note the progress of the *Our Healthier South east London* programme
- 2.2 Identify areas where further work is required to develop the strategy
- 2.3 Note the alignment of the *Our Healthier South east London* programme with the CCG strategic plan

3. Policy Context

3.1 The NHS England strategic and operational planning guidance. 'Everyone Counts: Planning for Patients: 2014/15-2018/19' sets out a framework within which commissioners will need to work with providers and partners in local government to develop strong, robust and ambitious five year plans to secure the continuity of sustainable high quality care for all.

- 3.2 While each CCG is accountable for developing a Strategic, Operational and Financial plan, they may also choose to join with neighbouring CCGs in a larger 'Unit of Planning' to aggregate plans, ensure that the strategies align in a holistic way and maximise the value for money from the planning resources and support at their disposal.
- 3.3 The NHS 'Five Year Forward View' was published in October 2014. It includes a vision for a better NHS ('a new relationship with patients and communities'), the steps to be taken to get there ('new models of care'), and the actions needed.
- 3.4 The Forward View recognises the importance of preventative action on obesity, smoking, alcohol and other major health risks to achieve better population health. There should be greater support for patients to control their care, and for carers. Steps should be taken to break down barriers in how care is provided, between health and social care, and between different health sectors.
- 3.5 Better Health for London is the report of the London Health Commission. The report covers five priority areas:
 - Better health for all
 - Better health for London's Children
 - Better care
 - Science, discovery and innovation
 - Making it happen
- 3.6 There are 64 recommendations, including: Health improvement and workplace health initiatives Integration of services
 - Ensuring public engagement, shared decision-making and care and support planning
 - Self management of long-term conditions
 - Increased spending on primary and community services, with new quality standards and encouragement networking of GPs
 - Access to digital mental support and psychological therapies
 - Better use of data analysis
 - Improved budgeting for transformation and specific population groups

4. Lewisham CCG Strategic Plan

- 4.1 The CCG's strategy describes the vision and ambition of the CCG based on the framework of 'better health, best care and best value'.
- 4.2 For better health, the ambition is to reduce the gap in key health outcomes between Lewisham and England by 10% over the five year period.

- 4.3 We are committed to delivering high quality support and care, working in partnership with other commissioners and our local population. Care should be provided at the simplest level and 'at the right place'; that is, so that it is least restrictive to patients and carers, localised where possible, and at the most appropriate setting. We will focus on the core elements of quality: safety, patient experience and clinical effectiveness
- 4.4 The vision for best value is to commission more effectively with the most efficient use of resources working with other commissioners.
- 4.5 The 'case for change' within the strategy has been reviewed to include updated population health needs, public and membership feedback, national and London policy development, and for financial planning. It identifies that:
 - The changing health needs of the Lewisham population will increase demand on services
 - We need to improve our health outcomes
 - We need to improve quality and accessibility of local services to all
 - We need to shift the balance of care from emergency responses to care that is proactive and planned
 - We need to develop advice, care and support services that empower people to want to take control and be responsible for their health and wellbeing
 - The current configuration of health services is not likely to be sustainable
 - There will be gap in finances, between resources available and expenditure
- 4.6 We previously identified nine strategic priorities, and additional crosscutting 'enablers', which we will focus on to transform services:

Strategic Themes	Strategic Priorities
Healthy Living for All – helped to live healthy lifestyles, make healthy	Health promotion and prevention
choices and reduce health inequalities	Maternity and children's care in hospital
Frail and Vulnerable People - supported and cared for with dignity and respect	Vulnerable and frail older people including end of life care
Long Term Conditions – empowering people with greater choice to manage their condition	Long Term Conditions pathways – eg COPD, diabetes, CVD, dementia
	5. Mental Health care
Deliver Services	Community based advice, support and care

Differently	7. Integrated neighbourhood community teams based in each of the four localities
	Primary care development and planned care
	9. Urgent Care
Cross Cutting Areas –	High quality care
enabling high quality	Public engagement
and integrated care	 Research and innovation
	Better outcomes
	 Governance arrangements
	 Partnership working
	CCG leadership

5. Our Healthier South East London - The South East London Commissioning Strategy

- 5.1 The strategy:
 - is local commissioner led and clinically driven
 - aims to improve health, reduce health inequalities and ensure the provision of health services across south east London that meet safety and quality standards consistently and are sustainable in the longer term
 - is based on local needs and aspirations, listens to local voices and builds on plans and work at borough level, whilst taking into account national and London-wide policies
 - focuses on those issues which need collective action by south east London's health system and local authorities' working in partnership to address successfully
 - focuses on the most important health issues for people in south east London, as identified in the south east London "case for change" developed by local clinicians and social care colleagues and tested with partners, local people and other stakeholders
 - runs for five years from 2014 to 2019 to give plenty of time to plan and deliver improvements
- 5.2 The clinical case for change identified a number of issues across south east London which are reflected in the health of local people and which impact on the safety, quality, effectiveness and accessibility of health services, which can be best addressed by collective action across the health and integrated care system or where working together will add value.
- 5.3 Health outcomes in Lewisham and across south east London are not as good as they could be and the longer we leave these problems, the worse they will get. We all need to change what we do and how we do it.
 - Too many people live with preventable ill health or die too early

- The outcomes from care in our health services vary significantly and high quality care is not available all the time
- We don't treat people early enough to have the best results
- People's experience of care is very variable and can be much better
- Patients tell us that their care is not joined up between different services
- The money to pay for the NHS is limited and need is continually increasing
- We all pay for the NHS and we have a responsibility to spend the money wisely
- The CCG is working on the joint strategy as a member of the Strategic Planning Group for south east London, together with the other five CCGs and NHS England. The strategy is being developed by local clinicians, social care leads and other experts, CCG commissioning leads, Healthwatch representatives and patient and public voices from across south east London. It focuses on six key areas that reflect the strategic priorities of the CCG's own strategy:
 - Community Based Care*
 - Urgent and Emergency Care
 - Maternity
 - Children and Young People
 - Planned Care
 - Cancer

(*This group merges two previous workstreams set out in previous reports – Primary and Community Care and Long Term Conditions – Physical and Mental Health).

- 5.5 Development work on the strategy to date has identified the following key characteristics which would underpin a future integrated system for south east London:
 - Build strong, confident communities
 - Promote health and wellbeing
 - Provide accessible and easy to navigate services
 - Join up services from different agencies and disciplines
 - Deliver early diagnosis and intervention
 - Raise the quality of services to the same high standard
 - Support people to manage their own health and wellbeing
- 5.6 Each of the six Clinical Leadership Groups has made excellent progress over the last six months and their work has been brought together in an over-arching Whole System Model, which describes how we would propose to deliver health and care services in future. The model is underpinned by Local Care Networks in each borough. This work is still in development and is being tested against the Five Year

Forward View and recently received planning guidance, and the London Health Commission recommendations.

5.7 The Whole System Model and Local Care Networks are represented diagrammatically in Appendix 1.

6. Public Health Workstream

- One of the critical success factors for Our Healthier South East London is to ensure it builds upon and supports the development of strong and confident communities. These communities will exhibit measurable improvements in public health, with reduced health inequalities, and will be served by a health system that has a focus on prevention. This requirement sits at the centre of the strategy, alongside the aims stated above, to ensure health services are fit for purpose and deliver improved outcomes for the whole population.
- 6.2 Improving public health is also tied into the strategy outcomes which focus on:
 - Population Health
 - Quality of Life
 - Quality of Care
 - Effectiveness of Care
- 6.3 Alongside the work of Clinical Leadership Groups, we have set up a specific Public Health project group. This is led and delivered through the six boroughs' Directors of Public Health and their teams. This group is overseen within the strategy governance structure by the Clinical Executive Group.
- 6.4 The group is currently undertaking a review of public health outcome measures and the current baseline of public health in south east London. Building on this review it has been decided that the group will focus on the public health challenges which have the biggest impact on the health of our population. It is in the process of creating a consolidated list of the most effective public health interventions that deliver the best value proposition (value = biggest health impact for the financial resource required) for those biggest areas of challenge.
- 6.5 The group is focusing on the following domains in order to agree the appropriate risk factors/biggest health challenges for which we need to focus our interventions:
 - Health inequalities
 - Preventable mortality
 - Amenable mortality
 - Mental health
 - Sexual health

- 6.6 It is anticipated that the main risk factors (those which have the biggest impact on health) are likely to be:
 - Tobacco
 - Alcohol
 - Mental health
 - Obesity
- 6.7 The outcomes of this work will feed into the work of the Clinical Leadership Groups to identify how the best value public health interventions need to be embedded within the new models of care. Each Clinical Leadership Group and its planning group already include public health leads to support the work they are undertaking to develop models of care and the outcomes to be achieved by introducing these models of care. These public health leads will continue this support to ensure the integration of the proposed public health interventions as the models of care are further developed.
- 6.8 In order to understand how the work of the strategy can deliver as effectively as possible to meet the aim of improved public health we have also been engaged with public health experts across a wide range of fields. Experts include those working within Kings Health Partners, the Health Innovation Network, South London CLAHRC, Local Authority partners supporting the development of resilient communities, Public Health England and NICE.
- 6.9 In early 2015, the programme will be bring these experts together within a workshop to help to shape the way in which we deliver our public health outcomes within the strategy and its implementation. A key element of the workshop will be to agree an approach to coordinating public health expertise within south east London to enable delivery of these outcomes. We have a significant opportunity, by pulling expertise together, to implement public health interventions and services in the most effective way, and to gather practical evidence for investment in public health within the wider context of London and other cities.

7. Public engagement

- 7.1 The co-commissioners are taking a strong engagement approach to the strategy development, aiming to involve partner organisations, patients and local people in the process of developing the strategy. Initial thinking is being developed and amended through the engagement process. Engagement is being undertaken through a number of complementary activities, including the following.
 - Using existing borough-level channels and planned activities, supplemented by engagement on a wider basis where this is helpful.
 Initial engagement included developing the emerging and draft case for change, testing emerging strategic opportunities across south east London and the scope and vision and the ambition of the programme.

- The focus of engagement is moving onto priorities and proposed models of care as the programme develops
- Our Plain English version of the case for change has been updated and is available on our website
- Regular updates on the strategy development have been provided at local public meetings of CCGs' Governing Bodies and Health and Well-Being Boards
- CCGs' GP memberships are being provided with briefings on the clinical developments and progress with the strategy
- 7.2 Patient and public participation within the programme is also key. Healthwatch representatives and local patient and public voices have been recruited and are working in each of the six Clinical Leadership Groups with clinicians and social care leads from organisations across south east London. Healthwatch representatives and local patient and public voices are members of the Partnership Group, Clinical Executive Group and the Clinical Commissioning Board and therefore involved in shaping the overall strategy.
- 7.3 Patient and public voices also meet monthly as a single body – the Public and Patient Advisory Group – advising the programme on all aspects of public engagement and involvement. The Patient and Public Advisory Group has recently set up a Reading Panel, which supports the programme by ensuring that all published materials are understandable, jargon free and in Plain English. To complement existing local engagement work, wider engagement events across south east London with voluntary and stakeholder organisations, patients and local people has taken place. Two deliberative events for voluntary organisations and other stakeholders took place on 3 June and 18 June 2014. The feedback from these events (and other feedback from local people) contributed to the first 'You Said We Did' report, summarising and responding to feedback on the strategy, which was published in November. A further 'You Said We Did' report will be published early in 2015.

8. Alignment with CCG Plans

8.1 Throughout the development of the south east London strategy to date, the work has been tested against existing CCG plans for alignment and it has, in turn, contributed to shaping these plans. Specifically, CCG Operating Plans and borough-based Better Care Fund Plans have been reviewed and contributed to the strategy. The Community Based Care programme has held two workshops this year to enable CCGs to share best practice and innovative approaches in integrated care and in primary care/local care networks. On 2 December, Chief Officers and colleagues came together to review the elements of the strategy and assess their current position on implementation and this work will inform the next stages of planning.

9. Conclusion and Next Steps

- 9.1 The south east London commissioning strategy, Our Healthier South East London, has continued to develop since last reviewed by the CCG Governing Body in June last year. The focus has been on:
 - further development and testing of the clinical models,
 - the development of the whole system model to frame the individual elements
 - work to define the intended outcomes of the strategy
 - modelling the impact
 - testing alignment with the plans of individual CCGs and taking stock of progress towards implementation
 - work with public health colleagues to begin to identity how the greatest impact on public health can be achieved
- 9.2 This work will continue through the first part of 2015, with extensive engagement with partners, stakeholders, patients and local people to test and develop the strategy further.

10. Financial implications

10.1 The strategic plans reflects the financial plan and savings required to deliver a financially balanced position over the five year period, as described in the CCG's operating plan.

11. Legal implications

11.1 Members of the Board are reminded that under Section 195 Health and Social Care Act 2012, health and wellbeing boards are under a duty to encourage integrated working between the persons who arrange for health and social care services in the area. This is recognised in the strategic priorities identified in the development process.

12. Crime and Disorder Implications

12.1 There are no specific crime and disorder implications arising from this report.

13. Equalities Implications

- 13.1 An equalities analysis was completed on the CCG's strategic priorities and objectives and has been reviewed to consider the updates to the strategy. Both analyses have concluded that the strategy will contribute to reducing inequalities, and highlights potential positive outcomes for disadvantaged groups and for those that share protected characteristics.
- 13.2 An early Equality Impact Assessment was carried out in 2014 to ensure that the final south east London strategy reflects the diverse needs of local people and that we meet our obligations under the

Equalities Act 2010 to identify and address any adverse impacts on groups with 'protected characteristics'. An action plan was developed following the Equality Impact Assessment and is now being implemented. A further Equality Impact Assessment will be carried out between March and May 2015. The programme is committed to ensuring that the strategy is proactively informed by equality considerations and the need to ensure that the needs of all groups and any potential adverse impacts on groups with protected characteristics are fully taken into account.

14. Environmental Implications

14.1 There are no environmental implications arising from this report.

Background Documents

Our Healthier South East London www.ourhealthiersel.nhs.uk

The NHS Five Year Forward View:

http://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf

Better Health for London:

http://www.londonhealthcommission.org.uk/better-health-for-london/

NHS England Strategic and Operational Planning 2014-19, 'Everyone Counts: Planning for Patients 2014/15-2018/19' http://www.england.nhs.uk/ourwork/sop/

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