

**REPORT TO MERTON CLINICAL COMMISSIONING GROUP
GOVERNING BODY PART 1**

Date of Meeting: 24 September 2015

Agenda No: 8.2

Attachment: 14

<p>Title of Document: South West London Collaborative Commissioning programme progress update to Governing Body</p>	<p>Purpose of Report: Progress update</p>
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<p>Executive Summary:</p> <p>In February 2014 the six South West London NHS Clinical Commissioning Groups (CCGs) – Croydon, Kingston, Merton, Richmond, Sutton and Wandsworth – and the health commissioners from NHS England (London) agreed to work together with hospitals, mental health, primary and community care service, local councils, local people and patients on a five year plan to improve health services for everyone in South West London. The partnership between the CCGs and NHS England is called the South West London Commissioning Collaborative (SWLCC). This paper sets out the case for change and an update on the current status of the programme.</p>	
<p>Key sections for particular note (paragraph/page), areas of concern etc:</p> <p>NA</p>	
<p>Recommendation(s):</p> <p>NA</p>	
<p>Committees which have previously discussed/agreed the report:</p> <p>NA</p>	

<p>Financial Implications:</p> <p>NA</p>
<p>Implications for CCG Governing Body: CCG Governing body to note progress update and role of Merton CCG in working collaboratively to respond to challenges outlined in the paper and deliver the five year strategy</p>
<p>How has the Patient voice been considered in development of this paper:</p> <p>Progress update only. Patients and public engaged through our patient and public engagement steering group. Engagement plan set out in paper.</p>
<p>Other Implications: (including patient and public involvement/Legal/Governance/Risk/Diversity/ Staffing)</p>
<p>Equality Assessment:</p> <p>NA</p>
<p>Information Privacy Issues:</p> <p>NA</p>
<p>Communication Plan: (including any implications under the Freedom of Information Act or NHS Constitution) Engagement set out in the paper</p>

South West London Collaborative Commissioning Governing Body Update Part 1

September 2015

Scale of the challenge in South West London

- South West London's health economy is under increasing strain
- None of the four acute Trusts is currently meeting all London Quality Standards
- Demand is increasing. e.g. non elective admissions have increased by 14.5% between 2011/12 and 2014/15 – activity increase from continuing on this trajectory for the next 3 years would be the equivalent of around 7 extra wards worth of patients
- Significant financial challenge to address now, and position deteriorating:

	2015/16	2018/19
CCGs	~£23m	~£209m
Acute providers	~£80m	~£361m

Scale of the challenge in South West London - CCGs

Summary of SWL CCG financial projections for 2015/16

£ 000	Croydon	Kingston	Merton	Richmond	Sutton	Wandsworth	Total SWL
Surplus/(Deficit) Cumulative	-44,806	2,179	2,366	3,518	2,339	4,210	-30,194
Surplus/(Deficit) - business rules basis %	-10.74%	1.00%	1.00%	1.52%	1.00%	1.02%	-1.72%
Surplus/(Deficit) In-Year Movement	-11,856	-333	-301	-4,950	-304	-5,453	-23,197

- The numbers show an in year movement not a projected deficit
- For 15/16 each CCG is expected to meet its plan
- One of the six CCGs is forecasting a deficit which is part of its plan.
- CCGs are spending more money in 15/16 than their allocation by using funds from previous years – this means that CCGs are spending £23m more than the funds available across SWL

Scale of the challenge in South West London – Acute Providers

Summary of SWL Acute provider financial projections 2015/16

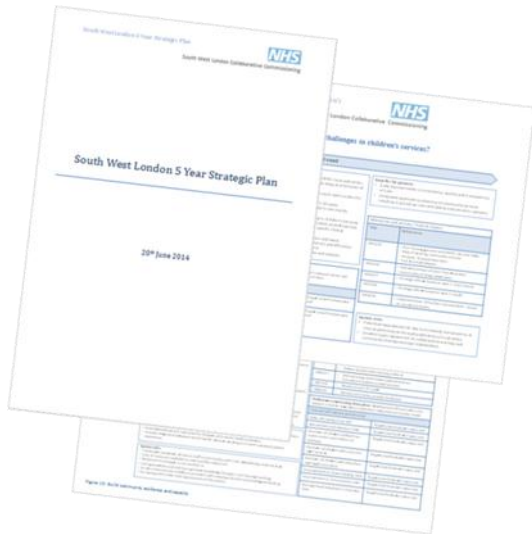
Surplus/deficit (£m)	2015/16
Trust projected deficits as per Board papers	
Croydon	-25
Epsom & St Helier	0
Kingston	-8.8
St George's	-46.2
Total	-80

Scale of the challenge in South West London

- Transformative change at scale & political support will be needed to solve these complex strategic financial and quality problems
- A key part of the transformation is the need to shift activity out of hospital in order to:
 - Improve services for patients
 - Make capacity available for service transformation
 - Deliver financial sustainability

SWLCC Five Year Strategy

- Five Year Strategy published in June 2014
- Four aims:
 - Raise safety & quality standards
 - Address the financial gap
 - Address the workforce gap
 - Confront the rising demand for healthcare



Issues Paper



- Case for change further developed in Issues Paper
- Published in June 2015
- Expands on aims in the strategy & sets out five reasons why the local NHS needs to change the way it works:
 - **Quality of Care** - All patients should get the best possible care, but the quality and safety of all our health services varies enormously and depends on where and when you are treated. This costs lives.
 - **Changes in what patients need** - People getting older and sicker - demand rising rapidly. Need much more care to be outside hospital.
 - **Financial & workforce challenges** - We do not have the money or staff to go on as we are, despite increased funding. There is a national shortage of clinicians in some key areas and we need to transform workforce.
 - **The need for joined up services** - Patients need services that work together and across professional boundaries.
 - **We can provide better care with the same budget** - compelling evidence that if we spend our money differently, we can get services that are both better and more affordable.

Issues Paper



- Engagement programme underway to discuss issues with patients and the public, asking questions including:
 - What is working well in local health services now that we can build on? What do we need to improve?
 - What is your view on the issues set out in the paper? What would make them work or stop them from working?
 - What support do you and your family need from the different health services listed in the paper?
- Other questions are set out in the issues paper
- Available on the SWLCC website: www.swlccgs.nhs.uk or by emailing swlccgcomms@swlondon.nhs.uk

Engagement Plan

Speaking at local meetings
(e.g. local residents groups, campaigning organisations, faith groups, BME organisations, Healthwatch, CVS)

“Deliberative Events” in each borough for invited audience of voluntary and community sectors and representative sample of local population

Focus Groups to reach different audiences & get in depth views (some groups identified through independent Equalities Analysis currently underway)

Bi monthly briefings to CCG Governing Bodies meeting in public and internal communication with providers and Local Authority staff

Updates to local Overview & Scrutiny Committees & involvement of Health & Wellbeing Boards

Briefing local MPs & Trade Unions, and national bodies like Royal Colleges

Extensive **online & social media** engagement, including a monthly newsletter

Direct involvement of **patients and public** in clinical groups and through **Patient & Public Engagement Steering Group**

Collating and responding to all **feedback**

Strategy to implementation - key design principles

- SWLCC is developing and now delivering an implementation plan for the five year strategy
- In addition to the aims set out in the strategy, the following principles have shaped the development of the SWLCC plan to date:
 - Clinical leadership
 - Transformation of OOH as an essential element of change
 - Delivering a sustainable provider and commissioner landscape
 - Working at scale and delivering a whole system response to the challenge
 - Role of providers in working alongside commissioners to design and deliver change
 - Patient and public engagement
- These will be reviewed and refined as the programme moves into its next phase of work

Progress to date - highlights

- Eight “Clinical Design Groups” working to define principles and standards and develop service models/care pathways
- Identifying priorities for investment in current year to improve quality and save costs such as:
 - Patients online
 - Crisis response
 - Shared care records
 - Increasing volume of patients seen in ambulatory setting
- IM&T strategy being developed & workforce needs assessment project underway
- Working closely with Acute and Out of Hospital providers to develop a way forward for providers to put the SWL health economy on a more clinically & financially sustainable footing
- Local initiatives underway to deliver OOH activity shifts – particularly around NEL & OP opportunities
- Providers working on collaboration to deliver better and more coordinated health care and reduce the funding gap – e.g. reducing NEL, sharing back office, clinical networking
- Exploring what service reconfiguration should take place to improve quality and efficiency

The Clinical Design Groups

- Cancer
- Children & Young People
- Maternity
- Mental Health
- Out of Hospital
- Planned Care
- Transforming Primary Care
- Urgent & Emergency Care

National transformation programmes – Success Regime

- South West London being considered for the “Success Regime”
- Expect a decision in late September
- Have requested:
 - NHS England, Monitor, TDA and CQC to provide whole system support and ownership at a senior level for addressing the complex issues in South West London
 - Advice and support in developing and then breaking through political and cultural barriers to implement difficult service changes at both a national and local level
 - Support to resolve regulatory, contractual and commissioning obstacles and systemic issues
 - Sharing good practice and advice in respect of the application of new models of care
 - Funding for new initiatives

National transformation programmes – Vanguards

- Acute providers have also been shortlisted for Vanguard programme in the New Models of Acute Care category
- Proposal is to operate as a single virtual organisation, developing clinical and non-clinical networks between hospitals & partnerships with GP federations, other providers (including the 'out of hospital'/community sector), commissioners and the third sector
- Expect decision mid September

Next Steps

- Collaborative commissioning intentions being drafted for sharing with providers in October
- Funding for initiatives/pilots being secured for implementation in the current financial year
- Out of hospital activity shift level of ambition and targets being agreed with individual CCGs, and implementation plans to be developed during September
- Development of service models and care pathways to be continued, detailed clinical dependencies to be agreed, & scenarios for any reconfiguration to be taken forward and developed by commissioners with a view to going to public consultation in 2016 should this be required
- Provider initiatives to reduce the funding gap already underway
- Patient and public engagement increasing from September & continuing through programme
- Review plan in light of Success Regime decision in late September

Updates

- You can keep in touch with developments at www.swlccgs.nhs.uk or follow **@swlccgs** on Twitter