

Priorities and Challenges for 2014/15

**Adam Doyle, Director of Commissioning and
Planning**

03 September 2014

This report gives an overview of the work of Merton Clinical Commissioning Group, and summarises the priorities and challenges for 2014/15



right care
right place
right time
right outcome

Introduction

Merton Clinical Commissioning Group is a clinically-led membership organisation made up of twenty five general practice teams across the borough of Merton, grouped into three localities supported by central teams covering commissioning, quality and finance. Each Locality is led by a Locality Clinical Lead. The Locality Clinical Leads are also an integral part of the Executive Management Team to ensure that all decisions have clinical review, input and challenge. Every member practice is represented in a locality by their chosen general practice lead.

The CCG is responsible for commissioning general health services for the population of Merton, including acute, community and mental health services. Primary care, specialist commissioning, health visiting and some national programmes are now commissioned by NHS England. Public health commissioning has been transferred to London Borough of Merton.

Operating Plan and Commissioning Intentions 2014/16

The first Merton Clinical Commissioning Group two year Operating Plan and Commissioning Intentions was published on 1 April 2014. The plan forms part of our five year Strategic Plan which is being developed with other commissioners including local Clinical Commissioning Groups, NHS England and the local authority. The plan has been developed in the context of NHS Planning Guidance and Operating Framework published in December 2014.

The plan outlines the next 24 months of commissioning across Merton, describing our aims and ambitions and how we are working across the health system to improve quality and drive efficiency. The Operating Plan begins by articulating the next phase of changes required within the Merton healthcare system and how the commitments made to implement our vision are being translated into programmes of work.

The operating plan describes our major programmes of work, highlighting 'what' we are doing and 'how' we plan to do it amidst a national context of profound financial challenge. Being clear about our financial position, our underlying activity assumptions and risks allows us to demonstrate the level of ambition we are aspiring to when planning service change, redesign and increased efficiency savings for the Merton healthcare system.

We have worked with our local providers to outline the main elements of this plan and ensure we are strategically aligned. Additionally we have held a number of system wide meetings involving the public, primary care, acute and community providers, social care and the London Ambulance Service to discuss and align commissioning intentions and to meet the need identified in the JSNA.

The Operating Plan will be delivered by the CCG in partnership with the local authority and public health (London Borough of Merton), with support from the South London Commissioning Support Unit and the voluntary sector.



Challenges

The Operating Plan was developed in the context of the national NHS “Call to Action”, which encouraged an open and honest debate about the challenges the NHS is facing.

We know that the population of our borough is growing. We also know that people are living longer than they have in the past. Meanwhile medical technology continues to advance as new or improved treatments and medicines are made available to patients. This means that there is more demand than ever on NHS services, and this demand is continuing to increase. At the same time we know that the funds available to spend on health services will not be able to keep pace with this rise in demand.

In order to continue to have a high quality health service in line with the London Quality Standards we must make significant changes over the next few years. We will do this by working with patients to develop more innovative ways of providing some services outside of hospitals and act to ensure the services patients use are better co-ordinated.

Locally the pressures include:

- An ageing population, with the number of residents aged 85 and over predicted to rise by 41% by 2021
- As a result of the ageing population, the number of people suffering from dementia, diabetes and other long-term conditions is increasing
- There are also expected future pressures on health care services from increasing numbers of young people (up by 20% by 2021) and the health risks within this group, particularly obesity and smoking
- Difference in health outcomes between the East and the West of the borough

We know there are specific underlying challenges in our local health economy that we must address over the next two years and into the future and in particular the requirement to deliver a robust Out of Hospital Strategy including:

- Managing increased demand for services of our frail older population, set to double by 2018
- Addressing the financial challenge and potential quality and safety risks in the future
- Building robust and effective community services to bring care closer to home safely and effectively
- Developing a configuration of acute services with an overall reduced ‘footprint’ ensuring sustainability and affordability
- Continuing movement towards greater service integration and building high quality community services
- Ensuring greater patient and public engagement in all our work
- Reducing variation of practice across all providers
- Securing and commissioning better communication between services and clinicians
- Ensuring equity of access and continuity of care for all patients but particularly those with complex and long-term conditions
- Securing both quality and value from existing services and, where this is not happening, addressing this through service improvement or decommissioning
- Commissioning for outcomes in a number of priority areas
- Ensuring that we use technology and IT as accelerators of change



Priorities

The Operating Plan describes the priorities and actions we will deliver during 2014/2016 and outlines the platform for delivery of continuous commissioning improvement in subsequent years. Six priority delivery areas are described in more detail in the attached document. These are:

- Older and Vulnerable Adults
- Mental Health
- Children and Maternity Services
- Keeping Healthy and Well
- Early Detection and Management
- Urgent Care

Two further priorities are also described in the document:

- Better Care Fund – this work has now been integrated with the Older and Vulnerable Adults priority as there were significant areas of overlap
- Better Healthcare Closer to Home, including the new Nelson Local Care Centre which is due to open in April 2015, and developing the Strategic Business Case for the development of services in Mitcham

During 2014/15 the CCG will also begin the re-procurement of community health services alongside London Borough of Merton (Public Health), with the timescale for completion of this work being April 2016.

The Operating Plan is an iterative document subject to active review as national and local policy emerges and areas of delegated accountability are assigned. Since the publication of the plan some of the detailed service development projects have changed, and an overview of the latest version of the overall programme is summarised in the attached presentation. We are also using our new methodology to ensure that we have further rigor in our approach to commissioning (appendix A)

Progress

Since the publication of the Operating Plan the programme has been fully established. A delivery structure has been implemented with a Delivery Team for each priority area led by the relevant Clinical Director(s) and including Commissioning Managers and wider representation from within the CCG, Public Health and, where appropriate, externally. Reporting via the CCG's Executive Management Team and Clinical Reference Group has been established.

As this point we are four months into the two-year plan, and delivery is still in its early stages. However significant areas of progress have been made and are listed below.

- Better Healthcare Closer to Home (Nelson). The Nelson development is progressing well and remains on schedule for the doors to open to the public in spring 2015. Representatives of both the CCG and LB Merton were present at the "topping out" ceremony on 8 July. The procurement process for the appointment of a provider for specialist consultation and diagnostic services is still ongoing and will conclude by mid-August, with the final recommendation for the preferred partner being presented to the September



Governing Body. The main focus for the project is now the planning and implementation of the commissioning and mobilisation programme.

- Better Healthcare Closer to Home (Mitcham). The Mitcham project is in its early stages. An initial workshop has been held with the Project Board to explain the process for identifying the preferred development site and to establish some design principles within which the project team will work. A public engagement plan has been developed, in conjunction with Healthwatch Merton, and will be presented to the August Project Board for sign off. We await formal permission from NHS England to proceed to the business case stage but anticipate that this will be forthcoming in August.
- Integration and Better Care Fund. Both London Borough of Merton Proactive Teams and Sutton and Merton Community Services (SMCS) Community teams are now working in the three primary care localities and there is a clear vision of how the environment is expected to operate both at 1 October 2014 and 1 April 2015. A performance metrics framework has been drafted and the first two months data has been collected, although the framework will continue to mature throughout the year so that, by 1 April 2015, we will be assured of a strong and meaningful performance measurement framework for integrated services. We are continuing to explore the implications for both workforce and data sharing across Merton and more widely in South West London (SWL), as any system changes will have a

necessary impact on organisations beyond Merton's boundaries. We are

undertaking a wide-ranging engagement exercise with our patients and service users during August and September to ensure we have co-produced our new operational environment with the patient/service user at the centre of all processes.

- IAPT. As part of the Operating Plan we are procuring a new model for our improving access to psychological therapies services (IAPT). This is now progressing swiftly with the service specification due to be agreed in mid-August. Stakeholder engagement has been central to the process of developing the new specification, including an event attended by patients, voluntary sector groups and the public held on 9 July.

Progress will be reported monthly to the CCG's Executive Management Team.

Adam Doyle
Director of Commissioning and Planning



Appendix A – MCCG Commissioning Cycle

