

Draft Transformation Strategy 2014 - 2019

BARNET CLINICAL COMMISSIONING GROUP

Barnet CCG - Our Transformation Strategy

1. Introduction

The CCG strategy is intended to provide a clear and distinctive vision and direction of travel for the CCG whilst providing a framework which is flexible enough to encompass new local and national priorities. It is a transformation strategy signalling a change in how we develop and deliver our agenda.

It is intended to be simple and accessible to the GP membership and stakeholders to ensure 'buy-in' and understanding. It will also provide a clear picture for the public and patients of the role of the CCG allowing them to engage in developing health care and wellbeing in Barnet.

It also provides a framework of clear achievable transformation objectives for the five years, allowing the board to agree milestones, which drive the detailed rolling 2 year delivery plans. This will enable the Board to respond to the changing external environment prioritising or deferring objectives where necessary.

2. Issues Impacting on health and wellbeing in Barnet

In developing our transformation strategy we have considered the following issues and the impact they will have on health and healthcare in Barnet over the next 5-10 years.

- Deprivation is lower than average, but 18,195 children are classified as living in poverty
- Very significant population growth – 45,000 over 5 years, fastest growth is children and elderly, 23% in 5 to 9 year olds 18% 65 to 69, and 17% in 90 plus these groups are the highest users of health care resources.
- Overall life expectancy in Barnet for men & women are higher than England average; yet, in Barnet's most deprived areas such as Burnt Oak, life expectancy is lower than the England average.
- Mortality rates have fallen over the past 10yrs
- Over 17,000 (5.7% of the adult population) people aged 17 years and older diagnosed with diabetes in Barnet. With an estimated prevalence of 7.9%, this means that there are around 6,000 people with undiagnosed diabetes in Barnet.
- Barnet people with diabetes, they are 62.1% more likely to have a heart attack and 23.5% more likely to have a stroke.
- Adult obesity rates are worse than the England average
- Approx. 12,600 adults with a serious disability & a further 29,500 with a moderate disability live in Barnet this is set to rise over the next 10 years.
- In Mental Health, Dementia is expected to rise by 26% in the next 10yrs & the number of people claiming Incapacity Benefit due to mental health has increased over the past 10 years
- Whilst Barnet smoking population is lower than London average, smokers that are pregnant in Barnet are higher than the London average.

- For Barnet, the 1 year survival rate is low for Cancer, there is an increase in trend of incidences of breast cancer and a rise in prostate cancer
- Prevalence figures for COPD & Asthma are in line with London average, yet deaths from COPD is highest amongst Barnet women. For CHD projected to rise by 18% & 16% more people are predicted to suffer a stroke by 2020. Barnet is also the 2nd highest number of excess deaths attributable to diabetes across England
- Barnet has a particularly challenging financial challenge with an inherited debt of £34.1m and the Revenue Resource Limits (RRL) announced for 2014/15 and 2015/16 continue to disadvantage Barnet CCG which remains at 4.7% (£20m) below its 'fair share' target.
- New technologies and drugs are increasing life expectancy and increasing high cost interventions

3. Our Transformation Strategy



Our Values

- Treat all with compassion, dignity and respect
- Person centred care that supports people to be as healthy as they can be
- Work in partnership and collaborate with all
- Reduce dependency and promote self-care

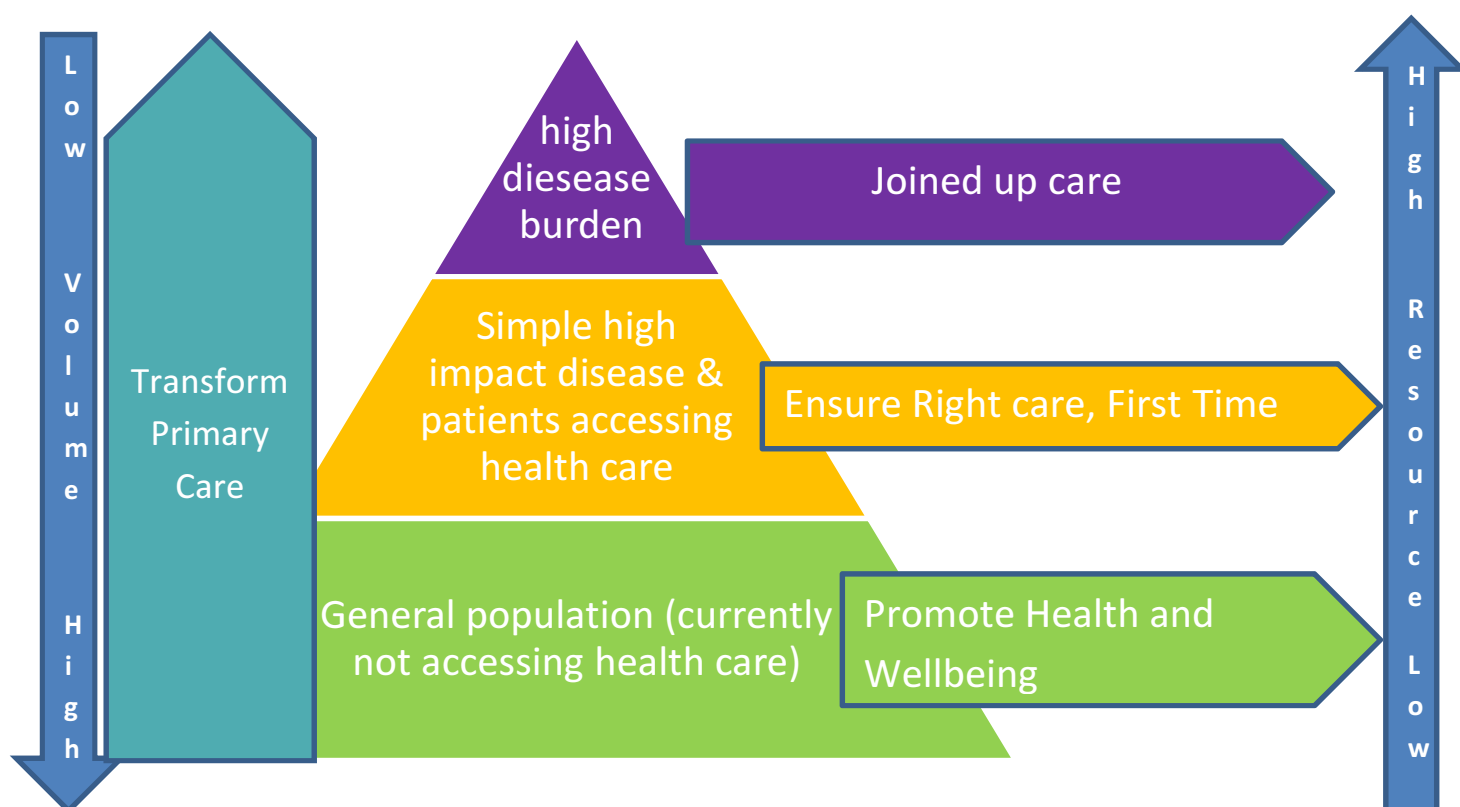
3.1 Developing our Strategic Goals

The strategic goals drive our agenda in meeting the health care challenges in Barnet:

- from preventative strategies for the population as a whole,
- through ensuring good services and access for the population with low health needs or simple high impact disease,
- to ensuring the right support for our patients with complex co-morbidities or a high disease burden.

They also focus on the organisational development that needs to take place to engage our stakeholders, strengthen our governance and financial management to deliver our challenging agenda.

The figure below shows how our goals support the delivery of a comprehensive health system in Barnet and how primary care has a critical role in supporting health and wellbeing across all our residents whatever their health status.



3.2 Our Transformation Objectives

The transformation objectives describe more fully the actions we need to take to deliver our goals.

- Goal 1 Promote health and wellbeing - enabling Barnet's population to be as healthy as they can be and make informed choices about their health and lifestyle.**
- Working with the London Borough of Barnet implement the Barnet Health & Well-Being Strategy that aims to improve health and reduce inequalities
 - Develop our knowledge of the health and social care challenges of the population of Barnet and use it to inform all our commissioning intentions and programmes of change.
 - Ensure that the population of Barnet is fully empowered in making decisions about their own care and has good information to make healthy choices and understand how to access services
 - Promote self-care providing the public with the tools to increase the self-management of their conditions reducing dependency on health services for the management of minor ailments.
- Goal 2 Transform Primary Care – working with GP members and the NHSE support the development of the role of primary care and primary care networks in supporting accessible, seamless and proactive healthcare in Barnet**
- Utilise information from the 360° feedback from the GP membership to develop how we better engage their knowledge and expertise to support the CCG and Board members in transforming health and health care in Barnet.
 - Engage with GPs and support them to ensure comprehensive, accessible, patient-centred, coordinated care with GP-patient continuity across Barnet
 - Support primary care to develop proactive and innovative GP networks to enhance services to provide more care closer to home and support our integrated care model.
 - Develop an IMT Strategy and plan to support the delivery of joined up care and pathway management.
- Goal 3 Ensure Right Care First time - working with patients, the public, GPs, the London Borough of Barnet, service providers and other stakeholders we will develop new service models and pathways to meet the health and social care needs of our population.**
- Redesign clinical pathways and the provision of health services through delivery of a whole system Transformation programme to redesign clinical pathways and improve patient outcomes.
 - Manage the local health system to commission urgent care access for patients when they need it, to the appropriate service and ensure the system is resilient to surges in demand.

- Support NHS England in developing the arrangements for specialised commissioning and care

Goal 4 Develop local and joined up care - working with primary care, the London Borough of Barnet and other health and social care partners we will streamline and join up complex care and support for the frail and elderly and those with complex long term conditions, with care provided at home or as close to home as possible.

- Implement a fully integrated care health and social care system inclusive of primary care support, community services and out of hospital care utilising the opportunities provided by the Better Care Fund
- Working with the London Borough of Barnet commission children's services that support early intervention at all stages of the pathway to promote health and emotional resilience.
- Review the needs, models and gaps in Mental Health services and commission an outcomes based service model that meets user's needs

We have identified the following strategic enablers to support delivery of our plan.

Enabler 1 Co-design with public, and partners – engaging meaningfully with the public, patients, providers and stakeholders in the co-design of health and social care models and services.

- Establish a range of ways in which local people the local authority, health watch, Community Barnet and other stakeholders can get involved in influencing the redesign services so that they meet user needs and services are used because they provide the easiest access, best experience and best outcomes.
- Improve how health social and voluntary services work together with the public to plan and develop joined up and innovative solutions
- Engage providers of health and social care to contribute their knowledge and skills in supporting the redesign of services to ensure we understand the challenges they face to facilitate whole system change.

Enabler 2 Ensure the quality of services - assure and monitor the quality of services ensure that core standards are met and that they are safe and effective and provide high quality patient and carer experience.

- Ensure that the systems and process are in place to promote the wellbeing of Children and vulnerable adults
- Work with patients and stakeholders to understand the issues impacting on the quality of care to ensure core standards are delivered.
- Ensure the quality, safety and effectiveness of care is maintained and enhanced, embedding the key Francis/Berwick recommendations.

Enabler 3 Innovate with Technology – use technology to enhance patient care and independence, drive clinical efficiency and value for money

- Develop a comprehensive IMT strategy to support pathway management, integrated care and clinical navigation and support
- Develop our business systems to improve our ability to drive efficiency and value for money
- Utilise new technologies such as telehealth, and telecare to enable patients to live more independently on the community
- Exploit modern media tools and networks to engage proactively with the public patients and key stakeholders

Enabler 4 Spend public money wisely - maximise the health impact of the money we spend ensuring robust and effective procurement and contract management.

- Ensure we reduce costs to enable us to achieve our priorities whilst returning to financial balance.
- Improve the commissioning of services by the CCG, driving up quality, value for money and outcomes and changing how contracts are organised, measured and reimbursed to improve health and wellbeing
- Explore with the London Borough of Barnet potential opportunities to work in partnership to improve whole system value in commissioning support, pooling and managing financial risk.
- Establish ourselves as the health system leader for Barnet and work across the 5 CCGs to support a resilient health system in North Central London.

4. Delivering Our Transformation Strategy

The CCG is reviewing the planning, performance management processes and the approach to assurance and governance to ensure that the organisation is structured to deliver the strategy and transform health and health care in Barnet.

The CCG Goals and Enablers

Our strategic goals and enablers are very high level descriptors of what the CCG must do to achieve its ambitions and meet its statutory obligations. They are critical in helping us communicate and frame our transformation strategy – they are the ones which will be used for communicating with general stakeholders – with some living examples of what they mean. These goals will endure beyond this five year strategy period.

Transformation Objectives

Each strategic goal and enabler is supported by a number of transformational objectives which articulate the change programmes we will to deliver. They will have measurable outcomes which will allow the CCG Board to monitor the progress it is making in delivering the strategy and progress will be reported to the Board in October and April each year. We will undertake a mid-term review of

then 2016/17 to assess progress and may revise the transformation objectives if they have been achieved or are no longer relevant and there is a new challenge.

Delivery Plan Objectives

A Delivery Plan will be produced annually with very specific objectives and plans to deliver the transformation and operational objectives. This will be a two year rolling plan driven by the CCG transformation strategy and encompassing the requirements of the annual national planning guidance. It is intended that the process is internally driven and that we move away from an annual cycle with our objectives and QIPP savings plans running seamlessly across financial years where appropriate. The Delivery plan will encompass the Boards annual transformation priorities, the agreed QIPP savings schemes and national and operational imperatives which we feel are important to deliver our visions and statutory obligations.

Measurable Outcomes

To enable the CCG to monitor the delivery of the strategy each transformation objective and delivery plan objective will have a measurable outcome and completion date. The Board will monitor delivery of these objectives through a refined performance and governance structure.

5. Communicating our Strategy

It is intended that the CCG strategy is actively communicated to the public, patients, the CCG membership and staff and all stakeholders. If we are to deliver the level of transformation required it will be imperative that the drivers influencing our plans and our priorities are communicated and understood. We plan to develop a suite of presentations for the different groups and undertake a wide engagement exercise in the delivery of the plans. Our strategy can only be achieved with the support and involvement of stakeholders and we feel this is so important that we have made better engagement and co-design one of our strategic transformation goals. Communicating our strategy will be a first step in transforming our relationships with all stakeholders. A communications plan to support the sharing our strategy is under development.