North Central London health economy is a system comprised of partners from Barnet CCG, Camden CCG, Enfield CCG, Haringey CCG, and Islington CCG who have come together to agree, refine and implement the following strategic intent: To drive improvement in the delivery of high quality, evidence-based and compassionate services, defined and measured by outcomes not process, to the population of north-central London.

System Objective One

Reducing the number of years of life lost by the people of England from treatable conditions (e.g. including cancer, stroke, heart disease, respiratory disease, liver disease);

System Objective Two Improving the health related quality of life of the 15 million+ people with one or more long-term conditions;

System Objective Three

Reducing the amount of time people spend avoidably in hospital through better and more integrated care in the community, outside of hospital;

System Objective Four

Increasing the proportion of older people living independently at home following discharge from hospital;

System Objective Five Reducing the proportion of people reporting a very poor experience of inpatient care;

System Objective Six Reducing the proportion of people reporting a very poor experience of primary care;

System Objective Seven Making significant progress towards eliminating avoidable deaths in our hospitals.

Delivered through Commissioning for Value Based Outcomes

CCGs in north-central London are working collaboratively to move to a Value Based Commissioning approach. This is beginning with work on frail elderly, mental health and diabetes and will be expanded to cover more areas in the future.

We are individually focussing on integrated care, with a focus on populations. This includes:

- Improved management and outcomes for children and young people.
- Improvement in management of care in the community.
- Maximising the time spent at home during and after treatment.
- Promoting collaboration and communication between patients, staff and carers.
- Better alignment of physical and mental health services to improve outcomes for vulnerable groups experiencing high levels of mortality or ill-health.
- Developing collaborative packages with other CCGs. Models and priorities vary by CCG and the specific detail for each will be captured in the local 5 year strategy.

Each of the CCGs plan to work with all providers to improve outcomes for patients with Long Term Conditions, this will include:

- Improving recorded prevalence of Long Term Conditions.
- Primary and Secondary Prevention.
- Pathways redesign.

Models and priorities vary by CCG and the specific detail for each will be captured in the local 5 year strategy.

Primary Care

We have a focus on developing Primary Care through our collaborative investment budget. All 5 CCGs are committed to working closely with NHS England to improve quality and access to primary care. North Central London CCGs have in place Primary Care Strategies, with dedicated resource for implementation. Key goals include:

- Primary care strategy implementation.
- Development of primary care networks.
- Demand management within primary care.
- Improvement of patient experience.
- Improvement of capacity within primary care.
- Increasing Primary and Secondary Prevention.

Priorities vary by CCG and the specific detail for each will be captured in the local 5 year strategy.

Delivered through Integration Transformation Fund (ITF)

All 5 CCGs are progressing plans for the Integration Transformation Fund in collaboration with colleagues from the respective London Boroughs for agreement by CCG Governing Bodies and Health and Wellbeing Boards.

Our collaborative arrangements are overseen by the North London Clinical Commissioning Committee, comprised of CCG Chairs, COs and with NHS England in attendance.

- we collaborate on financial risk share, Primary Care, BEH Clinical Strategy, Whittington Transformation, Royal Free Acquisition and Strategic and Operational Planning.
- Development of plans is via a cross CCG Planning and Contracting Organisational Group.
- All plans approved by each CCG Governing Body and Health and Wellbeing Board.
- Collaboration embedded through Lead Commissioner arrangements.

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Measured using the following success criteria

- Success criteria to be developed in line with the work on Value Based Commissioning focussed on improved health outcomes.
- All organisations within the health economy perform within financial plan each year up to and including 18/19, through local risk share arrangements ensuring a better and sustainable legacy by 18/19, recognising different starting positions across the 5 CCGs.
- Delivery of the NHS Mandate and NHS Constitution standards for all patients.
- Delivery of the system objectives (detail to be agreed once baselines are issued by NHS England on Friday 13th Dec).
- No provider or commissioner under enhanced regulatory scrutiny due to performance concerns.
- Incremental implementation of Value Based Commissioning through to 18/19.

High level risks to be mitigated

We manage risk through our collaboration arrangements including the financial risk share, lead commissioning arrangements and our Value Based Commissioning project.