Central London Community Healthcare NHS Trust

Barnet ■ Hammersmith and Fulham ■ Kensington and Chelsea ■ Westminster

CLCH: The next five years

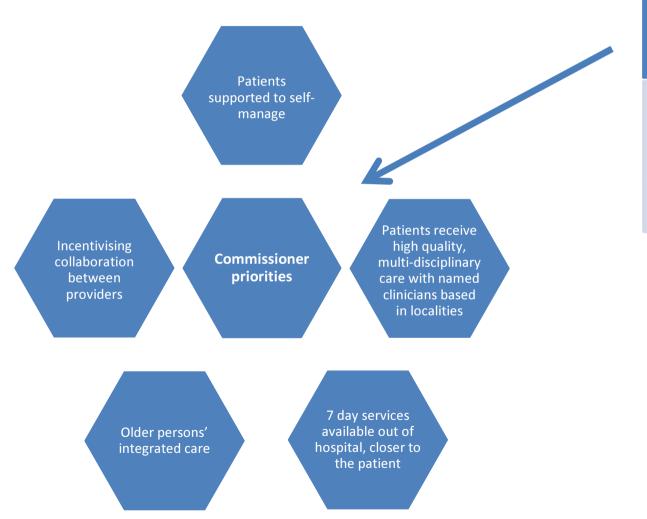




Our Vision:

To lead out-of-hospital community healthcare

Commissioners' priorities



National context/ drivers

- Francis Report
- •NHS Five Year Forward View
- King's Fund: Community Services how they can transform care; Making our health and social care system fit for an ageing population; Managing quality in community health services

CLCH has five strategic priorities

Quality

Quality strategy - Patient Safety, Engagement and Effectiveness:

- Patient Safety Thermometer: reducing pressure ulcers; falls; UTIs; VTEs; medicine optimisation
- Patient engagement: Patient Quality Group; CBU engagement plans; PREMS; PROMS and Friends & Family Test; deliberative events in each borough
- Clinical effectiveness:
- 3 outcomes per service (60% achieved to date).
 Measurable outcomes that drive the focus on continuous improvement, supported by an in-house programme
- Minimum staffing levels set for bedded units and being developed for community teams
- QGF assessment (3) and CQC inspection provide external assurance/on-going monitoring through audit and performance management
- Positive track record in CQUIN delivery

Transformation/ Integration

- Whole systems integrated care:
- Care navigators
- Virtual ward
- Rapid response
- Early supported discharge (PACE)
- 3 x early adopters and CIS: integrated care planning and case management in partnerships with primary, social, mental and acute care
- Shared IMT SystmOne and Telehealth
- Service re-design in condition specialities:
 COPD; diabetes; congestive heart failure
- Going forward, further development in wider prevention and selfmanagement

Value for Money

- > 15/16: 6th year of 4-6% annual QIPP efficiencies
- Operational service efficiencies:
- estate rationalisation; mobile working; workforce re-design
 Corporate transformation:
- o 30% reduced costs achieved by March'16
- o strategic partnership
- IMT strategy

Effective Leadership/ Governance

- Service specific partnerships with primary, social, mental and acute care in integrated pathways, e.g. COPD; diabetes; PACE
- Internal: devolved and empowered CBUs (x 24) in four divisions
- External: early adopters and CIS partnership governance to evolve with new models of care in 'The Way Forward'
- On-going Board development (positive BGAF assessment and TDA A1 rating)
- Establishment of Council of Governors with representation from patients, the community, staff and CCGs

Growth

- Economies of scale, expertise and sustainability
- Corporate efficiencies
- Barnet: COPD and PACE developments
- Mitigating downsides

How FT will support us as an effective local partner

- FT is a not-for-profit community interest company accountable to the local community (Council of Governors)
- On-going Board commitment to integrated partnership across the system
- Real powers to gain and retain resources (borrowing, estates and surpluses), and invest these in local service developments
- Real freedom to be more locally focussed and more agile in response to commissioner priorities (end of TDA accountability and demanding, on-going assessment processes)
- FT is an accreditation/system assurance
 - A more secure future
 - Recruitment and retention of more capable staff
 - Leadership for quality improvement
 - Assists in winning new business
 - Added assurance to partners of future sustainability
 - More legal powers to participate in joint ventures and partnerships