

Commissioning for Value (Right Care)

Agenda item 15, Paper 11	
Summariser:	Steve Hams, Interim Director of Clinical Performance and Delivery
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Executive Lead(s):	Steve Hams, Interim Director of Clinical Performance and Delivery
Relevant Committees or forums that have already reviewed this issue:	Clinical Cabinet – 14 July 2016
Action required:	For information
Attached:	N/A
CCG Strategic objectives relevant to this paper:	<ul style="list-style-type: none"> Integration Elective care Urgent care End of life care Children and maternity Mental health and learning disability Quality and Performance Financial balance
Risk	No known risks currently associated with this work
Compliance observations:	Finance: N/A
	Engagement: A high level review of a number of the Right Care Focus packs took place at the 'Fill the Gap' workshop held on 26 May 2016. The workshop was attended by a number of GPs from across the CCG in addition to CCG staff. A future engagement plan will be developed as an one of the outputs from the Focus Groups which will be set up as part of the 'next steps'

	Quality impact: It is likely that a number of QIAs will be required to take identified opportunities forward
	Equality impact: It is likely that a number of EIAs will be required to take identified opportunities forward
	Privacy impact: It is likely that a number of PIAs will be required to take identified opportunities forward
	Legal: Nil

EXECUTIVE SUMMARY

This paper is for information and is in 2 parts. The first part gives an overview of the Right Care Programme and the second part describes the work which Surrey Downs CCG has done to date to review the Right Care Focus Packs and building on that work to date, how it intends to further explore and exploit the opportunities which are highlighted in the Right Care Focus packs

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Right Care Briefing for Clinical Cabinet

1. Overview of What Right Care Is

The genesis of the Right Care programme lies in the original Quality, Improvement, Prevention and Productivity (QIPP) programme initiated by the Department of Health in 2009. Right Care was one of the original 13 national programmes and when the national QIPP programme was wound up Right Care was asked to ensure that the core programmes of Right Care continue with new hosting arrangements with NHS England and Public Health England.

The primary objective for the NHS Right Care programme is to maximise value, which is defined as:

- the value that the patient derives from their own care and treatment, the personalisation of difficult decisions is optimised by patient decision aids <http://sdm.rightcare.nhs.uk/pda/> and shared decision making
- the value the whole population derives from the investment in their healthcare and there are two aspects to this
 - ✓ Allocative value, determined by how the assets are distributed to different sub groups in the population, for example to people with cancer or to people with mental health problems,
 - ✓ Technical value, determined by how well resources are used for, this is measured by relating outcomes to the resources used, where the resources are not solely financial but include the time of patients and clinicians. Neither is it measured only with respect to the patients treated but to all the people in need in the population because there is under provision to some groups and the population based approach to technical value or efficiency is essential for increasing

Over the life of the Programme, CCGs will receive Commissioning for Value Focus Packs which are personalised for each CCG and should be used to support local discussions and inform a more in-depth analysis. There is a page of useful links at the end and there is a video guide to the pack too.

Each of these focus packs provides detailed information on the opportunities to improve (outcomes and spend) in the highest spending programmes previously covered by Commissioning for Value packs. They include a wider range of outcomes measures and information on the most common procedures and diagnoses for the condition in question.

By using this information, together with local intelligence and reports such as our Joint Strategic Needs Assessment, the CCG will be able to ensure its plans focus on those opportunities which have the potential to provide the biggest improvements in health outcomes, resource allocation and reducing inequalities.

To facilitate the development and delivery of the Right Care programme a Generic improvement cycle has been developed.

More details about the Right Care Programme can be found here

<http://www.rightcare.nhs.uk/wp-content/uploads/2011/06/Right-Care-Forward-View-2015-191.pdf>

2. The Surrey Downs Approach

Work to Date

NHS Surrey Downs CCG has so far received Commissioning for Value focus packs for the following areas; MSK, Cancer and tumours, Cardiovascular disease, Respiratory, Mental health and dementia, Maternity and early years, and Neurological.

The Respiratory, CVD and Neurological focus packs were reviewed as part of the Fill the Gap Workshop on 26 May 2016. Several potential opportunities were identified in this process and these were then further considered as part of the CCG Deep Dive into the all Right Care Focus packs which took place on 16 Jun 2016. The outputs from the 'Deep Dive' were to identify several potential opportunities which can deliver changes and savings in 2016/17 and other opportunities for transformational change in 2017/18 and beyond.

Next Steps

Building on the work to date, the intention is to now follow as far as practical the Right Care generic improvement cycle to further explore and exploit the opportunities which are highlighted in the Right Care Focus packs.

The next activity will be to hold a diagnostic event on 29 September 2016 to review in detail each Right Care pack and assess the opportunities it offers. This will include mapping of the current services and the design of optimal future services. Participants will be guided to categorise elements of the current services and then to recommend reform projects to achieve optimal future state

Invitations to the diagnostic event will be extended to local GPs, secondary and community care colleagues, South East Coast Ambulance Service, Public Health and the voluntary sector.

The CCG already has clinical leads in place for all but one of the Right Care focus areas. A clinical lead will be identified for CVD prior to the diagnostic event

Right Care Area	Clinical Lead
CVD	TBC
MSK inc Hips and Knees	James O'Brien
Neurology	Goska Trubshaw
Respiratory (NEL Respiratory, Influenza & Pneumonia)	Bryn Bird
Mental Health	Julia Chase
Maternity	Suzanne Moore
Cancer	Anita Monaco

Additionally, project management support has been identified to support taking this work forward.