

Title of paper: Progress report in delivery of CCG Key Programmes

Meeting: Governing Body

Date: 10th October 2014

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Purpose	To Agree	
	To Advise	
	To Note	

Development

This report is produced with input from Heads of Service and is reviewed on a monthly basis by the Executive Committee.

Executive Summary and Key Issues

This report provides a high level summary of progress in delivery of the CCG Key Priority Programmes for 2014/15. The report provides a RAG ('red', 'amber', 'green') assessment summary across all programmes using a performance dashboard.

Overall good progress is being made, in Quarter 2 (Jun-Aug) a total of 92 milestones were assessed to track the delivery against 2014/15 key programmes, of these 34 are assessed as 'green' (38.0%) this compares favourably to the July figure (27.2%).

Some of the achievements include:

- **System Resilience Group (SRG)**
System Resilience Group (SRG) which replaces 'Urgent Care Boards' cover Elective and Non Elective Care. Surrey Downs CCG successfully developed and submitted, with its partner organisations, a plan for Referral to Treatment and Unplanned Care projects for 2014/15. The projects have been aligned to

each of our three Local Health Economies and focus on integration of services, specifically enhancing 7 days working across provider organisation and increasing integrated working to deliver enhanced services.

- **Better Care Fund (BCF)**

The Better Care Fund plan is a Surrey wide plan reflecting both the overarching principles and objectives as well as the individual plans for each CCG and Surrey County Council. The Surrey plan has been completed and submitted to NHS England within the agreed timescales.

The Surrey plans objectives are as follows:

Our Objectives
Enabling people to stay well - Maximising independence and wellbeing through prevention and early intervention for people at risk of being unable to manage their physical health, mental health and social care needs
Enabling people to stay at home - Integrated care delivered seven days a week through enhanced primary and community services which are safe and effective and increase public confidence to remain out of hospital or residential/nursing care
Enabling people to return home sooner from hospital - Excellent hospital care and post-hospital support for people with acute, specialist or complex needs supported by a proactive discharge system which enables a prompt return home

Delivering this vision will make a difference to patient and service user outcomes. We support the National Voices definition of integrated care as meaning person-centred, coordinated care reflected in the statement “I can plan my care with people who work together to understand me and my carer(s), allow me control, and bring together services to achieve the outcomes important to me”. We are working together to ensure the services that we commission meet our strategic aims and programme objectives.

Within the overarching plan Surrey Downs CCG has its own locality specific plan. This plan was developed with a range of partners including both health and social care. It is an ambitious programme and includes a number of projects.

These are as follows:

- Primary Care Networks/Community Medical Teams.
- Improved CHC Process.
- Improved and Integrated Discharge Pathway.
- Rapid Response/Intermediate Care/Reablement.
- Integrated Services.

The project plans are being co-produced and a good deal of redesign work has already been undertaken. Regular progress will be reported through the

Local Joint Commissioning Group (LJCG) and the Transformation Board. Locally individual projects will be collectively organised and managed into a formal Integration Programme, managed through the PMO (Programme Management Office). Reporting and governance arrangements are being developed.

- **Primary Care Networks**

The CCG has dedicated project resource aligned to the development of Primary Care Networks. Each network has drawn together a Steering Group who are responsible for driving network development forward and engaging with the wider network membership.

Each network has been allocated a budget to fund the Steering Group's time and to cover GP and business manager time to draw together a Network Plan for submission to the CCG. Networks will develop an Outline Business Plan for how they will improve:

- Access
- Satisfaction
- Outcomes for patients
- Acute spend
- Prescribing cost and quality

This plan is the network's business plan and describes the structure, form, membership and purpose of the network. It shows how the network will meet the services comprising the Primary Care offer.

Services the networks wishes to deliver will be described in this plan and specifications/activity modelling are being worked up in conjunction with CCG. Data is shared at all points with the steering group to ensure CCG approval at all stages before final sign off through Executive & Governing Body meetings.

- **Dorking Network:** will submit business plan and begin network level 2 schemes prior to Christmas (subject to final sign off)
 - **East Elmbridge Network:** steering group engaging with wider membership. Discussions with CCG around exact schemes the CCG is commissioning and the gaps/local issues the network needs to address
 - **Epsom (Medlinc & Mid Surry localities):** Awaiting wider engagement and a Locality vote between Medlinc and Mid Surrey on the merge of two localities into one.
- **Elective Care Pathways**

The CCG has instigated a review and redesign programme for a number of high volume elective care specialties including Dermatology, Ophthalmology, MSK, Cardiology, ENT and Gynaecology. The programme is currently at the opportunity analysis stage, identifying what service or contractual changes

can be made this year to support the CCG's QIPP (Quality, Innovation, Prevention & Productivity) programme and proposing larger-scale transformational work for 2015/16.

The CCG's Executive Committee has approved recommendations to begin a comprehensive programme of clinical audit and coding reviews and set up specialist clinical reference groups to oversee service change in a number of specialty areas. It was also agreed that the CCG will develop detailed proposals for the design and procurement of specialist intermediate services providing a defined tier of care between primary care and acute hospitals.

- **Child & Adolescent Mental Health Services (CAMHS)**

This project is to re-commission Specialist CAMHS (tier 3) and Targeted CAMHS (tier 2) in Surrey. This project is being led by Guildford and Waverley CCG, in partnership with Surrey CCGs and Surrey County Council (SCC). We aim to have a newly specified Surrey-wide CAMHS service fully operational by 14th September 2015. The consultation stage of the procurement process is closing and has been wide reaching. Surveys have been sent out targeted at four key stakeholder groups: GPs, service users, parent and carers and other healthcare professionals. Surrey Downs has received the highest number of GP responses.

In total over 400 people have responded to the surveys. The survey responses will be compiled and analysed to draw out key messages. This will be reviewed in conjunction with feedback from the local engagement events of which there have been three public ones and each CCG has run local commissioning engagement events. There is a further engagement event in Leatherhead on October 14th and representatives from Surrey Downs will attend. To ensure local needs are recognised and local issues are picked up the CCG is emailing more detailed questions to all practices via the Children's Safeguarding leads. Next steps are to feed in to the development of a service specification and work up local requirements. The project is largely on track to deliver and the Governing Body will receive a business case to agree core services and financial envelope in November.

- **Continuing Healthcare (CHC)**

Overseen by the Programme Board the programme of service transformation is making good progress and the performance of the service continues to improve. The programme is moving to a phase of implementation and mobilisation. Recruitment to a new HR structure intended to improve the quality, efficiency and performance of the service whilst also addressing the remaining backlogs in the system is now underway. A new Head of Continuing Healthcare was appointed in September to start in the New Year and recruitment to all other posts is expected to be completed by December.

The CCG continues to work closely with the local Authority on a number of

Agenda item	12
Attachment	09

key projects including the re-procurement of home-based contracts, Strategic Partnership Contracts have now been awarded for go-live on 1st October. An AQP tender process is now underway. Projects around the re-procurement of residential nursing care contracts and a pilot for joint CHC assessments are progressing.

Recommendation(s):

The Governing Body is asked to note the progress in delivery of 14/15 Key Priority Programmes.

Attachments:

Supporting Documentation: details of the current status of all programmes are available in a separate document published as an on-line document only with the Board papers on the CCG website

Implications for wider governance

Quality and patient safety

The CCG will commission for quality in line with local intentions and any upcoming National Guidance. Several of the Key Programmes included in this report relate to these.

Patient and Public Engagement

The CCG will involve Patient and Public Engagement in line with local intentions and any upcoming National Guidance. Several of the Key Programmes included in this report relate to these.

Equality Duty

In line with the NHS constitution, the CCG commissions services in order to meet the Equality requirements of all protected groups. Several of the Key Programmes included in this report relate to these.

Finance and resources

The CCG will manage finance and resources in line with local intentions and any upcoming National Guidance. Several of the Key Programmes included in this report relate to these.

Agenda item	12
Attachment	09

Workforce

The CCG's commissioning and contracting intentions will include workforce requirements. Several of the Key Programmes included in this report relate to these.

Information Governance

The CCG adhere to Information Governance standards in line with local intentions and any upcoming National Guidance. Several of the Key Programmes included in this report relate to these.

Conflicts of interest

No specific issues

Communications Plan

This report is available on the CCG website

Legal or compliance issues

No significant issues with respect to legal or compliance issues.

Risk and Assurance

A risk assessment for each Key Programme is included in this report.

Progress report in delivery of CCG Key Programmes for 2014/15 – Month 5 (August 2014)

1. Introduction

This report provides a high level summary of progress in delivery of the CCG Key Priority Programmes for 2014/15. The report provides a RAG ('red', 'amber', 'green') assessment summary across all programmes using a performance dashboard. A further performance dashboard shows the current progress broken down by six overarching programme themes as described in **table 1** below:

- **Green** assessment indicates that the milestone is achieved and completed
- **Amber** assessment indicates that the milestone is not completed but on track for achievement
- **Red** assessment indicates that the milestone is not on track for achievement.

Further details on the current progress of each project are also provided in **Appendix 1** and supporting documentation to this report.

Assurance

Progress in delivery of key programmes is monitored and assured by the Committees as shown in the table below. Each body will receive a detailed report covering the programmes and projects related to the area of work/terms of reference of the body. Each body will be responsible for making recommendations as required and will raise specific areas of concern to the Governing Body as necessary.

Table 1: Overseeing Body by Over-Arching Programme Theme

Over-arching Programme	Overseeing Body
1. Strategic delivery	Executive Committee: Whole Systems Transformational
2. Building organisational capacity & capability	Executive Committee: Business and Governance
3. Implement specific and defined quality improvements	Clinical Quality Committee
4. Implement specific and defined service pathway/provision changes	Executive Committee: OOH Programme
5. Establish operational control of services, contracts and budgets	Executive Committee: Business and Governance
6. Establish effective governance	Executive Committee: Business and Governance Audit, Corporate, Governance and Risk Committee

2. Overall RAG Performance Dashboard

The performance dashboard below (**Figure 1**) is intended to show progress against the delivery of key priority programmes. This is done by routinely re-assessing the RAG status of milestones.

Each agreed programme (or project) has specific quarterly milestones included. Milestones are used to 'track' or monitor the progress of a programme (or project). Using this approach provides an 'early warning' that there is a risk to the delivery of the programme at year end and remedial actions can be taken as necessary.

Figure 1 shows the current (August 14) RAG assessment for project milestones to be met in each quarter, Q1 (Apr-Jun), Q2 (Jul-Sep), Q3 (Oct-Dec) and Q4 (Jan-Mar). For comparison purposes the July assessment is also shown. The percentage of project milestones assessed as 'red', 'amber', 'green' or 'not assessed' for each quarter is provided. The assessments are based on milestones specific to the individual project or programme.

Overall good progress is being made, in Q2 a total of 92 milestones were assessed to track the delivery against 2014/15 key programmes, of these 34 are assessed as 'green' (38.0%) this compares favourably to the July figure (27.2%).

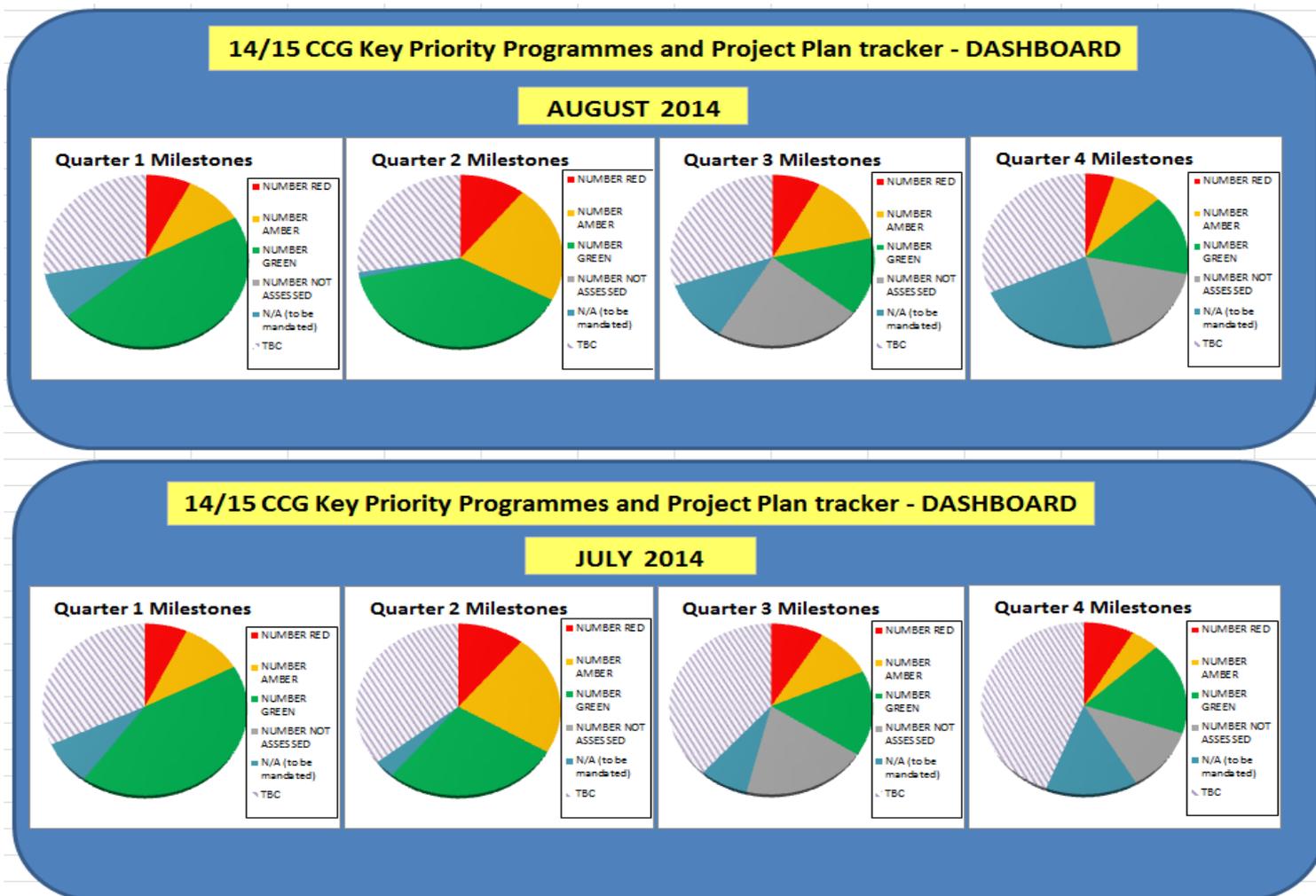
Across the year (Q1-Q4), the percentage of milestones currently assessed as 'red' is 7.7%, 'amber' 13.5% and 'green' 28.4%. A significant number of milestones are awaiting an assessment.

2.1 Changes from the previous assessment (Q2 assessment)

As indicated in the performance dashboard (Figure 1) overall there has been an increase the number of milestones assessed as 'green' for Q2 from 25 in the July assessment to 34 in the August assessment. This is largely due to changes from 'amber' to 'green' in milestones assessment in the following key programme areas:

- Roll-out of Telehealth - Campaign for local GPs/Health professionals to be aware and refer patients onto Telehealth
- Review current patient pathway for dermatology referrals – completion of data analysis to inform pathway re-design work and recommendation to the Executive on next steps
- Accredited Safe Haven ("ASH") status – key milestones met in Q2 in order for the CCG to be ASH accreditation process to be completed in October. ASH status will allow the CCG to, without explicit consent, to use patient data (using NHS number only) for the purposes of service evaluation, needs assessment and invoice validation.

Figure 1



Please note: project milestones currently recorded as 'not assessed', 'n/a' or 'tbc' refers to projects where there is either; no milestone or milestone activity in the period, the associated project is awaiting formal mandate to proceed or an assessment is awaited from the Project Manager.

Achieved (closed) projects

No projects have been formally closed in August.

3. Key Achievements

In addition to the **key achievements** highlighted in the last report to the Governing Body achievements include:

- **System Resilience Group (SRG)**

System Resilience Group (SRG) which replaces 'Urgent Care Boards' cover Elective and Non Elective Care. Surrey Downs CCG successfully developed and submitted, with its partner organisations, a plan for Referral to Treatment and Unplanned Care projects for 2014/15. The projects have been aligned to each of our three Local Health Economies and

focus on integration of services, specifically enhancing 7 days working across provider organisation and increasing integrated working to deliver enhanced services.

- **Better Care Fund (BCF)**

The Better Care Fund plan is a Surrey wide plan reflecting both the over-arching principles and objectives as well as the individual plans for each CCG and Surrey County Council. The Surrey plan has been completed and submitted to NHS England within the agreed timescales.

The Surrey plans objectives are as follows:

Our Objectives	People will benefit through
<p>Enabling people to stay well - Maximising independence and wellbeing through prevention and early intervention for people at risk of being unable to manage their physical health, mental health and social care needs</p>	<ul style="list-style-type: none"> • Being able to stay healthier and independent for longer with choice and control over their lives and indeed where they die • Knowing about and being able to access information, care and support in their local community to keep them at home • Being part of their local community
<p>Enabling people to stay at home - Integrated care delivered seven days a week through enhanced primary and community services which are safe and effective and increase public confidence to remain out of hospital or residential/nursing care</p>	<ul style="list-style-type: none"> • Experiencing health and social care services which are joined up • Receiving a consistent level of care and support 7-days a week • Remaining safe
<p>Enabling people to return home sooner from hospital - Excellent hospital care and post-hospital support for people with acute, specialist or complex needs supported by a proactive discharge system which enables a prompt return home</p>	<ul style="list-style-type: none"> • Knowing they will only be admitted to a hospital if there is no other way of getting the care and support they need • Being supported to return home from hospital as soon as possible and being able to access care and support to help get them back on their feet • Being happy with the quality of their care and support, no matter who delivers it

Delivering this vision will make a difference to patient and service user outcomes. We support the National Voices definition of integrated care as meaning person-centred, coordinated care reflected in the statement “I can plan my care with people who work together to understand me and my carer(s), allow me control, and bring together services to achieve the outcomes important to me”. We are working together to ensure the services that we commission meet our strategic aims and programme objectives.

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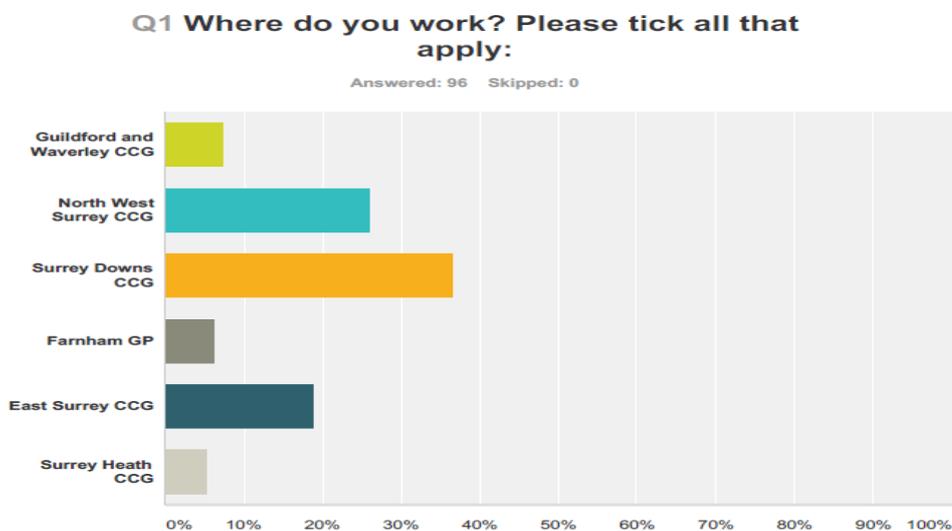
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CAMHS Survey for GP Commissioners in Surrey (Jul - Sep 2014)



In total over 400 people have responded to the surveys. The survey responses will be compiled and analysed to draw out key messages. This will be reviewed in conjunction with feedback from the local engagement events of which there have been three public ones and each CCG has run local commissioning engagement events. There is a further engagement event in Leatherhead on October 14th and representatives from Surrey Downs will attend. To ensure local needs are recognised and local issues are picked up the CCG is emailing more detailed questions to all practices via the Children’s Safeguarding leads. Next steps are to feed in to the development of a service specification and work up local requirements. The project is largely on track to deliver and the Governing Body will receive a business case to agree core services and financial envelope in November.

Indicative timetable:

Activity	Timeline
Stakeholder Engagement/Consultation (including GPs, Local Authority, Third Sector, Patients and carers)	June 14 – Sept 14
Pre Procurement Activity (including Service Specification)	Sep 14 – Nov 14
PQQ Process	Dec 14 – Jan 15
ITT process	Feb 15 – Apr 15
Contract Award	May 15
Mobilisation	May – Aug 15
Service Commencement	Sep 15

- **Continuing Healthcare (CHC)**

Overseen by the Programme Board the programme of service transformation is making good progress and the performance of the service continues to improve. The programme is moving to a phase of implementation and mobilisation. Recruitment to a new HR structure intended to improve the quality, efficiency and performance of the service whilst also addressing the remaining backlogs in the system is now underway. A new Head of Continuing Healthcare was appointed in September to start in the New Year and recruitment to all other posts is expected to be completed by December.

The CCG continues to work closely with the local Authority on a number of key projects including the re-procurement of home-based contracts, Strategic Partnership Contracts have now been awarded for go-live on 1st October. An AQP tender process is now underway. Projects around the re-procurement of residential nursing care contracts and a pilot for joint CHC assessments are progressing.

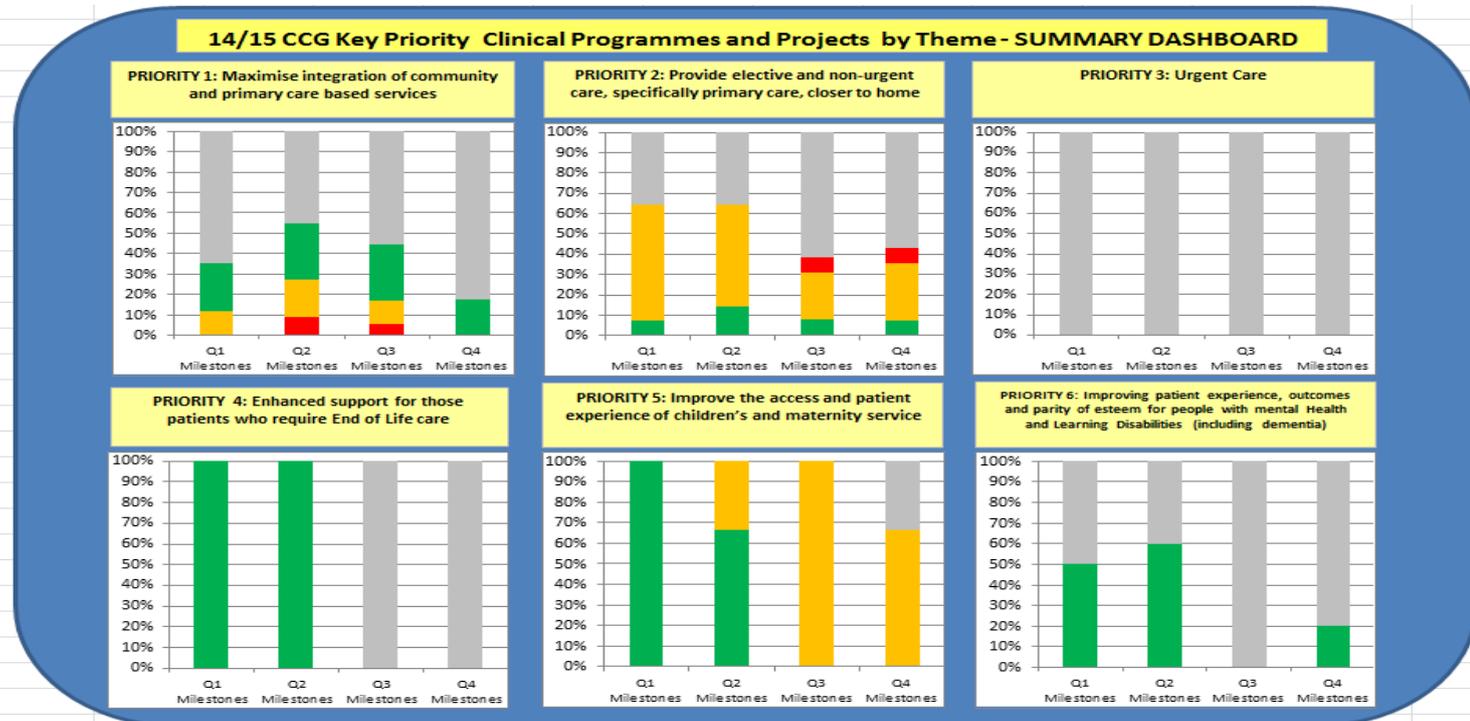
4. RAG status by Programme Theme

The performance dashboard (Figure 2) shows the current RAG assessment for project milestones grouped by overarching programme themes. The chart currently includes clinical

priority themes only. Subsequent reporting will include both clinical and organisational programmes.

The charts shows the percentage of projects assessed as ‘red’, ‘amber’, ‘green’ or ‘not assessed’ for each milestone period; Q1 (Apr-Jun), Q2 (Jul-Sep), Q3 (Oct-Dec) and Q4 (Jan–Mar).

Figure 2



Please note: project milestones currently recorded as ‘not assessed’ refers to projects where there is either no milestone or milestone activity in the period, the associated project is awaiting formal mandate to proceed or an assessment is awaited from the Project Manager.

Supporting Documentation:

details of the current status of all programmes are available in a separate document published as an on-line document only with the Board papers on the CCG website

Appendix 1 – Quarterly milestones assessment (detailed view): August compared to July

Jul-14												
Q1 MILESTONES		Q2 MILESTONES		Q3 MILESTONES		Q4 MILESTONES				Total	Percentage	
NUMBER RED	6	NUMBER RED	10	NUMBER RED	8	NUMBER RED	7			31	8.66%	% RED
NUMBER AMBER	9	NUMBER AMBER	21	NUMBER AMBER	9	NUMBER AMBER	4			43	12.01%	% AMBER
NUMBER GREEN	37	NUMBER GREEN	25	NUMBER GREEN	15	NUMBER GREEN	15			92	25.70%	% GREEN
NUMBER NOT ASSESSED	0	NUMBER NOT ASSESSED	0	NUMBER NOT ASSESSED	18	NUMBER NOT ASSESSED	10			28	7.82%	% NOT ASSESSED
N/A (to be mandated)	7	N/A (to be mandated)	3	N/A (to be mandated)	7	N/A (to be mandated)	12			29	8.10%	
TBC	28	TBC	33	TBC	36	TBC	38			135	37.71%	
Total										358		

Aug-14												
Q1 MILESTONES		Q2 MILESTONES		Q3 MILESTONES		Q4 MILESTONES				Total	Percentage	
NUMBER RED	6	NUMBER RED	10	NUMBER RED	7	NUMBER RED	4			27	7.74%	% RED
NUMBER AMBER	8	NUMBER AMBER	21	NUMBER AMBER	11	NUMBER AMBER	7			47	13.47%	% AMBER
NUMBER GREEN	38	NUMBER GREEN	35	NUMBER GREEN	13	NUMBER GREEN	13			99	28.37%	% GREEN
NUMBER NOT ASSESSED	0	NUMBER NOT ASSESSED	0	NUMBER NOT ASSESSED	20	NUMBER NOT ASSESSED	15			35	10.03%	% NOT ASSESSED
N/A (to be mandated)	7	N/A (to be mandated)	1	N/A (to be mandated)	10	N/A (to be mandated)	18			36	10.32%	
TBC	24	TBC	25	TBC	28	TBC	28			105	30.09%	
Total										349		

