

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

Meeting: Governing Body

Date: 18th July 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 Q1 a total of 40 milestones were assessed to track the delivery against 2014/15 key programmes, of these 25 are assessed as 'green' (62.5%). Across the year (Quarter 1– Quarter 4), the percentage of milestones assessed as 'red' is 6.8%, 'amber' 18.4% and 'green' 29.6%.

Some of the achievements include:

- **Referral Support Service (RSS):** The RSS supports practices with signposting referrals, enhances patient choice, creates efficiency and supports the development of seamless care pathways.

The service is now receiving over 580 referrals per week the percentage of referrals processed in under three days has fallen to below 1%. All Practices

in Medlinc, East Elmbridge and Mid-Surrey localities are using the service. Dorking Locality has now agreed to use the service from the 1st September.

- Significant progress has been made in **CHC delivery programmes** to ensure the 94 recommendations from the review are implemented. An agreement in principle has been made with Surrey CCGs through the CHC Programme Board and the Local Authority to a new Operating Policy for the service. There is now significant focus on the Programme putting the policy into practice. A new CHC panel has been implemented to ensure the service is compliant with national guidance. The procurement of a new CHC database to improve reporting and data quality is near completion. The new system is on track to be delivered in October. In partnership with the Local Authority a joint assessment pilot commenced on 7th July for an initial period three months.
- A review of how SDCCG **engages with patients, carers and service users** is underway, a Patient & Public Engagement Manager is in the process of been recruited to and a review of the current PAG (Patient Advisory Group) is planned.
- **Primary Care Development:** In June, two new Primary Care Standards were issued to GP practices; a Prescribing Incentive Scheme focussing on improving quality of Primary Care prescribing and a scheme to encourage Denosumab prescribing out of hospital.

The CCG has had informal confirmation that all 3 Local Health Economies will group in to Primary Care Networks and initial discussions around the specifications have begun. Practices are being supported by a project support team at the CCG to develop projects and scope new ways of working to tackle local healthcare issues.

There has been a significant increase in the uptake of the Learning Disability DES, higher than the national average and second highest within Surrey. Practices are being supported by Locality Managers and SABP to access a revised training package.

The new Unplanned Admissions DES for 14/15 has had a very good uptake (highest in Surrey) and we are working with GPs to develop our risk stratification tool to support the demands of this scheme.

- An **IFR (Individual Funding Requests)** workshop held on 4th July to improve the process and improve clinical assessment, there was a good turn-out and there was agreement to run the workshop three times a year. A Surrey-wide Priorities Committee hosted by SDCCG has been established. The Committee makes policy recommendation to CCGs relating to commissioning and funding of healthcare interventions (e.g. specific treatments, procedures and care pathways), using the agreed Ethical Framework and taking into account clinical views

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- **Mental Health Strategy** – to complement the local vision and further refine the strategic priorities already identified for Surrey Downs, by 18th July a draft version of the Surrey and North East Hampshire Integrated Commissioning 2014-19 Strategy for Emotional Wellbeing and Adult Mental Health is being released for public consultation and will be published on the CCG website.

Surrey Downs CCG was one of the Clinical Commissioning Collaborative members that helped to inform the shortlist of strategic priorities.

Mental Health Clinical Network – 3 out of 4 Mental Health clinical leads have now been appointed.

The Network will provide mental health clinical leadership and input to Surrey Downs CCG in all matters involving the development, commissioning and transformation of our local model of care.

Progress update on East Elmbridge IAPT trial launch

We're pleased to announce that in the first 5 weeks - although referral numbers have been relatively low at this early pilot stage - the trial project to improve how IAPT referrals are managed and processed has been successful in East Elmbridge.

Following the success in East Elmbridge, this project will next be rolled out to the Medlinc locality.

Recommendation(s):

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

- a) Implementation of RSS (Referral Support Service)
- b) CHC Review Programme
- c) Out of Hospital Service Reviews and Development of Primary Standards

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

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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.

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

Agenda item 08

Attachment 05

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 3 (June 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

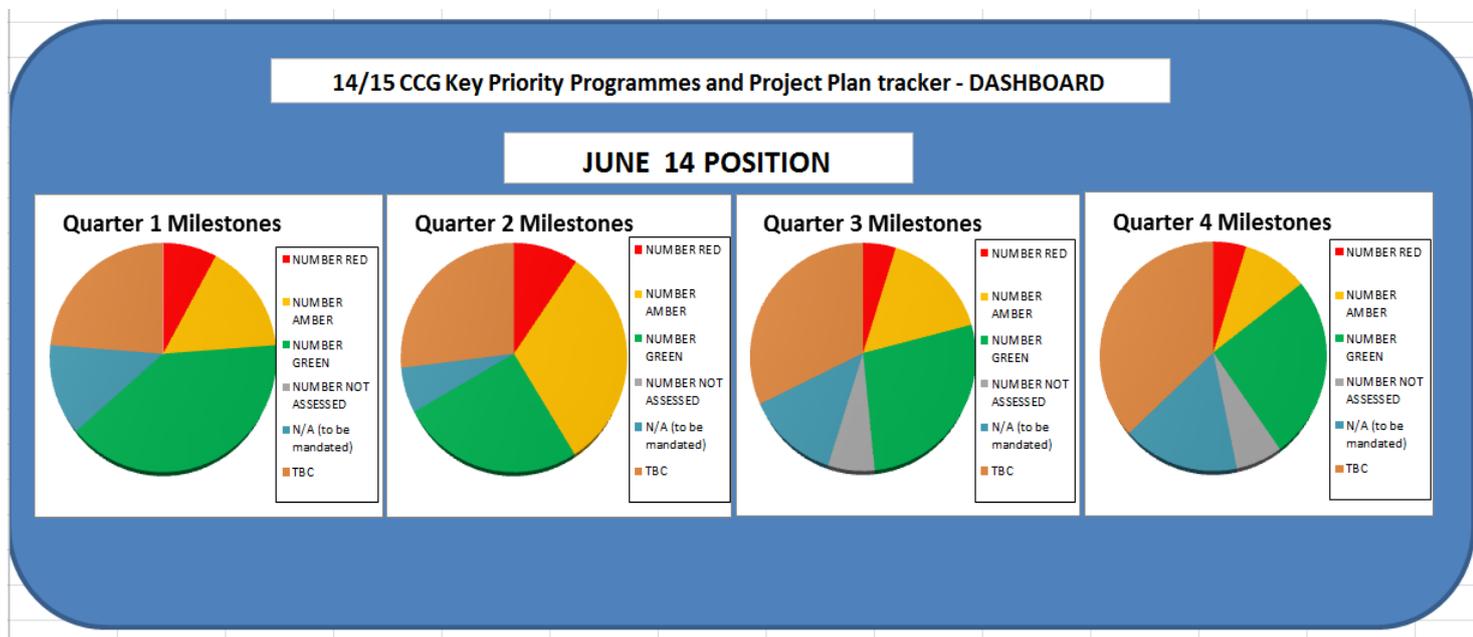
The performance dashboard below (**Figure 1**) is intended to show progress against the delivery of key priority programmes. This is done by routinely re-assessing the RAG status of milestones.

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 (June 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). 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 Q1 a total of 40 milestones were assessed to track the delivery against 2014/15 key programmes, of these 25 are assessed as ‘green’ (62.5%). Across the year (Q1–Q4), the percentage of milestones assessed as ‘red’ is 6.8%, ‘amber’ 18.4% and ‘green’ 29.6%.

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

In addition to the milestones assessments above a number of projects identified to deliver 2014/15 priorities have been closed in this period. The completed projects are:

- Roll-out 7 day social care working arrangements at local hospitals for funded and self-funding patients (Surrey County Council)
- Establish Intermediate Beds on the Epsom Hospital Site, with transfer of local hospital beds (20 new beds). The beds opened in the week commencing 9th June.
- Extend scope of the Referral Support Service (RSS) to include Mental Health.
- Implement new Tier 2 Diabetes Enhanced Service (enhanced management in General Practice) by April 2014
- Design, Procure and Implement Diabetes Tier 3 (Specialist led) service, including implementation of education programmes for clinical professionals and structured patient education programmes). The procurement phase has been successfully completed in this period.
- 2014/15 Medicines Management and Prescribing QIPP Scheme in place (April 2014)

In addition the **key achievements** highlighted at the last meeting achievements include:

- **Referral Support Service (RSS):** The RSS supports practices with signposting referrals, enhances patient choice, creates efficiency and supports the development of seamless care pathways.

The service is now receiving over 580 referrals per week the percentage of referrals processed in under three days has fallen to below 1%. All Practices in Medlinc, East Elmbridge and Mid-Surrey localities are using the service. Dorking Locality has now agreed to use the service from the 1st September.

- Significant progress has been made in **CHC delivery programmes** to ensure the 94 recommendations from the review are implemented. An agreement in principle has been made with Surrey CCGs through the CHC Programme Board and the Local Authority to a new Operating Policy for the service. This policy addresses many of the Review recommendations specifically in regard to compliance with national service framework guidance and working more effectively and efficiently. There is now significant focus on the Programme putting the policy into practice. A new CHC panel has been implemented to ensure the service is compliant with national guidance. The procurement of a new CHC database to improve reporting and data quality is near completion. The new system is on track to be delivered in October. In partnership with the Local Authority a joint assessment pilot commenced on 7th July for an initial period three months.

- A review of how SDCCG **engages with patients, carers and service users** is underway, a Patient & Public Engagement Manager is in the process of been recruited to and a review of the current PAG (Patient Advisory Group) is planned.
- **Primary Care Development:** In June, two new Primary Care Standards were issued to GP practices; a Prescribing Incentive Scheme focussing on improving quality of Primary Care prescribing and a scheme to encourage Denosumab prescribing out of hospital.

The CCG has had informal confirmation that all 3 Local Health Economies will group in to Primary Care Networks and initial discussions around the specifications have begun. Practices are being supported by a project support team at the CCG to develop projects and scope new ways of working to tackle local healthcare issues.

There has been a significant increase in the uptake of the Learning Disability DES, higher than the national average and second highest within Surrey. Practices are being supported by Locality Managers and SABP to access a revised training package. This is important as it addresses an area of historical poor performance and is a strategic priority as we have a higher than average prevalence of people with Learning Disabilities in the Surrey Downs area.

The new Unplanned Admissions DES for 14/15 has had a very good uptake (highest in Surrey) and we are working with GPs to develop our risk stratification tool to support the demands of this scheme. We are working with networks to ensure our Community Medical Teams are aligned to the DES and can support practices in managing our at risk frail elderly cohort of patients who have multiple co-morbidities. This DES is being managed locally in conjunction with the Area Team and is a strong driver of our Out of Hospital strategy-enabling practices to have greater oversight of patients at risk of hospitalisation who require more intensive community care.

- An **IFR (Individual Funding Requests)** workshop held on 4th July to improve the process and improve clinical assessment, there was a good turn-out and there was agreement to run the workshop three times a year.

A Surrey-wide Priorities Committee hosted by SDCCG has been established. The Committee makes policy recommendation to CCGs relating to commissioning and funding of healthcare interventions (e.g. specific treatments, procedures and care pathways), using the agreed Ethical Framework and taking into account clinical views

- **Mental Health Strategy** – to complement the local vision and further refine the strategic priorities already identified for Surrey Downs, by 18th July a draft version of the Surrey and North East Hampshire Integrated Commissioning 2014-19 Strategy for Emotional Wellbeing and Adult Mental Health is being released for public consultation and will be published on the CCG website.

Surrey Downs CCG was one of the Clinical Commissioning Collaborative members that helped to inform the shortlist of strategic priorities, outlined below:

- Priority 1: Promotion, Prevention & Early Intervention
- Priority 2: Working Better Together
- Priority 3: Partnerships with Service Users and Carers
- Priority 4: Effective Crisis Care
- Priority 5: Making Recovery Real

Mental Health Clinical Network – 3 out of 4 Mental Health clinical leads have now been appointed.

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We're pleased to announce that in the first 5 weeks - although referral numbers have been relatively low at this early pilot stage - the trial project to improve how IAPT referrals are managed and processed has been successful in East Elmbridge.

Key benefits already seen as a result of this initiative include:

- GPs no longer need to discuss the choice of providers with patients as this is being done effectively by the RSS
- As anticipated, the service is helping to reduce confusion for patients and enhance the accuracy of referrals
- The RSS are holding useful, up-to-date information about waiting lists and the location and type of services on offer
- Patients appreciate the choice of online or face to face and different locations – e.g. local, more convenient clinic closer to work or home etc
- Patients are being contacted more quickly – the same day in many cases and the RSS team are proactively following up with patients – e.g. calling twice at different times of the day
- Where the RSS team are unable to reach a patient, a letter is sent following on from the 2 calls inviting patients to call back & book an appointment

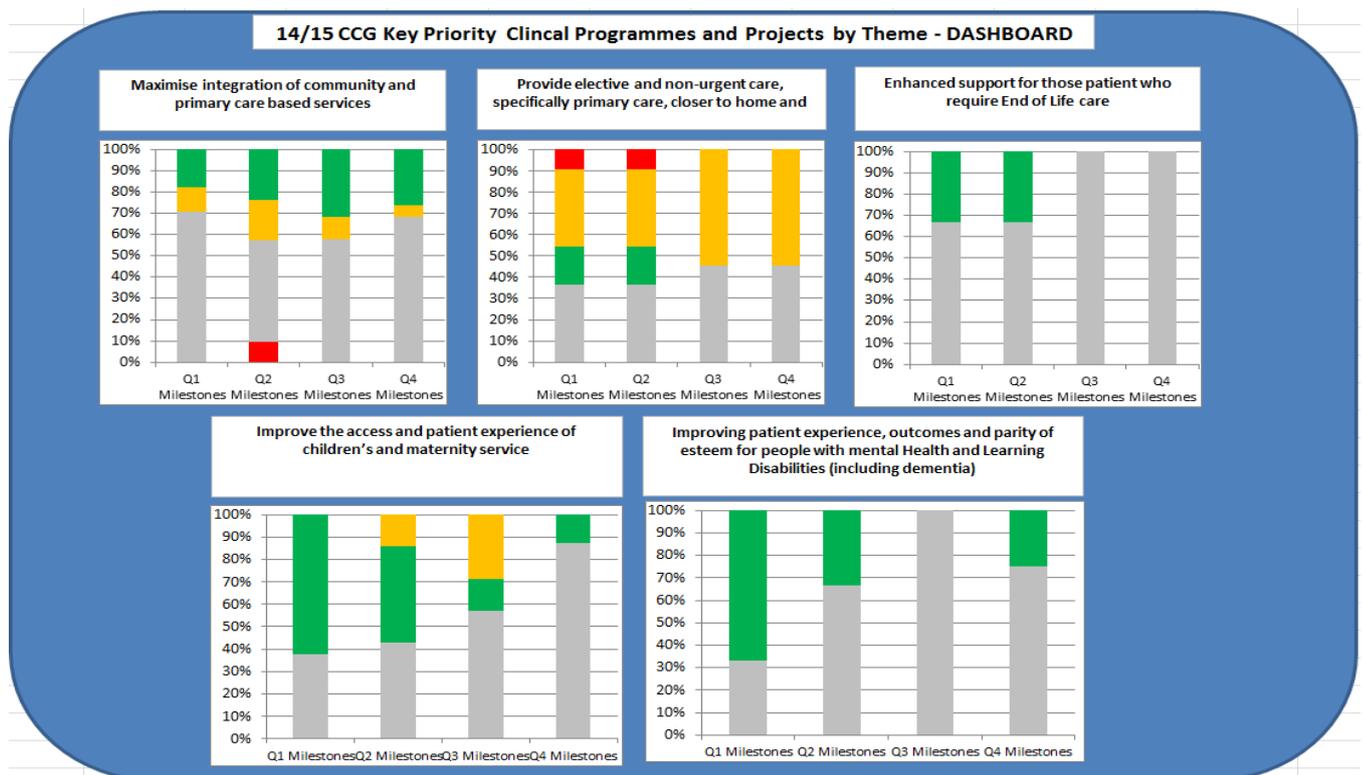
Following the success in East Elmbridge, this project will next be rolled out to the Medlinc locality.

3. 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)

Jun-14										
Q1 MILESTONES		Q2 MILESTONES		Q3 MILESTONES		Q4 MILESTONES			Total	Percentage
NUMBER RED	5	NUMBER RED	6	NUMBER RED	3	NUMBER RED	3		17	6.80% % RED
NUMBER AMBER	10	NUMBER AMBER	20	NUMBER AMBER	10	NUMBER AMBER	6		46	18.40% % AMBER
NUMBER GREEN	25	NUMBER GREEN	16	NUMBER GREEN	17	NUMBER GREEN	16		74	29.60% % GREEN
NUMBER NOT ASSESSED	0	NUMBER NOT ASSESSED	0	NUMBER NOT ASSESSED	4	NUMBER NOT ASSESSED	4		8	3.20% % NOT ASSESSED
N/A (to be mandated)	8	N/A (to be mandated)	4	N/A (to be mandated)	8	N/A (to be mandated)	10		30	12.00%
TBC	15	TBC	17	TBC	20	TBC	23		75	30.00%
									Total	250