

NHS COUNTY DURHAM AND DARLINGTON INTEGRATED BUSINESS BOARD

Transforming Community Services Position Paper Decision Update January 2010

1. Introduction

Transforming Community Services (TCS) presents NHS County Durham and Darlington (NHSCDDD) with the opportunity to redesign the local health system to ensure provider organisations will optimise health outcomes for patients and improve health and wellbeing for our local population. This paper describes to the board the strategic context of TCS, potential impact upon the local provider environment and progress to date against the strategic health authority (SHA) TCS commissioning framework checklist.

Transforming Community Services, Enabling New Patterns of Provision was published by the Department of Health in January 2009. This document outlined to primary care trusts (PCTs) a framework necessary to both strengthen and separate the provision of community services as well as strengthening PCT capability to commission transformational change in community services.

TCS is underpinned by recent Department of Health policy *NHS 2010-2015 from good to great. Preventative, people-centred, productive*. This presents a five year plan to reshape the NHS further and faster than ever before and this together with the *Operating Framework for the NHS in England 2010/2011* places significant emphasis on prevention, productivity and people centred services.

TCS is a key activity in ensuring delivery of the strategic objectives within NHSCDD's refreshed five year strategic plan and is closely aligned to the developing Primary Care and Community Strategy (PCCS) for County Durham and Darlington.

Document management				
Version	Date	Summary	Owner's Name	Approved
1.0	26/01/10	Present to Integrated Business Board	Pat Keane	

Our approach to TCS is crucial to the delivery of increased quality, innovation, productivity and prevention (QIPP) and is informing our current approach to services currently provided by County Durham and Darlington Community Health Services (CDDCHS).

Commissioning clusters are working within a framework agreed with the Strategic Health Authority (SHA) to ensure the delivery of actions within the context of national timelines as outlined within the operating framework

TCS presents commissioners (and providers) with an opportunity to commission transformational change in the provision of community services which optimise patient outcomes and improve the health and wellbeing of the local population. This approach also encourages and supports innovative models of service delivery through strong and effective partnerships between health care organisations and other agencies.

2. Implications and risks

TCS comprises a number of significant areas of work to create modern, flexible and innovative community services to impact positively on the health and wellbeing of the population.

Key impacts will include:-

- equitable services focused on the patient/service user,
- improved patient experience, patient safety and clinical effectiveness based on defined evidence based outcomes,
- a financial framework moving from contract currencies based on block contract for professional groupings to locally derived currencies for service specifications delivering across funded pathways of care,
- integration of teams from health and other agencies delivering to the needs of the patient/service user reducing duplication of roles by procurement across pathways rather than by functional groupings delivering a clearer understanding of unique contributions of professionals,
- service improvement and innovation based on delivery of outcome based commissioning specifications.

3. Recommendations

The board is asked to:

- note the approach to TCS in County Durham and Darlington,
- support the proposed timetable and next steps.

4. Author and sponsor director

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Title: Director of Strategy and Involvement
Date: 12 January 2010

Purpose of paper	Information sharing X Development/discussion X Decision/action X
How does the paper support / have implications for:	
NHS County Durham's 4 Strategic Aims	TCS is aligned to all 4 refreshed strategic objectives
Our Vision Our Future workstreams	TCS will provide a framework for the follow through delivery of the clinical vision of the OVOF work streams and local Clinical Programme Groups
World class commissioning competencies	Links directly into WCC competencies two through to eleven
Standards for better health	To be quantified
Use of resources	To be quantified
Targets and Vital signs	To be quantified
NHS Constitution	Alignment to all the principles of the NHS Constitution
Darzi Principles	Direct links with Darzi principles one through to five
Impact on / Involvement of partners	Direct involvement of a range of key stakeholders required to develop a shared vision of community services within the TCS framework.
Equality & Diversity	No significant impact
Other policies / Issues	Links to a range of other strategies and policies including Primary Care and Community Strategy, Quality, innovation, prevention and productivity plans

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Transforming Community Services (TCS) presents NHS County Durham and Darlington with the opportunity to redesign the local health system to ensure provider organisations will optimise health outcomes for patients and improve health and wellbeing for our local population. This paper describes the strategic context of TCS, potential impact upon the local provider environment and progress to date against the SHA TCS commissioning framework checklist.

'Community services consume around £7.2bn of NHS resources a year, employ nearly a quarter of a million people, provide essential services to some of the most vulnerable people in our society, and are critical to improving health and wellbeing. Yet until recently these services have been largely untouched by the NHS reforms and often neglected by commissioners.transformation of community services could prove to be the key to unlocking productivity and quality.'

Bob Ricketts

Director of System Management & New Enterprise, Department of Health

2. Strategic Context

High Quality Care for All sets a clear vision to make quality the organising principle for the NHS where quality comprises three areas: patient safety, patient experience and the effectiveness of care. Quality and enabling transformational change is at the core of the National TCS programme. *Transforming Community Services, Enabling New Patterns of Provision* was published by the Department of Health in January 2009 to secure modern, flexible, high quality community services which are fit for purpose.

The TCS programme is designed to improve service provision and drive up quality and overall performance in the services delivered to local communities. This has been recently underlined by key national policy direction. *NHS 2010-2015 from good to great. Preventative, people-centred, productive* presents a five year plan to reshape the NHS further and faster than ever before and this, together with the *Operating Framework for the NHS in England 2010/2011*, places significant emphasis on prevention, productivity and people centred services and the challenge of delivering high quality care in a very tough financial environment.

There are additional demands of an aging population and increased prevalence of lifestyle disease. Furthermore we are aware that some 30% of acute inpatients could be treated outside of hospital and 68% of outpatient appointments and accident and emergency attendances are taken up by people who have a long term condition. It is therefore important to focus on community based services which will support prevention, timely intervention to promote independence and self care, prevention of admission and support safe, early discharge.

3. Local Environment

3.1 Organisational Form

TCS encourages provider organisations providing community services to take the next step to full autonomy and to determine a legal form of governance tailored to local needs. The TCS programme has provided a route map for PCTs to achieve the necessary separation of the operational provider services from commissioning functions. A 'holding position' was agreed by the boards of County Durham and Darlington PCTs in September 2009 creating an 'arms length' provider board to oversee County Durham and Darlington Community Health Services (CDDCHS). The Operating Framework 2010/2011 requires the definitive form for PCT community provider services to be agreed by March 2010 with a view to a maximum one year transition path to a permanent operating model from April 2011.

3.2 The Community Contract

Notice of termination of contract was issued to CDDCHS in November 2009 to facilitate a transparent approach to ensuring the optimal configuration of community services will be in place. A programme of service baseline assessments has been agreed to ensure an agreed service configuration is in place by April 2011, the timeline identified in the Operating Framework for 2010/11.

In ensuring the optimum configuration for local community services we will continue to develop service specifications that ensure providers deliver patient centred services and value for money.

TCS presents an opportunity to re-fresh and significantly strengthen our capability to commission safe, effective and quality services delivering improved patient experience and utilising community estate to best effect.

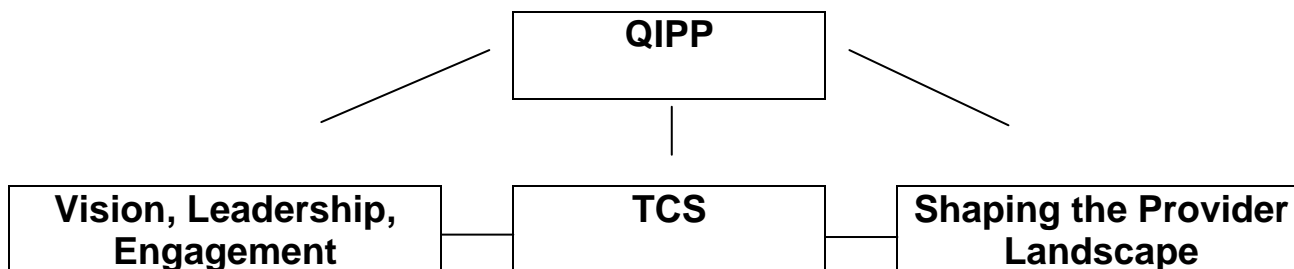
4. A Framework for Change

TCS is a key activity in ensuring delivery of the strategic objectives within NHS County Durham and Darlington's refreshed five year strategic plan and is closely aligned to the developing Primary Care and Community Strategy for County Durham and Darlington.

4.1 Quality, Innovation, Productivity and Prevention (QIPP)

It is imperative that TCS is aligned to QIPP plans and as such is seen to be working within a framework which links QIPP, the provider contract reviews and stakeholder engagement (see figure 1). Community services have a major contribution in the QIPP agenda via direct increases in productivity as well as enabling the cost effective provision of many activities currently undertaken in a hospital setting.

Figure 1: TCS Framework



4.2 Vision, Leadership and Engagement

A key component of TCS is developing and agreeing our vision/ambition for community services. Through this approach we will:

- Articulate our vision/ambition for community services in County Durham and Darlington

↑
Health and Wellbeing

- Share our vision with stakeholders (*Local Authority: Providers; Voluntary Sector; Public; Clinicians*)
- Articulate the vision to a wide spectrum of stakeholders
- Demonstrate the connection between our strategic objectives; Our Vision, our Future (articulated through Clinical Programme Groups) and Practice Based Commissioners commissioning intentions.
- Ensure constructive working relationship and continuous dialogue with providers (current and potential)
- Recognise the vital role of Practice Based Commissioners and Local Authority– focus on local priorities for improvement

4.3 Shaping the Provider Landscape

- Groupings and prioritisation

TCS focuses on delivering improvement in six core service areas:

- promoting health and wellbeing,
- services for children and young people,
- acute services closer to home,
- long term conditions,
- rehabilitation and long term neurological conditions,
- end of life.

Further themes will be considered appropriate, for example mental health and learning disability.

Alignment of the TCS core areas with Clinical Programme Group (CPG) delivery themes enables clear follow through from strategic planning through to market analysis and procurement of commissioned clinical pathways.

Commissioning across pathways is a fundamental shift from how services are currently commissioned on the basis of functional or professional groupings. The patient pathway is frequently complex, crosses a range of organisational boundaries and service delivery settings. Developing service specifications based on pathways allows for whole system thinking and requires us to factor in not only safety, quality and effectiveness but also workforce modelling for capacity and skills and encouraging provider organisation partnerships to deliver the best outcomes. The TCS programme will deliver a stepped approach to commissioning and procurement of community services based on the established vision for the provider landscape and an agreed process for prioritisation. Pro- active market analysis and the development of procurement plans are key factors for securing innovative changes in community services.

Themed pathways of care will act as vehicles to drive innovation, encourage partnership working and facilitate dialogue and engagement through the commissioning process. Front line nurses and allied health professionals frequently work at the interfaces of care and can often see where services need to be more joined up for the benefit of their patients. Removal of barriers between different parts of the system will increase the efficiency of care and lead to a better patient experience.

Appendix 1 illustrates the potential grouping of key clinical pathways into the six TCS core areas.

- **Contract Currencies**

To move from traditional block contract arrangements for functional services to a pathway commissioned service a financial framework based on locally derived currencies for outcome based service specifications will be developed. An agreed approach to manage the transition and identification of associated risks will be developed.

4.4 Commissioning plan

Commissioning PCTs are required to produce a detailed plan which describes:

- actions for transforming community services,
- identified priorities for improvement and service development,
- impacts on improved patient choice,
- increased competition to drive up service quality and value for money.

This plan informs service specifications, market analysis and informs our procurement plan in line with the five year strategic plan.

4.5 Community Estates Strategy

TCS guidance emphasises the importance of commissioners retaining community estate in order to ensure the necessary flexibility in estates usage to fulfil the ambitions of the local commissioning plans. NHS County Durham and Darlington has made significant progress to develop the necessary infrastructure and develop the Commissioners Asset Investment Management strategy (CIAMS) aligned to commissioning plans for community services. The TCS Estates Strategy for NHS County Durham and Darlington will be forwarded to the SHA within the agreed timeline of end of March 2010.

5. Summary

In summary TCS will ensure:

- enhanced patient choice;
- competition focussed upon improved quality and efficiency;
- improved wellbeing, prevention and timely intervention;
- delivery of a vision for community services;
- the commissioning of innovative models of delivery of services based on partnership working;
- a focus on themed and integrated pathways.

6. Timetable

The Commissioning framework checklist for TCS has identified timelines. The following significant timelines have been agreed with the SHA:

Final provider organisational form agreed by SHA	March 2010
TCS Estates Strategy received by SHA	March 2010
Primary Care and Community Strategy received by SHA	March 2010
Commissioning Plan	End January 2010

6. Next Steps

- Complete the commissioning plan in line with the SHA framework for TCS
- Deliver a stakeholder event early March 2010 - to explore and test out the vision for health and wellbeing services for the population of County Durham and Darlington.
- To map across and bundle key pathways to the TCS six core areas for service improvement
- Prioritise pathways and service specifications alongside market analysis work completed including identified risks and publish a procurement plan in line with the refreshed five year strategic plan.

Much of this work will be overseen by the recently appointed TCS programme lead.

7. Recommendations

The board is asked to:

- note the approach to TCS in County Durham and Darlington
- support the proposed timetable and next steps.

TCS core areas and suggested linked pathways

<p>Long Term conditions Diabetes Respiratory including COPD</p>	<p>Services for Children & Families Breast feeding</p>	<p>End of Life End of life pathway</p>
<p>Health & Well Being Smoking Cessation Obesity pathways Alcohol prevention and intervention pathway</p>	<p>Acute Services Closer to Home Endoscopy Dermatology MSK Pain management</p>	<p>Rehabilitation & Long Term Neurological Conditions Stoke pathway including rehabilitation Falls pathway</p>