



# The journey so far



- This is a two year programme of work
- We are currently six months in
- Great progress has been made already – this presentation will showcase some of the highlights
- We've worked hard to align to the other priorities across the local health economy
- But there is still much to do...

# Aligning with the local health economy

## Health and Wellbeing priorities

### Warwickshire

- Promoting independence
- Community Resilience
- Integration and working together



## Better Health, Better Care, Better Value

- Preventative and proactive care
  - Primary Care
  - Out of Hospital
- Maternity and Paediatrics
- Urgent Care
- Planned Care
- Mental Health

## Five Year Forward View

- Urgent and emergency care
- Primary care
- Cancer
- Mental health
- Integrating care locally
- Funding and efficiency
- Strengthening our workforce
- Patient safety
- Harnessing technology and innovation

**Our  
Commitment  
to Health**

# Health inequalities – July 2017

## Nuneaton and Bedworth

- The health of people in Nuneaton and Bedworth is varied compared with the average across England
- Life expectancy is 7.4 years lower for men and 6.7 years lower for women in the most deprived areas
- About 20% (5,000) of children live in low income families
- 21.5% (289) of children in year 6 of primary school are classified as obese
- The number of hospital stays due to alcohol-related harm among those under 18 years is 19 stays per year and for adults 735 stays
- The number of hospital stays due to self-harm is 320 stays per year.
- Estimated levels of adult excess weight are worse than the England average
- The rate of violent crime is worse than average.



### Local priorities

Priorities in Nuneaton & Bedworth include:

- tackling lifestyle behaviours
- mental health and wellbeing
- sexual health
- smoking in pregnancy

# Health Inequalities – July 2017

## Warwickshire North

- The health of people in North Warwickshire is varied compared with the average across England.
- Life expectancy is not significantly different between the most and least deprived areas of North Warwickshire
- About 15% (1,600) of children live in low income families
- 17.0% (108) of children in year 6 of primary school are classified as obese
- The number of hospital stays due to alcohol-related harm among those under 18 years is 5 stays per year and for adults it's 320 stays
- The number of hospital stays due to self-harm is 104 stays per year.
- Estimated levels of adult excess weight are worse than the England average
- The rate of people killed and seriously injured on roads is worse than average



### Local priorities

Priorities in North Warwickshire include:

- tackling lifestyle behaviours
- mental health and wellbeing
- sexual health
- smoking in pregnancy

# Health Inequalities - July 2017

## Rugby

- The health of people in Rugby is varied compared with the England average
- Life expectancy is 5.5 years lower for men and 4.9 years lower for women in the most deprived areas of Rugby
- About 13% (2,600) of children live in low income families.
- 18.9% (214) of children in year 6 of primary school are classified as obese
- The number of hospital stays due to alcohol specific issues among those under 18 years old is 10 stays per year; for adults it's 682 stays per year
- The number hospital stays due to self-harm is 213 stays per year.
- The number of people killed and seriously injured on roads is worse than average



## Local priorities

Reducing inequalities across Rugby by:

- improving healthy lifestyle behaviours
- reducing obesity
- improving physical activity, healthy eating, mental health & wellbeing support, including dementia, and drugs & alcohol misuse.



# What are commissioning intentions?

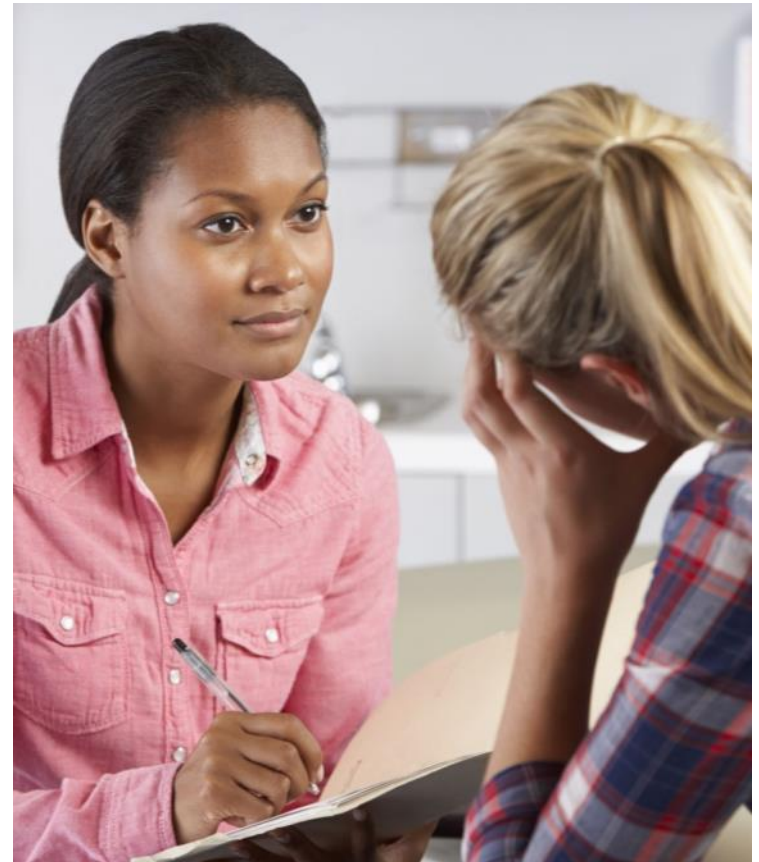
Commissioning Intentions represent our **Commitments to Health**

All Clinical Commissioning Groups (CCGs) are required to develop and publish commissioning intentions, which set out the priorities for the CCG, on an annual basis. Last year the CCG published a set of two year commissioning intentions for the period 2017 to 2019. We are currently six months into a two year programme of work. This document sets out progress and achievements to date.

The 2017 to 2019 commissioning intentions can be seen in more detail published on our websites:

- <http://www.warwickshirenorthccg.nhs.uk/About-Us/Key-documents/Commissioning-Intentions>
- <http://www.coventryrugbyccg.nhs.uk/About-Us/Commissioning-Intentions>

We now want to assess our progress and **refresh our Commitments to health**



# Challenges and pressures

## The NHS locally is facing a range of pressures:

- As we celebrate people living longer, we need to ensure that they are able to maximise their health and independence.
- Rise of long term conditions and complex care
- Risks associated to lifestyle e.g. drug and alcohol misuse
- Increasing access to services (including 7 day services)
- Diverse populations – urban and rural communities
- Medical & technological advances
- Constrained public resources
- Workforce gaps
- Increased housing developments and population growth





# National drivers – 2017/18 & 2018/19

1. Implement the Better Health, Better Care, Better Value programme
2. Finance – sustainable health and social care system
3. Primary Care - sustainable and resilient
4. Ensure urgent & emergency care offer meets required standards
5. Timely referral & scheduled care - (incl. maternity services review)
6. National Cancer Strategy
7. Mental Health - implement the MH 5yr forward view for all ages
8. Learning disabilities – reduce inpatient care so more people are supported to live in the community
9. Improving quality

# Commissioning intentions 2018/19

Our commissioning intentions are set within the context of significant financial and workforce challenges across health and social care which will require new models of care characterised by:

- Putting patients needs and system sustainability before organisations needs
- Commissioning of services that support people to live independently for longer, stay well and recover quickly closer to home, where appropriate
- Commissioning services that encourage and support patients to be active participants in their own care.
- Commissioning at the scale where this delivers improved outcomes and achieves best use of resources
- Commissioning in local community settings where it is safe, sustainable and achieves improved outcomes and patient experience
- Holistic care co-ordinated around the patient, delivered by interdisciplinary teams working around groups of GP practices

# System Integration

- During 2018/19 and beyond, we want to gain assurance about the sustainability of acute services in the light of workforce challenges, and will be asking for plans to progress clinical networking between George Eliot NHS Trust and University Hospital Coventry and Warwickshire NHS Trust as the main acute providers for our population.
- Working with NHS South Warwickshire CCG, we will develop a collaborative commissioning approach across Coventry and Warwickshire to deliver the Better Health, Better Care, Better Value initiative

# How we have engaged with our local population

- We put patients at the heart of everything we do
- We engaged with public to set priorities, get their views, feedback and ideas from the outset
- During our first six months, we have continued to engage with patients, public and other key stakeholders
- We will continue to engage throughout the two year process



# Commissioning Intentions 2018/19

## Workstream summary

Preventative and Proactive Care		
Primary Care	Out of Hospital Care	Maternity and Paediatrics
Our commitment is to enable the delivery of primary care at scale, increase opportunities for practices to work together to deliver resilient sustainable primary care, increase access to seven day services and same-day urgent care.	Our commitment is for fewer visits to hospital for patients with ongoing conditions and less time in hospital when you do have to stay, supported by more rehabilitation and ongoing support closer to home.	Our commitment is for a Maternity and Paediatrics service delivering safe, kind, family friendly, personalised care with improved outcomes for children, young people and families.
Urgent and Emergency Care	Planned Care	Mental Health
Our commitment is to deliver an integrated urgent and emergency care offer to the public with simple access for patients, delivering standardised interventions.	Our commitment is to ensure timely access to expert opinion, investigation and treatment. Reduce unnecessary visits to hospital for follow up care. Care provided in a range of accessible community settings.	Our commitment is to deliver a proactive and preventative approach to reduce the long term impact for people experiencing mental health problems and support individuals and families to manage their mental health and wellbeing condition.



# How we align to Health and Wellbeing priorities

## Warwickshire health and wellbeing key priorities 2018/19

Promoting independence	Community Resilience	Integration and working together
<p>Increase access to talking therapies for those presenting with depression and or anxiety from 16.8% to 19%</p>	<p>Engaging primary care to work within a network of 'hubs', combined populations of 30,000 – 50,000</p> <p>Supporting GP practices to develop a sustainable workforce</p>	<p>Allowing practices to share and pool resources and responsibilities</p> <p>Explore opportunities for practices to work together to increase flexible access to seven day services</p>
<p>Children treated via community services, therefore reducing avoidable admissions to inpatient beds</p>		
<p>Standardise Urgent Treatment Centres in line with national standards</p>		<p>Deliver Integrated urgent care services with simple access for patients</p> <p>Reduce levels of Delayed transfers of Care from hospital with 85% of assessments undertaken outside hospital setting</p> <p>Appraisal of a new stroke pathway</p>
<p>Reduce avoidable demand for elective care – tackling variations in referrals and providing advice first options for primary care</p>		<p>Expanding cancer screening uptake – focus on bowel, breast and cervical cancer</p> <p>Creation of redesigned and efficient hospital pathways, avoiding duplication and unnecessary hospital visits</p>
<p>Implement lead provider model of care to develop interdisciplinary teams to work across groups of practices to support case management of frail and vulnerable adults</p>		
<p>Postnatal care - women should have access to their midwife as they require after having had their baby</p>		<p>Rapid referral protocols in place between professionals and across organisations</p>

# We will continue to engage with our local population

Building on our ongoing engagement with stakeholders, patients and the public, we will undertake further engagement and targeted dialogue to encourage our local populations to provide feedback against our proposals. We will use this feedback to check that our priorities will deliver the best health, best care and best value.

We will use a range of methods available to receive feedback from our local population and stakeholders. These will include:

- Online surveys
- Social media
- Face to face meetings with specific groups
- Any service changes will include engagement and where appropriate consultation; we will also require providers to seek service user feedback to evaluate and influence service delivery and service provision.

# Commissioning Intentions 2018/19

- What are your views on **progress** made so far?
- Are we **focusing on the right things** for our populations?
- Will these commitments **deliver improved outcomes**?
- Have we **reflected local priorities**?
- Have we **missed** anything?
- How can you help us to **achieve our commitments**?

Make a '**Commitment to Health**' today !

**Any Other Comments?**