Delivering the NHS Long Term Plan in ... and across south east London
Welcome and introduction to Long Term Plan
The NHS Long Term Plan

• Published in January 2019

• Aims to make the NHS fit for the future, providing high quality care and better health outcomes for patients and families through every stage of life
  
  • Support to prevent illness
  • Increase how we use technology
  • More care delivered close to home
  • Increase the number of staff delivering care

• Working in an integrated way, planning and delivering services focused upon local populations is essential to help us deliver these improvements
What is integrated care?

https://www.youtube.com/watch?v=3YdlV1DsK54
Becoming an Integrated Care System
What’s happening?
In south east London we are working as a partnership across CCGs, providers and local authorities to ensure we take collective responsibility for improving services for our residents; whilst living within our means.

What is an Integrated Care System?
Integrated Care Systems (ICSs) bring together local partner organisations to redesign care and improve population health, creating shared leadership responsibility and action.

We are creating partnerships of commissioners and providers in each borough and right across south east London in order to do this – and integrate care delivery.
The vision for south east London

Examples of what we want to build on:

Across the system:

• 2019/20 - contracts agreed across acute, mental health, community and primary care using a single south east London set of commissioning intentions and single commissioning and contracting approaches and teams. More consistency and better outcomes

• Over 1.7 million patient records viewed over 5.3 million times by clinicians in south east London. As a system, sharing records helps clinicians to make informed decisions faster improving productivity and benefits for patients.

• Patients in south east London who visit their GP with vague but worrying symptoms are now able to see a consultant and have several diagnostic tests on the same day at Rapid Access Diagnostic Clinics. Over 1,000 patients seen, 7% diagnosed with cancer, and 40% of those at an early stage.
The vision for south east London

Examples of what we want to build on...

More locally

**One Bromley** - GPs, community matrons, geriatricians, mental health services, social care and the voluntary and community sector have been working together in a new way to identify patients who may need extra support and have so far improved the quality of care of 3,400 patients with complex and long term health conditions. This way of working has also relieved pressure on the local emergency care system, reducing A&E attendances and admissions by 34% for this cohort in the first six months, allowing us save almost £1m that can be reinvested into services.

**Lambeth Together** - brings together health, care and communities to make it easy for people to connect to the right services and support and improve services for people. Through its Living Well Network Alliance, over 500 people a month access a multi-agency front door, for example get help with employment and housing; factors that have a huge impact on health and wellbeing. About 10 people each evening access its out of hours crisis support service, provided by voluntary and community sector organisations.
The Long Term plan focuses planning for populations at different levels

<table>
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<tr>
<th>Level</th>
<th>Population</th>
<th>Purpose</th>
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| Neighbourhood (Primary Care Networks PCN) | ~30-50k    | • Strengthen primary care  
• Network practices and other out-of-hospital services  
• Proactive & integrated models for defined population |
| Place (Borough) (Local Care Partnerships) | ~150-500k  | • Typically borough/council level  
• Integrate hospital, council & primary care teams/services  
• Develop new provider models for ‘anticipatory’ care |
| System (South East London ICS)      | 1+m        | • System strategy & planning  
• Develop accountability arrangements across system  
• Implement strategic change and transformation at scale  
• Manage performance and £ |
| Region                              | 5-10m      | • Agree system ‘mandate’  
• Hold systems to account  
• System development  
• Intervention and improvement |
The vision for south east London

Our south east London ICS will focus on very local neighbourhoods where people receive their health and social care and on hospital services that our residents access.

We aim to deliver the best health, wellbeing and care outcomes for the south east London population by developing a strong, safe and sustainable system that is fit for the future.
The vision for south east London

To do this we need to be able to co-ordinate services and make decisions in a joined up and responsive way across our boroughs.

We are proposing to create one CCG for south east London from April 2020. Place based boards in each borough will be responsible for local services, bringing together health and social care as part of the south east London CCG.
What does this mean for local residents?

• We will have more to spend on patient services by saving £4.7million in management costs by 2021.

• We will be able to plan services better:
  • across south east London, for example cancer care, maternity and planned operations
  • in each borough building on all the work being done to bring health and care services together to really focus on health needs and outcomes

• Becoming one CCG is just one step on our journey towards becoming an integrated care system. We will continue to involve patients and public as we develop new ways of providing health and care services in our boroughs and across south east London.
Our vision fits with the NHS Long Term Plan...

The Long Term Plan says.. And this means..

“ICSs will grow from the current network of Sustainability and Transformation Partnerships (STPs).

ICSs will have a key role in working with Local Authorities.

Commissioners will make shared decisions with providers on how to use resources, design services and improve population health.

Every ICS will need streamlined commissioning arrangements to enable a single set of commissioning decisions at system level. This will typically involve a single CCG for each ICS area. CCGs will become leaner, more strategic organisations.”

Our STP footprint, south east London (SEL), will be our ICS footprint. 95% of SEL residents get all of their care within this geography.

Working with local authorities has never been more important and we need to deepen our partnerships in each borough.

Commissioners and providers will work together as partners to collaborate and share responsibility.

We need to redesign our CCG architecture (noting there is no change in legislation – they are still required as a statutory bodies). Our approach is a SEL CCG and to introduce “place based boards” with partners in each borough.
Our Integrated Care System approach

A single CCG for south east London will support our ICS approach that considers how to:

- Support **Primary Care Networks** of primary, mental, and community care at a neighbourhood level

- Develop **Local Care Partnerships** - integrating health, social care and providers **within** the boroughs

- Work with **hospital and mental health trusts across multiple boroughs/ south east London** and specialist services **across and outside the ICS**

- South east London, working as a collection of health and care partners forms our **Integrated Care System (ICS)**

- Each level of this ‘system of systems’ will link together to provide the best support to our population, driving best value across health and care, and living within our means.

- We will also continue to work with other ICSs across London
Membership of a place based board

There will be a place based board in each borough with CCG and local authority representation with accountability to the local authority and the south east London CCG.

As a minimum, we expect it to include:

- A director* – accountable to the local authority and CCG
- GPs* – working with other CCG GP members
- A lay member*
- Healthwatch
- Director of Public Health
- Local authority officers

* Currently discussing whether 1 or 2. Will also be members of CCG Governing Body

There are ongoing discussions with local authorities about membership and the range of decisions the place based board will be responsible for.
How will we make sure that patients are involved in new structures?

• The CCG will still have a duty to involve patients in commissioning health and care and to ensure that patients are involved in their own health and care.

• We are developing communications and engagement plans setting out how we want to work with existing patient groups and forums to be sure that systems for involving public and patients remain strong.

• We expect that most involvement will happen at neighbourhood and borough level as it does now.
Our timeline

We are working toward a single SEL CCG and borough based systems in place by 1 April 2020

March 2019: Governing Bodies agreed to develop proposals to create one south east London CCG as a step towards becoming an Integrated Care System (ICS).

March to May: Inform stakeholder, staff and partners and get their views

May to July: Share and discuss our plans with patients and the public

September: Proposals to merge considered by Governing Bodies Application made to merge the south east London CCGs

April 2020: Establish a single CCG with placed based boards in each part of south east London
Questions and answers