

Report to OVERVIEW AND SCRUTINY BOARD

Oldham Cares Commissioning Arrangements Update

Portfolio Holder:
Councillor Chauhan

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and Chief Operating Officer

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03 March 2020

Purpose of the Report

To provide an update on the Integrated Commissioning Function.

Executive Summary

Oldham CCG and Oldham Council have committed to integrate fully to drive better health outcomes and reduce demand and therefore cost through the establishment of a single approach to commissioning (the ICF). This paper provides a progress report towards achieving that aspiration.

Recommendations

The Committee is requested to note the update requested and provided

Oldham Cares Commissioning Arrangements Update – Further update on simplifying the message

1 Background

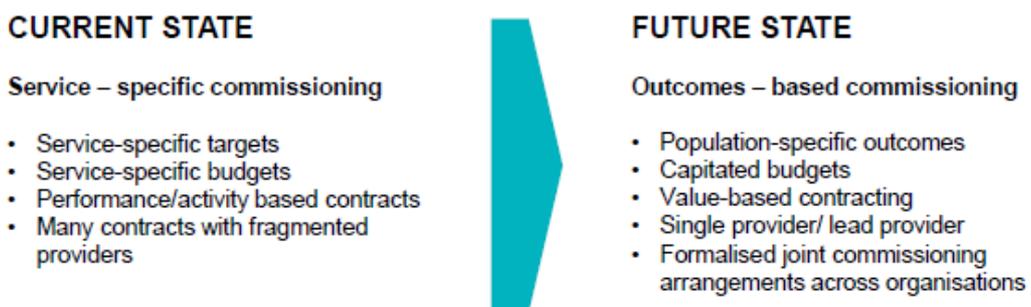
- 1.1 The Greater Manchester White Paper on Unified Public Services for the People of Greater Manchester commits each one of the 10 GM localities to an absolute focus on implementation of plans, building on key the elements of public service reform in Greater Manchester, including the development of a local care organisation (LCO) in each locality, pooling health and social care resources through an integrated single commissioning function in each locality, new models of provision with hospitals, and GM wide architecture such as the commissioning hub, digital and workforce collaborative and a ‘one public estate’ strategy.
- 1.2 The Locality Plan for Health and Social Care Transformation sets out Oldham’s contribution to ‘Taking Charge’, the Greater Manchester strategy for transforming health and care outcomes and achieving clinical and financial sustainability through devolution. This plan highlighted two major changes required to support its delivery – the development of an Integrated Care Partnership (ICP) and an Oldham Integrated Commissioning Function (ICF).
- 1.3 Oldham CCG and Oldham Council have committed to integrate fully to drive better health outcomes and reduce demand and therefore cost through the establishment of a single approach to commissioning (the ICF). To support and enable this ambition, Oldham CCG has been working under the single leadership of a Joint Chief Executive for Oldham Council and Accountable Officer for the CCG since 2018. A number of other joint posts have also been created where opportunities to align functions to support the new structure have arisen. However, as part of the continued establishment of the ICF, other senior posts will now be required to support the longer-term vision to allow integration across the whole of Health and Social Care for the Borough.
- 1.4 So, as the vehicle to commission for outcomes for the population, Oldham is planning and committed to the development of an Integrated Commissioning Function (ICF) and this forms a central part of our plans going forward. This ICF will create the conditions and environment to deliver Oldham’s vision, whilst continuing to develop and maintain a diverse and vibrant health and care economy that meets the needs and aspirations of local people as well as delivering excellent health and care services.
- 1.5 It is envisaged that the Integrated Commissioning Function (ICF) will create the conditions and environment to deliver Oldham’s vision for health and care, whilst continuing to develop and maintain a diverse and vibrant health and social care economy, that meets the needs and aspirations of local people, as well as delivering excellent health and social care services.

1.6 The case for change for an ICF is summarised as follows:

- Variation in care decision-making – significant variation impacts of quality, performance and economic stability across the system
- Ageing population – experiences multiple complex chronic conditions, with life expectancy for both men and women below the England average
- Integration – lack of integration between providers results in very complex and fragmented care for those with complex needs
- Accommodation – volume and quality of our community provision does not support independent living as well as it could, resulting in high levels of admission to residential care and nursing homes
- Urgent and emergency care – compared to other regions of England, NWAS takes the highest percentage of patients to A&E, while the second lost percentage of calls are resolved with phone advice
- Health inequalities – health outcomes different significantly across the Borough
- Constrained funding – means that all partners are facing unprecedented financial challenge
- Increasing demand – from individuals with complex health and care needs across the system. Oldham experiences high levels of emergency admissions combined with increasing pressures on primary care
- Children and young people – 1 in 4 children live in poverty. In some areas of Oldham children and young people’s health outcomes are worse than the national average
- Health and wellbeing – our adult population is less physically active, smokes more, and carries more excess weight than the England average and we have higher than average alcohol-related admissions to hospital.

1.7 The ultimate aim is for Oldham to move beyond service commissioning to commissioning for outcomes and community of identity with a focus on social value. We have developed a roadmap for that journey as follows:

SHORT TERM	MEDIUM TERM	LONG TERM
<p>In the short run, re-allocating commissioning responsibilities for certain individual service areas between Locality and GM level may create synergies and efficiencies</p>	<p>In the medium run, and in parallel to maximising efficiencies from commissioning services at scale, commissioners need to start building and piloting outcomes-based pathways for specific populations</p>	<p>In the long run, an integrated, patient-centred approach to care will have services that ‘wrap around’ the needs of users, with an emphasis on prevention. Outcomes-based commissioning will deliver social value across GM.</p>



1.8 The vision will be achieved by an integrated commissioning function that enables:

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- People to be more in control of their lives and their care
 - The conditions for a health and social care system that is focused on wellbeing and the prevention of ill health
 - Support and care which is as close to, and connected with, home and community as possible
 - Consistent, reliable, patient and community centred treatment and care that is available when necessary

1.9 Our ICF model is informed and influenced by NHS and local government regulatory and statutory requirements, as well as national, GM and local policy.

2 **Current Position**

2.1 A transformation programme has been formed to enable and govern the design and delivery of the ICF. The programme is led by a Design Group, Chaired by Mike Barker, Strategic Director of Commissioning.

2.2 Membership of this design group is as follows:

- Mike Barker, Strategic Director Commissioning, Chief Operating Officer
- Gerrard Jones, Managing Director of Children and Young People (DCS)
- Mark Warren, Managing Director Community Services (DASS)
- Katrina Stephens, Director of Public Health
- Julia Veall, Director of Workforce and Organisational Design
- Erin Portsmouth, Director of Corporate Affairs (CCG)
- Anne Ryans, Director of Finance (Oldham Council)
- Ben Galbraith, Director of Finance (CCG)
- Lyn Brankin, Associate Director of Estates (CCG)
- Nicola Hepburn, Associate Director of Commissioning (CCG)
- Chris Petrie, Head of IT (Unity)
- Frank Dick, Interim Assistant Director Transformation and Reform
- Debra Ward, Transformation Programme Manager

2.3 To support its work a series of task and finish workstreams have also been established to help drive the delivery the projects and tasks needed. These workstreams have been defined as follows:

- Commissioning processes: how will we commission services, what processes or frameworks will be deployed and used
- Digital: what IT is needed to support the ICF given that this is about bringing tow organisation's together
- Engagement & communications: how will keep stakeholders informed on progress including staff
- Estates: where will the ICF team/s be based and located
- Finance: how much money will we have to commission and how will that be assigned
- Governance: what decision-making bodies will we need and how will they work
- Intelligence & insight: what business intelligence systems and processes are needed
- Workforce & Organisational Design: what staffing structures are needed

2.3 The programme will be phased with the first phase focusing on co-locating CCG and Oldham Council's commissioning teams covering Adults and Children's currently based at Ellen House to the Civic Centre. The move to the Civic Centre fits in with Oldham's commitment to developing an integrated commissioning function for health and social

care, while also moving towards integrating a range of support services between the CCG and the Council. A workforce and OD plan is in development to ensure staff are supported before, during and after the co-location, as a first step towards an function.

2.4 An engagement and communication plan is in development. One of the key areas this will address is a narrative on what the ICF will be, including its vision and purpose.

2.5 Further phases are currently being scoped in detail, but will focus on creating the ICF, bringing together existing commissioning functions across Oldham Clinical Commissioning Group and Oldham Council. Updates will be provided in future reports.

3 Key Issues for Overview and Scrutiny to Discuss

3.1 There are no specific matters to draw to the Committee's attention at this stage. Work is developing and there will be the usual challenges associated with bringing two organisations, budgets and teams together into a single space and there is a commitment to provide further updates reports to the Committee as the programme progresses.

4 Key Questions for Overview and Scrutiny to Consider

4.1 This report is designed to be an update report on progress made towards the delivery and implementation of a new integrated commissioning function for Oldham whereby the Council and CCG comes together. This is inline with the Greater Manchester model for public service reform

5 Links to Corporate Outcomes

5.1 This development will contribute towards enabling the Oldham model – thriving communities, inclusive economy and co-operative services - to be implemented.

6 Additional Supporting Information

6.1 There are no supporting documents to this paper.

7 Consultation

7.1 There are no requirements to consult publicly on these proposals. Where necessary and appropriate staff will be and are being consulted and Council and CCG approvals processes are being used to oversee such matters, for example Selection Committee and Remuneration Committee.

8 Appendices

8.1 There are no enclosed appendices.