

Commissioning Partnership Board Report

Decision Maker	Commissioning Partnership Board
Date of Decision:	27th September 2018
Subject:	GM Transformation Fund Investment Review and Assurance Process - Update and Approval of further Schemes
Report Author:	Donna McLaughlin, Alliance Director, Oldham Cares Vicky Crossley, Associate Director of Oldham Cares Programmes Sarah Harris, Oldham Cares Programme Manager - Enabler Services

1) Summary:

The purpose of this report is to provide the Oldham Cares Commissioning Partnership Board (CPB) with assurance and an update on progress against the implementation of transformation proposals for health and social care funded through the Greater Manchester Transformation Fund (£21.3m of funds overall). Approval is sought for the delegations of up to £1.1 million for spend on proposals relating to pilots in services for Integrated Community Care during 2018/19, to the Oldham Health and Social Care Joint Leadership Team. The Commissioning Partnership Board (CPB) are assured that investment continues to support care pathway development in Oldham for prevention, community resilience and care closer to home in line with local, regional and national requirements.

This report follows on from Transformation Funded proposals presented to the CPB in June 2018 and System Resilience Funding in August 2018. Also provided at appendix A is a copy of the letter sent by NHS England and NHS improvement on guidance relating to Supporting the delivery of elective and emergency care (see letter of 7th September at *appendix_A_Letter_Nat_Dir_UEC*).

2) Alternative options:

1. Option1 - The CPB are asked to agree the recommendations at Section 3.
2. Option 2 - The CPB not to agree the recommendations; this puts transformation funding set aside for the Oldham locality plan and winter resilience at risk as it will delay decision making and so, funding is likely to be re-assigned to another GM locality programme.

3) Recommendation(s):

The CPB are asked to note the content of this report and be assured that :

3.1 The transformation proposals continue to support the delivery of the Oldham Vision and

Outcomes Framework for the people of Oldham as well as the national NHS requirements for service developments. They enable a sustainable Health and Social Care system closer to home and reduce the reliance on acute hospital services. They deliver Oldham Care's commitment to create a health and social care system which is focused upon prevention and early intervention in our "Thriving" Communities.

- 3.2 The outstanding equality impact assessments highlighted in CPB's June 2018 report have now been completed (*see appendix B1 – B4*). These have been undertaken independently by the Greater Manchester Shared Services on behalf of the CCG for the Thriving Communities, Start Well (Avoidable Admissions) and Mental Health proposals and there are no recommendations to implement.
- 3.3 A robust governance process for the allocation of transformation funding and the development of the plans has been followed for the new proposals for Integrated Community Care. The implementation plan for the CPB June approved proposals relating to Thriving Communities, Start Well (Avoidable Admissions) and Mental Health is on track as per the CPB report in June 2018.
- 3.4 Revised Investment proposals and accompanying Equality Impact Assessments relating to Integrated Community Care now demonstrate a sufficient evidence base for the CPB to delegate up to £1.1m of GM Transformation Funding to the Oldham Health and Social Care Joint Leadership Team. These proposals relate to Community Enablement Short Term proposals, Frailty Pathway Design and the Primary Care Led Urgent Treatment Services pilot continuation. The Leadership Team will consider further the financial sustainability plans for the proposals before commencement into pilot implementation and specifically the short term, winter resilience, proposals for Community Enablement. This recommendation is with exception of the Urgent Care Cluster Offer, whose proposal will be presented in more detail at a future CPB in October 2018 for approval.
- 3.5 The risks highlighted in this report have sufficient mitigating actions to reduce their likelihood, including ensuring adherence across the system to implementing gateway review points, the evaluation of pilots and a robust change management methodology. Oldham has also ring-fenced £50k per year for three years to the GM evaluation of the transformation programmes.
- 3.6 Release of funds by Oldham Cares (CCG fund holder) will be subject to;
 - a) Confirmation that proposed service changes will deliver sufficient savings both to contribute to the financial sustainability challenge and cover the incremental costs of the new service; and
 - b) A quarterly review process, assuring the Commissioning Partnership Board that adequate progress is being made.
 - c) An equality impact assessment being produced for each proposal

4) Background:

- 4.1 **Oldham's** vision is to achieve and sustain the greatest and fastest improvement in wellbeing and health for the 225,000 people of Oldham. Through innovative programmes, new ways of working, and partnerships our population will be encouraged and empowered to:
 - take more control, improve their life chances, reduce risks to health and live well and adopt healthy lifestyles
 - access care and support at an earlier stage and
 - manage their own conditions and live independently.
- 4.2 **Stakeholder engagement** is a key principal of Oldham Cares. Stakeholders which have been involved on the journey toward these proposals include Health and Wellbeing Board members, System Leaders and Citizen participation.

4.3 The key areas of focus described in **Oldham's Locality Plan** are the fostering of thriving communities, the transformation of primary, community and social care services, mental health and early years. We also describe the mobilisation of a workforce that includes other parts of the public sector, social housing, the voluntary and private sectors, carers and citizens.

4.4 The **Outcomes Framework** for Oldham was agreed by the Health and Wellbeing Board in January 2018. The framework sets out a range of high level outcomes based on key changes planned over the next decade. It describes the priorities that the whole system will work together to deliver and will inform commissioning priorities and performance management.

The 12 high level outcomes can be found in (*Appendix C – Outcomes Framework*)

4.5 In April 2017 a bid was submitted for £23.2m of **Greater Manchester Transformation Fund** monies to support the realisation of our ambitions (see 4.7 below for final allocation).

As outlined in Greater Manchester's Transformation Fund Investment Agreement with Oldham, a Central part of our plans are to increase the pace and scale of delivery of our Locality Plan which will improve care and close our forecasted financial gap of £71m through:

- Supporting people to be more in control of their lives
- Having a health and social care system that is geared towards wellbeing and the prevention of ill health.
- Providing access to health services at home and in the community
- Providing social care that works with health and voluntary services to support people to look after themselves and each other

4.6 Our funding is to support Health and Social Care Transformation that builds on the work undertaken in Oldham over the last 4 years to progress our vision around integrated care. **Our transformation funding is for the following schemes;**

1. Establishing the primary care cluster system across the locality, completing the establishment of integrated health and care teams and creation of single structures at a GP cluster level
2. Creating and implementing a more effective urgent and emergency care offer
3. Oldham's community re-ablement, rehabilitation and community bed services (including a rapid response facility)
4. Oldham's approach to community resilience, branded as 'Thriving Communities'

4.7 In October 2017, approval was successfully received for an **Oldham allocation of £21.3m, a reduction of £1.9m**. This adjustment reflected monies which were not deemed transformation costs by NHS Greater Manchester Health & Social Care Partnership (GM H&SCP). It has been acknowledged by GM H&SCP that the allocation of the GM Transformation Funds is over-committed and programmes are not guaranteed if there is under delivery or non-recoverable slippage in transformation plans.

4.8 Since November 2017, Oldham has had in place **an Investment Review and Assurance Process** to enable robust and fully costed transformation proposals

to be developed and committed. A deadline of the end of June 2018 was set for the completion of proposals to accelerate the pace of Oldham's transformation start-up phase and avoid losing overcommitted Greater Manchester funds to other localities. An outcome of this approach has been to strengthen Oldham Care's approach to integration from the outset and Oldham was successful in securing funding for Oldham in 18/19 and beyond based on the current performance of its transformation development.

- 4.9** To add to this, NHS England and NHS improvement's recent guidance on Supporting the delivery of elective and emergency care (see letter of 7th September at (*appendix_A_Letter_Nat_Dir_UEC*), supports Oldham's transformation proposals as being in line with national planning ambitions. These plans require Oldham to deliver 90% performance against the four hour operational target over winter and contributes towards the national target of a 25% reduction in the the number of long stay patients in hospital through schemes, as in Oldham's proposals presented in this paper to the CPB, that include enhanced winter support from local social services. Oldham's proposals aim to meet the national requirements and demonstrate that the system is on target for identifying and implementing a set of interventions designed to free up non-elective demand capacity, reduce length of stay and ensure that a greater proportion of patients receive the appropriate level of care, including in a patient's own homes.

5) Financial implications:

- 5.1** The £21.3m of funding received from GM has been allocated across Oldham Cares Transformation programmes based upon an expected level of non-elective deflections from key transformation proposals.
- 5.2** As outlined above, a central part of our plans are to increase the pace and scale of delivery of our Locality Plan which will improve care and close our forecasted financial gap of £71m.
- 5.3** To develop plans around our transformation, six service component work streams were initially established to scope and design the plans with the following accountable leads. As the Investment Review and Assurance Process has progressed, we have reviewed the approach to integration in key areas as outlined in Section 4.6 above.

Thriving Communities
Mental Health is Central to Good Health
Start Well – Avoidable Admissions
Integrated Community Care
<ul style="list-style-type: none"> • Core & Extended Primary Care • Community Enablement • Urgent & Emergency Care

- 5.5** To be assured of transformation plans in each of the component areas and to ensure we continue to constructively challenge ourselves and learn, the Oldham Cares Investment Review and Assurance process for the allocation of funds has been implemented and an assurance assessment against the delivery of our transformation plans is undertaken on a quarterly basis.
- 5.6** Each work stream listed above produced individual proposals for the Commissioning Partnership Board to review and it was agreed that in order to

strengthen our approach to integration and achieve better outcomes, Core & Extended Primary Care, Community Enablement and Urgent & Emergency Care would work together under the combined proposal of Integrated Community Care.

5.7 In June 2018, CPB were presented with four proposals that had been reviewed and assessed at each stage of the Investment Review and Assurance Process (see detail below). A summary of the recommendations in June are outlined in the table below. These indicated the complexity and risk associated with each proposal. The first three listed below (Thriving Communities, Mental Health is Central to Good Health and Start Well) were approved and Funding has been allocated according to the recommendations and activity requirements outlined in Section 3 and Section 4 of this report. The final proposal relating to Integrated Community Care was not approved and so further revisions on this proposal are presented in this paper.

5.8 At the meeting of June 2018 an outstanding action was to complete equality impact assessments. These have been completed as noted below by GMSS on behalf of the CCG and there are no recommendations to note for Commissioning Partnership Board. These assessments can be found at (appendix B1 – B4).

Proposal	Summary of the Investment Review and assurance recommendations to CPB in June 2018 and approval	CPB Update for its September 2018 Meeting
Thriving Communities	Successful delivery of the transformation to time, cost and quality appears highly likely and there are no major outstanding issues that at this stage appear to threaten delivery.	Implementation has commenced. Scoping of Cluster East assets Equality impact assessment complete with no Recommendations
Mental Health is Central to Good Health	Successful delivery appears probable and funding is to be allocated at the pilot stage.	Implementation has commenced with recruitment underway Equality impact assessment complete with no Recommendations
Start Well	Successful delivery appears feasible and funding is to be allocated at the pilot stage	The pilots will commence in October 2018. Equality impact assessment complete with no Recommendations
Integrated Community Care	Whilst the care models demonstrate improving the outcomes for people in Oldham, the financial principles of the investment needs re-visiting for affordability before commencement into implementation. The five cluster model for Oldham will continue development and will be led by the Chief Clinical Officer for Oldham CCG	This proposal was not approved But revised proposals are submitted in this Sept report as pilots for: <ul style="list-style-type: none"> • Community Enablement Short Term • Frailty • Urgent Care Offer • Primary Care Led Urgent Treatment Services • Urgent Care in Clusters to follow in detail in October

5.9 Revised proposals for Integrated Community Care

5.9.1 Proposals have been reviewed at each stage by a wide range of stakeholders across Oldham Cares. The assessment criteria were produced by Oldham Cares PMO in line with Greater Manchester Transformation bid criteria and best practice from the Government's Infrastructure and Projects Authority Assurance Review Toolkit (OGC Best Practice and available on request) with regards to assessing readiness for implementation at a gateway review point.

5.9.2 The process for assessment has been iterative to ensure reflection and the triangulation of stakeholder requirements are incorporated into the proposals where necessary (i.e. LTFFP group RAG rating assessments have been conducted in order to ensure robust and objective feedback to authors in a consistent manner). Each proposal has been assessed using robust criteria and revisions have been taken through the relevant decision making groups including the Long Term Financial Planning Group with finance representatives from across Commissioning and Providers and the Alliance Board.

Revised Investment proposals relating to Integrated Community Care now demonstrate a sufficient evidence base for the Commissioning Partnership Board to delegate up to £1.1m of Transformation Funding to the Oldham Health and Social Care Joint Leadership Team. The Leadership Team will consider further the financial sustainability plans for the proposals before commencement into implementation and specifically the short term proposals for Community Enablement. This is with the exception of the Urgent Care Cluster Offer, whose proposal will be presented in more detail to CPB at their October meeting.

5.9.2.1 Urgent Care Cluster Offer – the revisions to the original proposal will be presented to the Commissioning Partnership Board at their October meeting.

5.9.2.2 Primary Care Led Urgent Treatment Service at the Royal Oldham Hospital – a pilot has been running for this service since 16/17 and will run until March 2019 when it will be evaluated and recommendations will be submitted to CPB for review and approval alongside other pilots being reviewed for 2019/20.

5.9.2.2 Frailty – the development of a frail elderly pathway is a priority recommendation from Oldham's Urgent Care Strategy approved by the Alliance Board at its July meeting. The proposal is to scope frailty with a view to producing a business case/ implementation plan by March 2020.

The Equality Impact Assessment (EIA) has been completed by GMSS on behalf of the CCG for this proposal, with no recommendations to implement.

5.9.2.3 Community Enablement – the decision required from the CPB is to agree those proposals which can be funded in the short term with a view to demonstrating longer term benefits to the system and a sustainable financial plan. The Community Enablement proposal is to deliver an enhanced community health and social care response service operating seven days per week which consists of the following:

- **An Integrated Community Response Service** – a step-up service that provides people with complex health and social care issues, at risk of hospital admission, with an alternative and includes;
 - In partnership with NWAS provide an Urgent Response Service that intercepts Grade 3 (urgent) and Grade 4 (less urgent) calls to prevent

- A&E attendance and admission;
 - Establish a Home-based IV Fluids Service to deliver fluids to people in the community rather than at hospital. The service will provide IV fluids in the person's own home. This includes Care Home and Nursing Home residents
 - Introduce seven-day working for social workers located alongside the Integrated Home Response Service
- **Pilot a MSK Physio First Contact Project** that will use MSK physiotherapists as a first contact for MSK conditions rather than a GP appointment, this will initially be piloted in one of the five clusters;
- **Establish MDT Co-ordination** across the five clusters to ensure the involvement of primary care, community health and social care; Introduce new Community Equipment practices to support people to remain at home

The Equality Impact Assessment (EIA) has been completed by GMSS on behalf of the CCG for this proposal, with no recommendations to implement.

6) Procurement implications:

Oldham Cares is an Alliance of providers. The transformation outlined in this report, largely relates to a reconfiguration of existing services. However, should procurement be required for new services, advice on procurement will be sought and approval will be sought from the CPB to progress.

7) Legal implications:

There are no identified legal considerations with regards to this report at this stage, but legal advice will be sought as necessary when proposals progress. CPB will be advised on legal implications.

8) Human resource implications:

Proposals and staff recruitment in existing commissioned services are being considered by the Oldham Cares Governance including the Health and Social Care Joint Leadership Team and the Alliance Board.

9) Equality and Diversity Impact Assessment:

Requirements for the completion of important Equality Impact Assessments (EIA) are identified within the Oldham criteria for Transformation Funding. (*Appendix B1 – B4*) provides a copy of those assessments conducted to date. Given the stage of development for the integrated care proposals, further review in these areas is required before commencement of implementation.

10) Property implications:

An Estates work stream has been established for the transformation programme and CPB will be advised on any property implications when determined.

11) Risks:

The CPB are asked to note the following risks to funding and implementation highlighted by the Investment Review and Assurance Process and the mitigating actions. An update on progress is provided below as agreed with the CPB at its June 2018 meeting.

- 11.1 Evidence is required around outcomes and financial sustainability when the Transformation Funding ceases post 20/21. Pilots have been identified and a financial sustainability plan is being drafted following these and the development of the Oldham Cares blueprint in line with national NHS planning deadlines.
- 11.2 Further technical groups for Procurement and Clinical Quality require establishment. As an update for this September CPB report, these groups have been established and leads identified.
- 11.3 We are aware of staffing shortages in the health and social care market and skills gaps in the current workforce of commissioned services. A workforce strategy for Greater Manchester and Oldham is in the process of being developed and in key areas, e.g. nurse recruitment, to facilitate the mitigation of these risks and the Alliance will meet in September to agree how it strengthens its approach to risks in this area.
- 11.4 The Estates options requires development to enable appropriate and sufficient staff accommodation. A process for Estates prioritisation relating to the transformation has been established with the Oldham Strategic Estates Group.
- 11.5 Public engagement in the Oldham Cares system is acknowledged as requiring further development. The Oldham Cares Alliance continues to strengthen this approach.
- 11.6 Greater Manchester Health & Social Care Partnership is able to reduce allocations should decision making in the locality be delayed and if they do not consider the transformation achievable. In discussions with GM since June 2018, Oldham Cares has secured its funding for 18/19.
- 11.7 Oldham Cares Provider Alliance Forum has identified that self-care (and its link to prevention) requires strengthening in proposals. The Alliance Director plans to meet with Public Health in September to strengthen the alignment of the proposals with developments in this area.
- 11.8 The undertaking of Equality Impact Assessments is an important requirement of the Investment Review and Assurance Process. These have been completed for proposals due to pilot and further work is required for the Integrated Community Care Investment proposals

12) Proposals:

Part B of this report outlines proposals of a commercially sensitive nature in more detail. The key summary of the proposals and recommendations are found in Sections 4-5 above.

13) Conclusion:

The Commissioning Partnership Board is provided with the assurance that Oldham Cares has secured its position with regards to assuring GM H&SCP of its Transformation fund allocation of £21.3m. The ambition is to deliver health and social care transformation plans during 2018/19-2020/21.

Has the relevant Legal Officer confirmed that the recommendations within this report are lawful and comply with the Council's Constitution/CCG's Standing Orders?

The report complies with the CCG's standing orders as the fund holder.

Has the relevant Finance Officer confirmed that any expenditure referred to within this report is consistent with the S.75 budget?

Yes

Are any of the recommendations within this report contrary to the Policy Framework of the Council/CCG? No

List of Background Papers under Section 100D of the Local Government Act 1972:

(These must be Council documents and remain available for inspection for 4 years after the report is produced, there must be a link to these documents on the Forward Plan).

Title	Available from
Transformation Investment review report - update	http://decisionrecording.oldham.gov.uk/documents/b21597/Private%20GM%20Transformation%20Fund%20Investment%20Review%2028th-Jun-2018%2012.30%20Commissioning%20Partnership%20Boa.pdf?T=109 August 2018 – SRG
Transformation Investment Appraisal – Commissioning Partnership Board	http://decisionrecording.oldham.gov.uk/documents/s95112/CPB%20TF%20investment%20appraisal%20v3%20June%202016.pdf June 2018 – Commissioning Partnership Board
Greater Manchester Health and Social Care Strategic Partnership Board – Transformation Fund Update	http://decisionrecording.oldham.gov.uk/documents/s84817/Appendix%201%20-%20Transformation%20Fund%20Update.pdf July 2017 – Health & Wellbeing Board
ICS Developments and GM Transformation Fund	https://committees.oldham.gov.uk/documents/s77566/ICS%20Developments%20and%20GM%20Transformation%20Fund.pdf March 2017 – Health & Wellbeing Board
GM Health & Social Care Transformation – Oldham Integrated Commissioning Organisation (ICO) and Transformation Fund Submission	http://decisionrecording.oldham.gov.uk/documents/s76067/Local%20Care%20Organisation%20and%20Transformation%20Fund%20Update.pdf January 2017 – Health Scrutiny
Integrated Commissioning System and GM Transformation Fund Update	http://decisionrecording.oldham.gov.uk/documents/s76494/Integrated%20Commissioning%20System%20and%20GM%20Transformation%20Fund%20Update.pdf January 2017 – Health & Wellbeing Board
Update on the Oldham Transformation bid Proposal	http://decisionrecording.oldham.gov.uk/mgConvert2PDF.aspx?ID=74374&ISATT=1#search=%22transformation%20%22 October 2016 – Health & Wellbeing Board

<p>Report Author Sign-off: Donna McLaughlin, Alliance Director Oldham Cares Vicky Crossley, Associate Director of Oldham Cares Programmes Sarah Harris, Enabler Programme Manager</p>
<p>Date: 18 September 2018</p>

Appendix number or letter	Description
Appendix_A_Letter_Nat_Dir_UEC	Letter sent by NHS England and NHS improvement on guidance relating to Supporting the delivery of elective and emergency care
Appendix_Bi_EIA_TC	Thriving Communities Equality Impact Assessment (EIA)
Appendix_Bii_EIA_SW	Start Well (EIA)
Appendix_Biii_EIA_PMPC_MHCGH	Psychological Medicine in Primary Care (EIA)
Appendix_Biv_EIA_CMHL_MHCGH	Community mental Health Liaison (EIA)
Appendix_C_Outcomes Framework	Outcomes Framework