Joined Up Care Derbyshire

Joined Up Care Derbyshire

5 Year Strategy Delivery Plan:

2019/20 to 2023/24

The Requirements

Joined Up Care Derbyshire

- Every Sustainability and Transformation Partnership (STP) and Integrated Care System (ICS) to **develop five-year Long Term Plan implementation plans, covering the period to 2023/24 by Autumn 2019.**
- This must form **our response for implementing the commitments set out in the to the NHS Long Term Plan** with 2019/20 as the transitional year.
- *'ICSs will be central to the delivery of the Long Term Plan';* we must plan to become an ICS by **April 2021**.
  - Partnership Board established with key role in working with Local Authorities at 'place' level
  - Commissioners will make shared decisions with providers on how to use resources, design services and improve population health.
  - Streamlined strategic commissioning arrangements to enable a single set of commissioning decisions at system level, which support providers to partner with local government and other community organisations on population health, service redesign and Long Term Plan implementation.
  - A whole system approach to focus on the cost-effectiveness of the whole system is required.
- Commissioners and Providers will shared new duties to deliver the 'triple aim' of better health for everyone, better care for all, and sustainability'
- Be built on strong engagement at all levels

Our Response:
Framing The Joined Up Care Derbyshire Strategy Refresh

Joined Up Care Derbyshire

- Our plan would be outcomes driven so that the citizens of Derbyshire ***'have the best start in life, stay well, age well and die well'***
- We were not 'throwing baby out with bathwater' – this was a 'refresh' not re-write'
- The Derbyshire ambition to deliver the Triple Aim would remain at the forefront
- We would learn from the 2016 STP Plan
- We would build on that which we believe still holds true, and test this in our approach
- We would focus on making improvement in wider determinants of health such as housing, education and air pollution management leading to improved outcomes for people in Derbyshire. In doing so, ensure that partners beyond the NHS are involved developing and subsequently delivering our 5 year plan
- We would ensure there is a stronger focus on addressing inequalities and population health management
- The refresh would be informed and developed through strong engagement with people, patients, staff and wider stakeholders – this would drive our approach.
- **We recognised that the 5 year plan is a requirement to demonstrate how we will implement the NHS Long Term plan – we would take a whole population approach ensuring this is done with our Local Authority partners**
- **We would focus on people not patients**

Joined Up Care Derbyshire

Our Mission

(Why are we here)

To improve population health outcomes for the people and communities we serve

Our Vision

(What do we want to achieve)

For people to have the best start in life, to stay well, age well and die well

Case For Change

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- By 2033, 1/3 of people in Derbyshire will be >65
- Life expectancy ion Derbyshire significantly lower in Derby than England average
- Premature mortality is significantly worse than England average and driven by respiratory illness, MSK, Mental Health, falls, cardiovascular disease, liver disease (diabetes)
- Issues with diet, smoking, substance abuse, physical activity (diabetes)
- We know that across Derbyshire people are living longer in ill health and significant inequalities exist
- The period in people's lives when they require health and social care support, the 'Window of Need', is steadily rising.

Case For Change

Thriving Places

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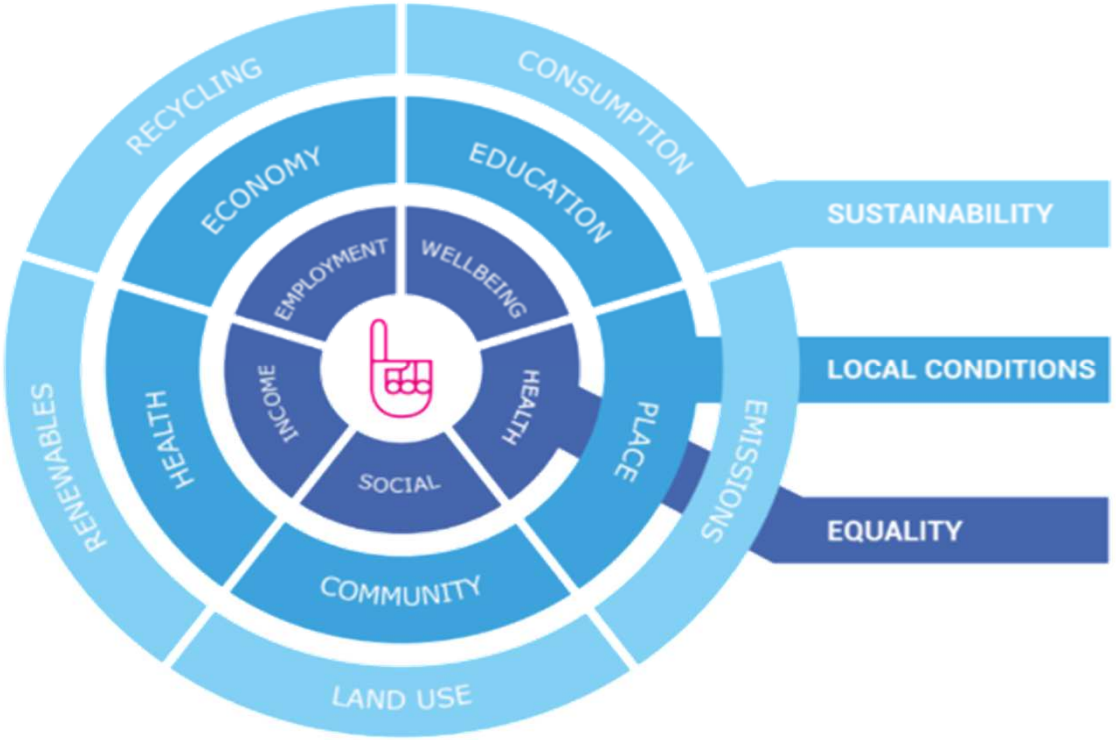
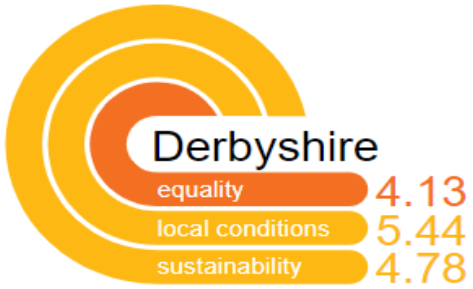
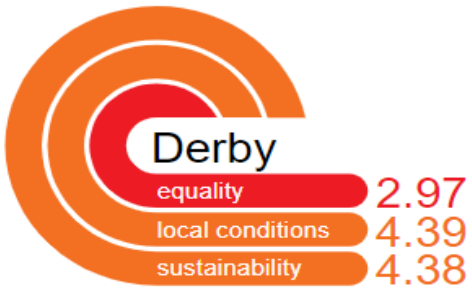
A broad set of indicators that measure local conditions for wellbeing, and whether those conditions are being delivered fairly and sustainably







In comparison to all upper tier authorities, on average both Derby City and Derbyshire County score in the lower fifth (score out of 10)

Our Delivery Model

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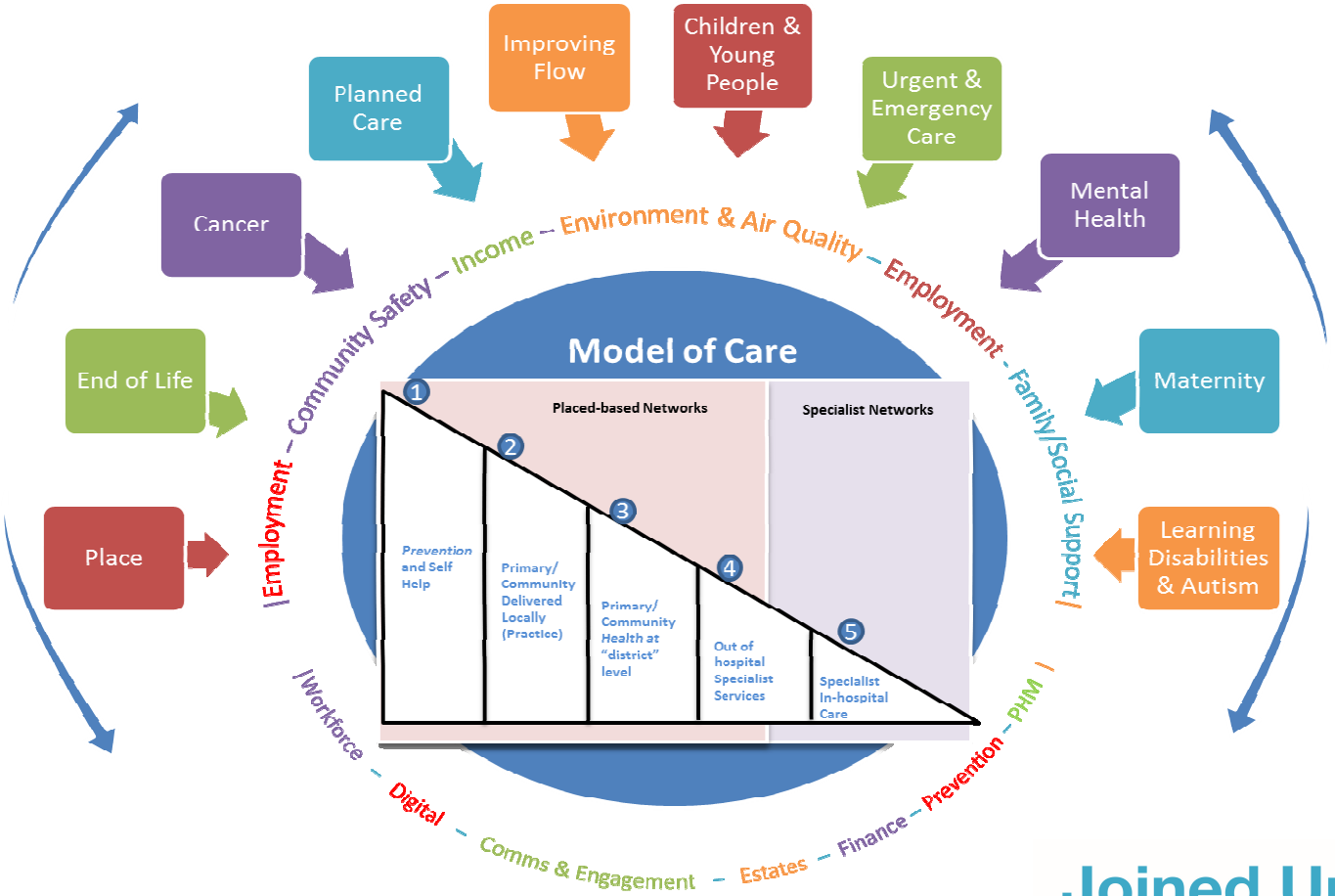
Ensuring people have the best start in life, can stay healthy, age well and die well



Derby City Council

DERBYSHIRE County Council

NHS

Joined Up Care Derbyshire

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Derbyshire

*What this means…..

- Integrated care teams in each of our Place Alliances enabling more effective care closer to home and contributing a 4.5% reduction in non-elective admissions
- Better cancer screening uptake for Breast (80%), Cervical and Bowel (75%) leading to 62% of all cancers to be diagnosed at an earlier stage by 2020
- More people with dementia and delirium being supported in their own home or in a place they call home
- Provision of 24/7 service for Children and Young People requiring urgent care response for children with mental/emotional behavioural needs
- 30% of non-elective attendances treated as same day emergency care
- A combined primary care and mental health wellbeing service
- Fewer women smoking at time of delivery (11% by 2020, 10% by 2021 and 6% or less by the end of 2022)
- Implementation of a service for High Intensity Users (HIU) with chaotic lifestyles which enables targeted proactive care management

* Based on 2019/20 delivery plans. To be updated as STP Refresh is completed.

Financial Challenge

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- £1.6bn budget for NHS services in Derbyshire; plus local authority budgets
- Specific NHS Plan commitments to be delivered through additional LTP funding allocations – £10.4m in 2019/20 rising to £31.8m in 2023/24
- Significant financial pressures
  - £151m funding gap across the Derbyshire NHS, total of CCG QIPP and provider CIP
  - Financial pressure in local authority
- Planning work continues to understand the financial implications of schemes
- Continued opportunity to transform and improve care, whilst at the same time making the system more efficient
- Securing sufficient capital funds to support system ambitions

Workforce Landscape

Joined Up Care Derbyshire

- To genuinely deliver 21st century integrated care, will require growth in our workforce, transformation in the roles and ways of working.
- We need to make the health and care system a better place to work to be able to recruit and retain the staff we need
- 53% of staff currently work in acute care setting; staff will need to be moved increasingly into community settings, working alongside a more diverse team from health, care and voluntary sector
- Workforce numbers:
  - 16% of GPs aged 55+ with likelihood of retirement in next 5 years
  - Slightly below target for our General Practice Nursing, by 0.4% (2 Nurses)
  - More GPs due to complete training this year, with the aim to retain in Derbyshire
  - Nursing vacancies are currently running at 8% across NHS trusts
  - Vacancy rate for registered nurses in social care is 9% Derbyshire and 7% in Derby
  - Vacancy rates for Care Workers are 6% Derbyshire and 9% in Derby, with Senior Care Workers at 5% and 6% respectively
- Need to focus on improvement to staff health and wellbeing, as well as improving career pathways and development – now part of the quadruple aim.

Five Priorities

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1. **Place-based care:** We will accelerate the pace and scale of the work we have started through the previous transformation programmes in the North and South of the County to 'join up' primary care, mental health, community services, social care and the third sector. So they operate as a single team to wrap care around a person and their family, tailoring services to different community requirements.

2. **Prevention and self-management:** By preventing physical and mental ill health, intervening early to prevent exacerbation and supporting self-management, we will improve health and wellbeing as well as supporting redesigned care models and improved efficiency through moderating demand.

3. **Population Outcomes:** We will focus on improving the outcomes for the people of Derbyshire by applying an effective Population Health Management approach

4. **System efficiency:** We will ensure ongoing efficiency improvements across commissioners and providers are a key component of ensuring we address the Derbyshire financial challenge.

5. **System Development:** Manage the Derbyshire system through an aligned leadership and governance approach, supported by aligned incentives and a single view of system performance.

Engagement in the Plan

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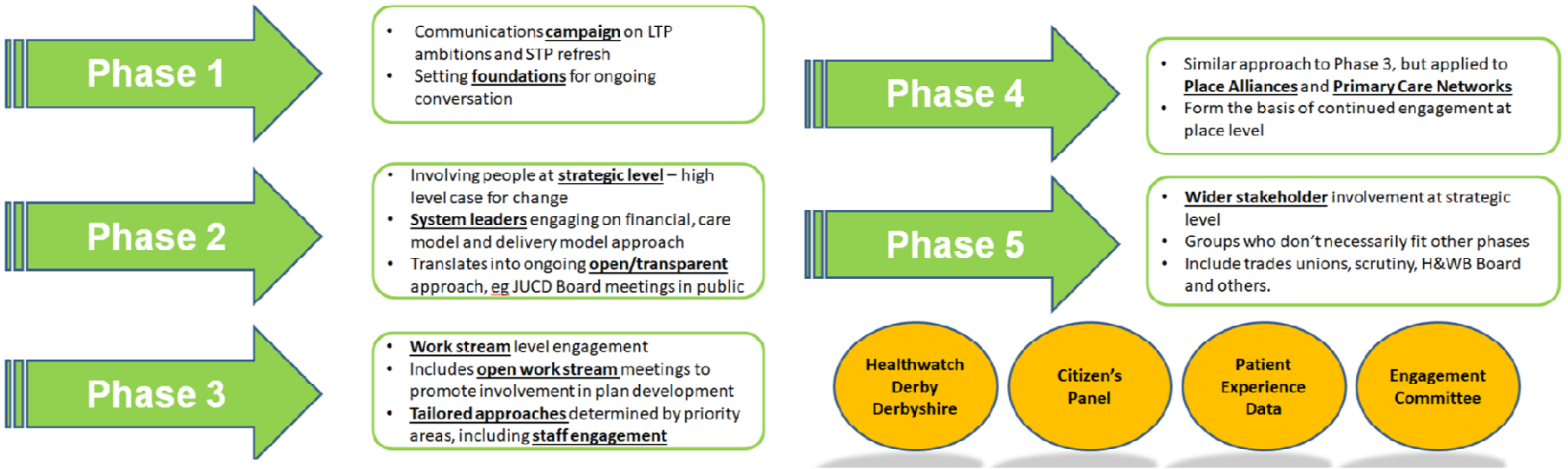
Our approach

- Took place between April and September 2019.
- Ensured that a wide range of stakeholders, including staff, patients, their carer's and members of the public had the opportunity to help shape the plan.
- Underpinned by 5 phases, inviting engagement at a variety of different levels.
- Included the development of the Joined Up Care Derbyshire (JUCD) Citizens' Panel, which now has in excess of 1,600 members
- Supplemented by engagement conducted by Healthwatch Derby and Derbyshire, which included workshops aimed at seldom heard and marginalised groups.
- Will form the basis of continuous engagement in the work of JUCD going forward.



Engagement in the Plan

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What engagement took place?

- All work streams utilised either established engagement mechanisms, open meetings and/or confirm and challenge sessions with their stakeholders to test out thinking and priorities during July and August
- Five Place Alliances held events during July 2019 to discuss the model of care, the NHS long Term Plan and wider determinants of health. Two other places used existing engagement forums and south Derbyshire will hold their event shortly. 35 - 60 people attended per event.
- 80 stakeholders from broad range of backgrounds (politicians, voluntary sector, NHS staff, patient groups) attended discussion session with JUCD Board in September 2019 to comment on strategic aims of the plan
- Healthwatch received input from more than 500 people through surveys and focus groups. Key questions included:
  - How they people be supported to live healthier lives from birth to old age
  - What services can do to provide better support (particularly for specific conditions, such as cancer, mental health, dementia, heart and lung conditions, learning disabilities, and autism)
  - How the NHS can make it easier for us to take control of our health and wellbeing
- 40 members of Citizen's Panel have attended confirm and challenge sessions, hearing the details of urgent care, children, Learning Disability and disease management plans
- First Citizen's Panel issued in August on 'online access to health services'.

Delivery Areas

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Urgent Care	Planned Care
Continue to provide more urgent care services outside of hospital	Implement a Minor Eye Conditions service at Primary Care Network level
Mental Health nurses in ambulance control rooms	Delivery of RightCare to reduce the cost of delivering MSK services by £8m
Fully implemented Clinical Assessment Service for 111 triage, and 24/7 clinical advice hub for 111, 999 and out-of-hours	Implementation of patient initiated follow-ups pathways and improved opportunities for self-management
Consistent offer of same day urgent care services in primary care	Review and where necessary redesign 'end to end' ophthalmology pathways
Expansion and redesign of emergency departments, including primary care streaming	Development of the MSK Clinical Assessment Triage Service in alignment with prevention, primary care and place
Community-based Urgent Care Treatment Centres developed incorporating existing services (WICs, MIUs and UCC) where demand and geography require	Development of clinically led triage of referrals and delivery of specialist advice and guidance to primary care and patients
	Avoidance of a third of face to face outpatient visits in a secondary care setting by 2025
	Minimised use of private sector theatres

Delivery Areas

Joined Up Care Derbyshire

Mental Health	Learning Disability & Autism
A smaller acute bed base, with LoS in line with current national mean of 32 days	Reduce the causes of morbidity and preventable deaths for people with a learning disability and/or autistic spectrum conditions
Establish specialist mental health provision for rough sleepers and for problem gamblers	Transform care for people with learning disabilities &/or autistic spectrum conditions who display behaviour that challenges including a mental health condition
Single point of entry for crisis response via 111 or other service	Reducing the length of time that people receive care in inpatient settings leading to the eventual closure of LD hospital facilities.
Deliver plans from Derbyshire Suicide Prevention Forum: bereavement services and reduced suicides in inpatient settings	Development of intensive support teams to support greater levels of independent living in the community
Deliver Psychological Therapies review by end of March 2021	Improving the number of adults with a learning disability who live in their own home, or with family, in stable and appropriate accommodation
IAPT services integrated in Primary Care Networks	
Out of area acute and PICU placements at zero by the end of March 2021	

Delivery Areas

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Maternity	Children's
Support establishment of NHS maternal smoking cessation services	Reduced waiting times for SEND by ensuring adequate access to community based early effective intervention services
Fully implement the Saving Babies Lives care bundle	Comprehensive offer for 0-25 year olds that reaches across mental health services for CYP and adults
Implementation of the NHS Improvement Maternity and Neonatal Health Safety Collaborative	Review existing community physical health provision and establish areas to be targeted for transformation
Maternity Community Hubs coordinated by Single Point of Access	Increased proportion of children with urgent care needs managed in primary care, community and Place.
Establishment of maternity outreach clinics for mental health difficulties arising from, or related to, the pregnancy or birth experience	Jointly commission Emotional Health and Wellbeing services for children in care
100,000 women can access their maternity electronic personal health records	24/7 mental health crisis provision for children and young people
Implement Continuity of Carer for women booking into Maternity Services	

Delivery Areas

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Cancer	Improving Flow
Improve uptake of national screening programmes: supporting hard to reach groups, maximising contact opportunities and increasing access to vaccinations	New STP workstream, replacing Better Care Closer To Home and D2AM
Improve early diagnosis of cancer by extending GP direct access to diagnostics to support clinical decision making	To review balance of Pathway 1, 2 and 3 care across south Derbyshire and City of Derby to improve patient flow
Improve access to high quality treatments for radiotherapy, chemotherapy and immunotherapy	Examples of projects include Joined Up Care Belper and Erewash Discharge Pathways
Fully implement FIT testing	
All patients will be offered opportunity to undertake a holistic needs assessment and care plan at different stages of the pathway	
Psychological support and palliative care offered at the earliest opportunity	
Deliver improved cancer outcomes for our population with improved one and five year cancer survival; with 75% of cancer patients are diagnosed at stage 1 or 2; 62% by 2020	

Delivery Areas

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Place	End of Life
Improving care and outcomes by local implementation of: • Pro-active care; most at risk / with escalating need, targeted and coordinated planning • Reactive, same day response. • Implementation of community frailty pathway • Derbyshire wide system for 'high intensity users' with chaotic lives	Everybody approaching the end of their life should be offered the chance to create a personalised care plan that can be shared with everyone involved in their care.
	Involving, supporting & caring for those important to the dying person
	Promoting an approach that supports open and honest conversations about death across communities through engagement, education and communication
Understanding service delivery and workforce implications at Place Alliance (versus County or organisational) level	Ensuring that people approaching the end of life have 24/7 access to specialist care when needed in all care settings
Ensuring Place Alliances evolution is in keeping with health and social care system and also Primary Care Networks	End of life care designed in collaboration with people who have personal and professional experience of care needs
Having measurable outcomes linked to system-wide benefits, including £5m reduction in non-elective spending on frailty cohort and £500k reduction for Highest Intensity Users	Ensuring that all staff delivering end of life care are trained to the appropriate competency level.
	Each person gets fair access to care

Delivery Areas

Joined Up Care Derbyshire

Disease Management - CVD & Stroke	Disease Management – Diabetes
Digital technology offer will be expanded to support prevention and self-management	Updated Derbyshire wide prevention pathway to be launched
Review and redesign of current Cardiac Rehab Model	Increase uptake of NDPP through targeted plan delivered by Prevention Facilitator
Community BP screening will be in place	Increase capacity of T1 and T2 structured education
Workforce Upskilling – Hypertension diagnosis and management	Ensuring that pregnant women with Type 1 diabetes are offered continuous glucose monitoring from April 2020
Roll out a digital approach to improving stroke pre-hospital pathways and communication	Roll out national Healthy Living for People (HeLP) with Type 2 Diabetes online self-management support programme
Best performance in Europe for delivering thrombolysis to all patients who could benefit.	Improve achievement of three treatment Targets (HbA1c, Cholesterol, BP) for people living with diabetes
Review & redesign of post-hospital stroke rehabilitation models,	Review the pathway and services for treating and managing childhood obesity
Blood Pressure Screening in community settings / pharmacies	Improve access to Diabetes Structured Education

Delivery Areas

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Disease Management - Respiratory
Expand pulmonary rehabilitation services and test new models of care for breathlessness management in patients with either cardiac or respiratory disease.
Test A1 technologies to interpret lung function test and support diagnosis
Review training on Spirometry to increase and ensure uptake in primary care
Review of children/young adults with Respiratory Conditions
Increase uptake of flu vaccinations to meet and exceed PHE immunisation targets
Review and implement COPD and asthma indicators within QOF
Increase uptake of pneumococcal vaccs to meet and exceed the PHE immunisation target of 75% aged > 65 uptake.
Review of Home Oxygen service

Enablers

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Our enabling work streams are:

- Workforce
- Finance
- Estates
- Digital
- Prevention
- Population Health Management
- Communications and Engagement

Enabling work streams are currently reviewing the details within the plan to understand support priorities and ensure that plans are fully scoped and scaled into an overall approach.

Our aim is to be an Integrated Care System which is built around care close to home, where hospital beds are only used where somebody cannot be cared for safely in their own environment

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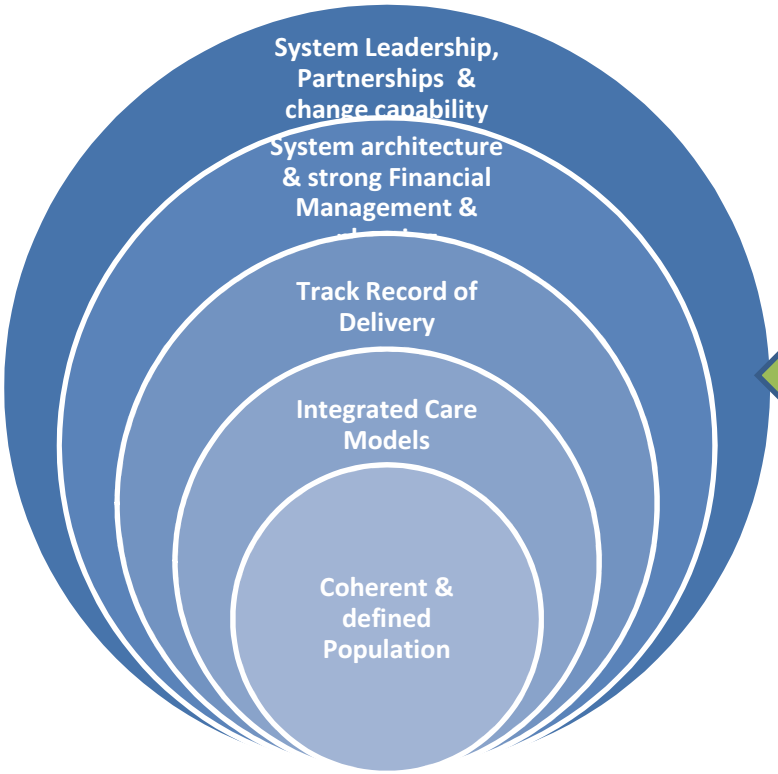
Characteristics of an Integrated Care System



Transformation Work Streams

Planned Care
Improving Flow
Urgent care
Place Alliance
Children & Young People
Maternity
Mental Health
Learning Disabilities
Cancer
End of Life

High level summary of 19/20 enabling work

Enabling development programmes

- ICS Development Programme
- Commissioning Capability Programme
- Population Health Management Programme
- Emerging Joint Board Development Programme

Enabling work

- System Savings Approach
- Outcomes Based Accountability
- Business Intelligence
- Development of Place Alliances and Primary Care Networks
- Derbyshire Clinical Care Strategy
- Shared finance plan and risk share agreement
- Integrated Community Provider development
- Profiling system wide demand, capacity and workforce

Derbyshire model for delivering integrated care

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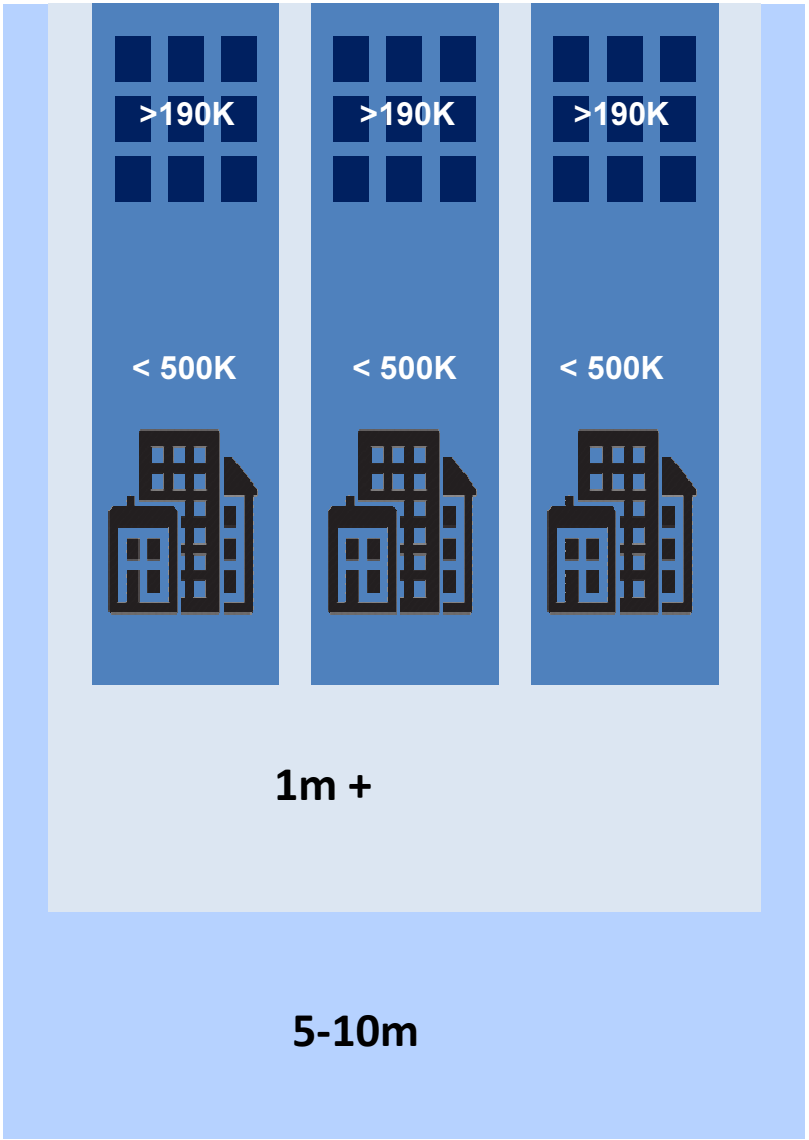

Neighbourhood	14 Primary Care Networks with services wrapped around populations of 31-190,000
Place	Our eight Place Alliances support the integration of health and care services focused around the patient. This includes: acute, community mental health, local authority and voluntary sector services; increasingly delivered through local 'hubs' (e.g. Bakewell, Belper)
System	JUCD STP Partnership has agreed the vision, strategy and is progressing system development. It oversees delivery of the Partnership through effective collaborative working underpinned by an agreed clinical strategy.
Specialist Networks and Directly Commissioned services	NHS England will continue to directly commission some services at a national and regional level, including most specialised services. The interface with wider clinical networks and alliances will be directly linked at system level (e.g. Derbyshire links with 3 cancer networks)

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Derbyshire

In The Next Six Months We Will…

- Agree our 5 year system transformation strategy
- Be able to evidence the impact of our transformational change programmes
- Be clear on the role of PCNs and how they work with other community providers
- Continue to build resilience and services provided at Place Alliance level
- Embed population health management at Place Alliance and PCN level
- Describe how many Integrated Community Providers Derbyshire will have and what benefits they will offer our communities
- Implement a system wide Board level OD programme to help organisations increasingly work in the system space
- Develop a shared system financial plan for future years

Roadmap to April 2021

Joined Up Care