

## Kent Health Overview and Scrutiny Committee Briefing: Annual assessment 2016/17 of Kent CCGs

## September 2017

## 1. Introduction

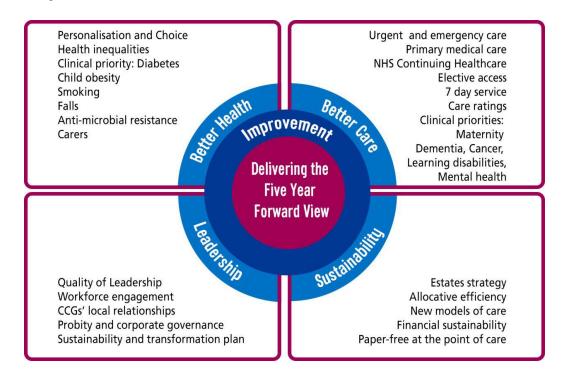
For 2016/17 NHS England introduced a new CCG Improvement and Assessment Framework to replace both the existing CCG assurance framework and CCG performance dashboard. This new framework provides a greater focus on assisting improvement alongside our statutory assessment function.

It aligns with NHS England's Mandate and planning guidance, with the aim of unlocking change and improvement in a number of key areas. This approach aims to reach beyond CCGs, enabling local health systems and communities to assess their own progress from ratings published online.

The framework is intended as a focal point for joint work and support between NHS England and CCGs, and was developed with input from NHS Clinical Commissioners, CCGs, patient groups and charities. It draws together the NHS Constitution, performance and finance metrics and transformational challenges and will play an important part in the delivery of the Five Year Forward View2016/17 assessment

The assurance framework for 2016/17 assessed CCGs against 29 indicators across four domains, including an assessment of CCG leadership and financial management.

The diagram below summarises the framework:



## 2. Kent CCG ratings

CCGs were assessed in four categories: outstanding, good, requires improvement and inadequate.

Full details of an individual CCG's performance against each of the framework's indicators are available on the MyNHS website.

The headline rating for each of the CCGs were as follows.

CCG	2016/17 headline rating
NHS Ashford CCG	Requires improvement
NHS Canterbury and Coastal CCG	Good
NHS Dartford, Gravesham and Swanley CCG	Inadequate
NHS South Kent Coast CCG	Good
NHS Swale CCG	Requires improvement
NHS Thanet CCG	Good
NHS West Kent CCG	Good

All CCGs have improvement plans in place and progress against these plans is summarised in Appendix 1

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Appendix 1 - Summary of key actions in CCG improvement plans

CCG	Key actions	Current status
NHS Ashford CCG NHS Canterbury and Coastal CCG NHS South Kent Coast CCG NHS Thanet CCG	Address the entrenched poor performance against the A&E standard, the national referral-to-treatment standard and the national cancer standards in the East Kent system	The four east Kent CCGs are working collectively to improve performance across the health economy and have an improvement plan in place.  Immediate actions that we are taking to improve overall performance:  • To deliver the delayed transfers of care (DTOC) targets for each organisation so that people are not stuck in hospital while waiting for delayed community health and social care.  • To ensure maximum utilisation of the home first capacity to stay well and live independently  • Ensure the productivity of GP streaming is fully utilised on all three hospital sites  • Improve acute and community hospital bed utilisation  • Develop an urgent plan to increase GP capacity on the William Harvey Hospital site  • Resolve the therapy capacity issue in the Integrated discharge team (IDT)
NHS Ashford CCG NHS Canterbury and Coastal CCG	<ul> <li>Deliver the new Early Intervention in Psychosis (EIP) standards</li> </ul>	The four east Kent CCGs are working collectively to deliver the new Early Intervention in Psychosis

NHS South Kent Coast CCG NHS Thanet CCG		standards.
NIIS THATEL CCG		Kent and Medway NHS Partnership Trust (KMPT) 'single point of access' is developing a 'fast track' for all first episode of psychosis referrals to the EIP service in order for all referrals to be seen within the required timeframe.
		Progress is underway to fill the vacant EIP consultant post, which will allow the service to attract additional clinical staff through medical trainee support. This will provide sufficient coverage to meet NICE standards, with expected compliance in October 2017.
NHS Ashford CCG NHS Canterbury and Coastal CCG	Develop a robust primary care development and transformation strategy that supports wider system strategies such as the Sustainability and Transformation Plan (STP)	A robust strategy is in place for both CCGs that supports wider transformation.  Both CCGs have developed primary care operational plans which cover 2017-19.
NHS Ashford CCG	Stabilise and improve the financial position such that NHS Ashford CCG delivers the required one per cent surplus in 2017/18 that business rules require	The CCG has submitted a financial recovery plan which has been approved by NHS England. However, owing to support for both the acute sector and social care to manage winter pressures, plans to reduce elective waiting times and transformation costs, the CCG is forecasting a financial deficit for 2017/18.

	<ul> <li>Develop a robust primary care development and transformation strategy that supports wider system strategies such as the Sustainability and Transformation Plan (STP).</li> </ul>	<ul> <li>Our Primary Care Strategy was approved by the CCG Governing Body in December 2016. Resilience and Transformation Plans underpinning this as well as the General Practice Forward View and Sustainability and transformation Plan (STP) are in place.</li> </ul>
NHS Thanet CCG		<ul> <li>We have introduced an Acute Response         Team at QEQM hospital and planning is         underway to introduce GP streaming         during the Autumn.     </li> </ul>
	Stabilise and improve the financial position such that NHS Thanet CCG delivers the required one per cent surplus in 2017/18 that business rules require	The CCG has negotiated contracts for 2017-19 that will encourage transformation to be driven through with cost savings as one of the outcomes. In addition, the operational plan includes projects that are designed to review and improve productivity and ensure better value for money. Regular monitoring on a monthly basis will keep deliverables on track throughout the year.
	<ul> <li>Continue to work with our service providers to achieve key performance standards as set by the NHS Constitution</li> </ul>	<ul> <li>At the time of reporting the local acute provider is achieving the majority of NHS Constitution targets. However, A&amp;E</li> </ul>

		remains a significant challenge across all Kent and Medway providers and other risks remain, particularly around ambulance response rates.
NHS Dartford, Gravesham and Swanley CCG		The CCG ended 2016/17 with a deficit of £13.5million. This was largely due to the over-performance of the CCG's providers and underfunding of allocations, both based on significant population growth. We are forecasting a deficit for the current year and reaching long term financial balance will require sustained focus on an agreed plan which supports the challenging decisions ahead. We will be working with clinicians, stakeholders and patient groups, including Healthwatch to ensure the actions we propose are in the best interest of local people.
	Work with service providers, GP members and our partners to deliver future financial sustainability.	The CCG's Financial Recovery Plan contains ten current priorities which will assist in delivering financial recovery. However, we recognise that more needs to be done if we are to put this on a longer term sustainable footing, and we are currently looking at opportunities to secure greater efficiency and savings. Our plans will rely on continued collaboration with our members and partner organisations.

Continue to make changes and improvements to ensure our assurance ratings improve year on year	<ul> <li>We have increased the number of local GPs supporting the development of our patient care pathways through our Clinical Strategy Committee, to make sure local doctors are actively involved i shaping healthcare and are developing plans to continue towards closer partnership working with our primary care colleagues and other providers. These plans focus on improving join-up thealthcare and maximising the financial benefits that accompany integration and improvements in quality.</li> <li>We were disappointed with our assurance rating this year, which is primarily due to our financial situation. This has resulted in the CCG being place in Special Measures. The Governing Body and all of our staff are determined to work with partners, including NHS England to turn this very challenging situation around.</li> <li>However, we recognise there is still much to do to improve our assessment rating focusing on capacity and finance; areas we have been working on proactively with our partners for a number of months.</li> </ul>
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Our assessment also highlighted areas of good practice including our plans for improving GP access through local hubs, our review of urgent care services, and our successful funding bids for the Healthy New Towns programme and the Estates and Technology Transformation Fund. We have made key appointments to bolster the resilience of our leadership team and allow a greater focus on the improvement of our rating and sustainability. The CCG has recruited an experienced Turnaround Director, who joins us from a success regime and has local NHS commissioning and provider experience focusing on Finance. We have a newly appointed Chief Operating Officer who brings considerable experience from an acute provider organisation. Internal restructuring of our core teams is in progress to allow better integrated working and increase sharing of skills and best practice.

We are continuing to work with GP Members and wider clinical partners to develop new local models of care to deliver effective, sustainable services. Some of this year's key achievements are listed below: • Achieving progress on the locality-based delivery model which will improve quality of care and join-up of community, primary and hospital care for patients whilst improving value for money Agreeing plans to extend practices into super practices which will better serve patient demand for GP appointments Successfully securing Estates and Technology Transformation funding to support local infrastructure in health and digital investment Continued progress in developing an enhanced urgent care system built around hub-based delivery of local services for people in the CCG area, for which there have already been good examples of stakeholder engagement. (The review was approved by the Kent Health Overview and Scrutiny Committee to proceed to the next stages of public engagement) Our member practices and the CCG team have been congratulated as being first in the country to achieve a 100% GP

		<ul> <li>participation rate for this year's National Diabetes Audit</li> <li>A number of patient outcomes in the DGS area are among the highest in Kent and Medway including cancer indicators for clinical outcomes which are rated as 'Good'</li> <li>To help patients we have also piloted a convenient repeat prescribing service called Prescriptions Ordering Direct (POD). This enables patients to order their repeat prescription via telephone, without having to leave their homes. Tested initially in 2016 in selected practices, this has now helped save patients time and reduced the amount of medicines being wasted locally. We plan to roll out POD to all our practices.</li> </ul>
NHS Swale CCG	Continue to work with our service providers to achieve key performance standards as set by the NHS Constitution.	<ul> <li>At the time of reporting the local acute provider is achieving some NHS Constitution targets and trajectories agreed with NHS England. However, A&amp;E, Cancer and elective access remains a challenge. In addition, other risks remain particularly around ambulance response rates.</li> </ul>
	Work with service providers, GP members and our partners to deliver future financial sustainability.	<ul> <li>We are working with service providers,         GP members and our partners to deliver         long term financial sustainability. The         CCG finished 2016/17 with a deficit of</li> </ul>

Continue to work hard in all areas of assessment to improve our rating further	<ul> <li>£2million and is currently forecasting breakeven for the current year.         However, there remain considerable risks to achieving this and we are working extremely hard to mitigate these.     </li> <li>We continue to work with local GPs in supporting the development of our patient care pathways through our Clinical Strategy Committee and locality meetings, to make sure local doctors are actively involved in shaping healthcare and are developing plans to continue towards closer partnership working with our primary care colleagues and other providers. These plans focus on improving join-up of healthcare and maximising the financial benefits that accompany integration and improvements in quality.</li> <li>We are working with GP member practices and wider clinical partners to develop new local models of care to deliver effective, sustainable services.</li> <li>We have made key appointments to bolster the resilience of our leadership team and allow a greater focus on the improvement of our rating and sustainability.</li> </ul>
	The CCG has recruited an experienced

regime and has local NHS commissioning and provider experience focusing on Finance. We have a newly appointed Chief Operating Officer who brings considerable experience from an acute provider organisation. • Internal restructuring of our core teams is in progress to allow better integrated working and increase sharing of skills and best practice. Internal restructuring of our core teams is in progress to allow better joint-working across north Kent CCGs and increase sharing of skills and best practice. Whilst the CCG's recent assessment was disappointing, due to our financial situation, it did highlight a number of areas of good practice and stated that the CCG: continues to enjoy a positive relationship with its member practices and has worked effectively to engage GPs and the broader public in emerging plans for locality-based delivery of key services and integrated urgent care continues to make progress on developing an urgent care system built around hub-based delivery of local

services, and there have been good examples of stakeholder engagement

		throughout this process. (This work was well received by NHS England and approved to proceed to the next stages by the Kent Health Overview and Scrutiny Committee )  • has met the dementia diagnosis target for the whole of 2016-17, and the IAPT (Improving Access to Psychological Therapies) access standard for most of the year  • has achieved progress following a review
		of leadership capacity by the Good Governance Institute
		To help patients we have also piloted a convenient repeat prescribing service called Prescriptions Ordering Direct (POD). This enables patients to order their repeat prescription via telephone, without having to leave their homes. Tested initially in 2016 in selected practices, this has now helped save patients time and reduced the amount of medicines being wasted locally. We plan to roll out POD to all our practices.
NHS West Kent CCG	<ul> <li>Work with providers to improve performance on constitutional standards, in particular on A&amp;E waiting times</li> </ul>	Significant challenge to deliver across all of Kent and Medway and nationally, mainly due to delayed discharges /

	transfers of care.
	There is a robust plan in place to address these issues, based on national guidance and best practice, including revised discharge pathways.
Deliver the national standard on dementia diagnosis rates	The national standard requires the CCG to have identified 66.67 per cent of the expected prevalence. Current performance (June 2017) is 60.9 per cent, which equates to approximately another 400 diagnoses to achieve the standard.
	The CCG has an action plan in place to identify those patients, which includes improving data accuracy and provider incentives to reduce the time between referral and diagnosis. The CCG has also developed an innovative new model for dementia diagnosis and care planning (with the Trust and GPs) which will be rolled out across the next year and lead to improved diagnosis rates.