

Meeting: Health Overview and Scrutiny Committee

Date of Meeting: 3 June 2016

Subject: East Kent integrated urgent care service procurement

Purpose: This paper is to update the Health Overview and

Scrutiny Committee (HOSC) on the outcome of east Kent's new integrated urgent care service procurement combining NHS111, GP out of hours

(OOH) and the new care navigation service.

The paper builds on two previous briefings provided for

the HOSC on 11 April 2014 and 6 March 2015.

1. Background

In April 2014 the CCGs presented a briefing to the HOSC outlining their plans to modernise the approach to urgent care provision, with a greater focus on integration and local accessibility.

A strategic goal of the four east Kent's CCGs is to develop the integration of urgent care and long-term conditions strategies.

This is intended to improve local services by providing better options for patients to access local care.

The wider objectives of this programme are:

- Modernising and integrating services to wrap around patients' needs within their local community
- Reducing unnecessary attendances to hospital
- Promoting greater independence within the community
- A progressive approach to long-term conditions management within the CCGs
- Structured local initiatives for improving access to primary care and providing more care in patients' homes.

A working group including clinical leads and CCG support staff and lay representatives from all four CCGs was initiated to support the development of key principles.

The public engagement team supported the process and liaised with local patient groups to inform the design of the service model.

The approach included aligning the procurement of the OOH service to coincide with the 111 procurement in 2016 and as intended to integrate key services for primary care response out of hours, This approach has been recognised nationally

as best practice as referrals from 111 to A&E are higher with a fragmented service.

A progress report was presented in March 2016 prior to the start of the procurement process. The report included the proposed service model which was has been designed to deliver highly responsive, effective and personalised services for those people with urgent but non-life threatening needs.

The successful provider would be required to manage fragmentation between the formerly separate services and maximise efficiency encouraging use of local pathways to avoid attendance at hospital wherever possible.

2. Procurement outcome

Following comprehensive and robust procurement process, including a rigorous evaluation by patients and commissioners which looked at safety, quality, service delivery and overall cost-effectiveness, the four clinical commissioning groups for east Kent have agreed to appoint Primecare, to run the 111 and out of hours services from October 2016.

The new service has further been improved by including a care navigation service that can help refer patients with more complex, urgent needs to a variety of responding services to help to keep patients at home whenever appropriate and possible.

The new contract runs for three years, with an option to extend for a further two years.

3. Impact on Existing contracts

Currently there are two contracts: one for emergency out of hours GP appointments at the weekends, evenings and bank holidays, run by IC24, and one for running the NHS 111 phone service, which is provided by South East Coast Ambulance Service. Staff already working for these services will be able to transfer to the new provider where eligible and early meetings between providers have been arranged to ensure smooth service transfer and communication with staff.

4. Mobilisation Governance

Mobilisation Board

The East Kent Integrated Urgent Care Service (EK IUCS) Clinical Governance and Mobilisation Board has been established to oversee the assurance processes for the mobilisation, service commencement, system wide integration and post implementation review of the EK IUCS ensuring clinical quality and patient safety. It will identify any barriers to mobilisation and will co-ordinate a partnership response to overcome any risks or issues needing resolution.

The Board includes commissioner and clinical representation from each CCG, project team and representatives from Primcare and held its first meeting on the 28 April. The board will be accountable to the Governing Bodies of each of the four east Kent CCGs and will send update reports to the Governing Bodies, System Resilience Group (SRG), East Kent Strategy Board and the Kent and Medway Urgent and Emergency Care Network.

5. Sub-working groups

A joint project team with the provider will be established with Mobilisation Board sub-working groups accountable to the EK IUCS Clinical Governance and Mobilisation Board to address specific aspects of work for the project covering the key areas:

- Clinical Governance and Pathways
- Quality
- IM&T, Telephony and Interoperability
- Pharmacy
- Workforce
- Estates
- Business Continuity
- Communications and Engagement
- Finance and Business Intelligence
- Contract.

6. Key Milestones

A detailed project plan was presented and reviewed by the mobilisation board on the 28 April and the first project meeting has already taken place with the new provider.

The service is planned to go live from 28 September 2016.

Key milestones have been identified and include:

- Recruitment (in progress)
- Stakeholder engagement plan (in progress)
- Assurance testing during August 2016
- Service mobilisation review during October 2016

7. Further information

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