Update from Buckinghamshire Integrated Care System

1. NHS Long Term Plan – changes to our ICS

The Long Term Plan outlined that integrated care systems will be at Sustainable Transformation Partnership (STP) level.

In Buckinghamshire, Oxfordshire, Berkshire West (BOB), there are currently two ICS's – Berkshire West and Buckinghamshire. As a result of the Long Term Plan, BOB STP has a roadmap to becoming an ICS by April 2020.

They have provisionally determined which outcomes and actions are best driven at Place level i.e. here in Buckinghamshire and which are driven at a STP/ICS level.

This has resulted in a set of collective priority areas for the STP

STP role	Description	Clarification and rationale
System design & delivery	Design approach to a problem at STP level. Deliver solution at STP level	Population and economic growth; Acute collaboration on planned care; Strategic planning, resource allocation & system design
System design & place/org delivery	Design approach to a problem at STP level but leave places/ organisations to deliver	Workforce; Capital & estates
Set or confirm ambition and hold to account	Agree STP ambition (or confirm STP signs up to nationally set ambition) and hold places to account for/support delivery	Primary care, inc. PCNs; Financial balance & efficiency; Mental health; UEC; Cancer; Devolved oversight from NHSE/I
Coordinate, share good practice, encourage collaboration	Bring places/ organisations together to share approaches and solutions	Research and Innovation; Children and young people, inc. maternity; Personalised care; Digital; Prevention & reducing inequalities; Population health

STP/ICS oversight running through all strategic priorities
Partnerships & Engagement, including patient and public involvement

2. Developing the Buckinghamshire Integrated Care Partnership

We are now developing an integrated care partnership (ICP) in Buckinghamshire. Providers will work with commissioners using a population based approach – targeting resources to the appropriate need, aligned with our Health and Wellbeing Strategy.

The Buckinghamshire ICP will be responsible for:

- The county level Place based alliance of providers, commissioners, local authority and third sector providers – working by collaboration not competition
- Management of the delegated commissioning budget
- Learning disability teams located in the same place as the local authority
- Buckinghamshire Clinical and Care Forum to ensure we have a co-ordinated and multi-disciplinary input into local decision making
- Getting Bucks Involved Steering Group ensuring a co-ordinated approach to public engagement

2.1 Transforming Commissioning functions

Within the Buckinghamshire ICP, commissioners will make shared decisions with providers on how to:

- Use resources
- Design services
- Improve population health on a local basis

A small number of decisions will continue to be made by commissioners locally in relation to procurement and awarding contracts. We will use the integrated health and care commissioning functions of the local authority and CCG for these.

There will be a collective responsibility across the ICP and STP/ICS to standardise our work across BOB, on a “do once and share” ethos. This will reduce overlap and enhances productivity. For example the successful BOB-wide workstream for Primary Care that coordinates clearly scoped areas of primary care commissioning.

2.2 Realignment of CCG functions

The CCG is developing a clear view of what current commissioning functions will look like in the future.

Some will take place at a greater scale than within Buckinghamshire. Where appropriate the CCG’s across BOB can delegate their commissioning functions to a lead CCG, co-ordinated by the STP as for NHS111 and Ambulance services.

2.3 Developing our Primary Care Networks (PCN)

A key priority will be to develop our emerging PCNs. These are key to the sustainability and delivery of our out-of-hospital service.

- It will be important to establish a co-ordinated approach that ensures all PCN voices are heard within the ICP
- PCNs already have different levels of maturity and we need to support them to achieve the baseline requirements for their population.

- A geographical focus will be required as the PCNs widen their local place development linking to the District Councils and Community Boards going forward under the new Buckinghamshire Council

3 Our System Priorities for 2019/20

Our priorities this year are to:

- Progress a whole system approach to transforming health and care to deliver resilience, better resident outcomes, experience and efficiency. We will achieve this by:
    - Participating in the design, agreement and implementation of the system architecture of the ICS at Buckinghamshire, Oxfordshire and Berkshire West (BOB) level, aligning commissioning functions effectively
    - Designing, agreeing and implementation of Buckinghamshire's Place Based Care and Primary Care Networks. Ensure each element supports the delivery of the NHS Long Term Plan and the Health and Wellbeing Plan
    - Redesigning care pathways to improve resident experience, clinical outcomes, making the best use of clinical and digital resources
- Developing a resilient Integrated Care Partnership that meets the needs of people

4 What have we achieved in Quarter 1 2019/20

4.1 Population health and prevention

- Developing locality and PCN profiles to inform priorities for action
- Developing understanding of most effective interventions – respiratory, cardiac pathways
- Prevention Strategy developed including a system Cquin/quality improvement target for smoking and alcohol

Examples

- Live Well Stay Well (enabling independence)
- Diabetes prevention
- Primary care development scheme (early identification of long term conditions)
    - Cardiac - hypertension
    - Respiratory – chronic obstructive pulmonary disease
    - Co-morbidities
- Social prescribing
- Care and support planning

- Motivational interviewing

4.2 Avoiding unnecessary hospital admissions

- We continue to build on our good performance over winter:
    - Consultant connect – access to consultant advice
    - Clinical assessment and treatment service (CATS)
    - Multi-disciplinary day assessment unit (MuDAS)
    - Winter review – ensuring we learn from last year and plan early for 2019/20
    - Understanding what is behind the increased attendance of children and your people to A&E
- Tier 4 CAMHS model has gone live providing a more co-ordinated approach to finding bed-based care for children and young people
- Mobilisation of the Adult Social Care Strategy using the three tier model of social care and the strengths based approach
- ASK NHS – a NHS self-triage app rolled out to 30% of Buckinghamshire practices
- EMIS record system to EMIS referrals for approved clinical services
- 111 Direct booking pilot (Swan Practice in Buckingham now fully live)

4.3 Keeping people well

- Built on the priorities identified through the population health data analysis development of pathways
    - Cardiovascular
    - Respiratory
- We were successful in gaining national support from NSHE/I for the ICS – planned care redesign to optimise pathways of care, patient experience and outcomes
- Started wave 3 of the neonatal/maternity safety collaborative
- We are implementing the continuity carer model for 20% of women focussing on those with diabetes and those socially/psychologically vulnerable
- Providing mental health support in schools
- Increasing access to the Perinatal mental health service
- Progressing development of the Adult Social Care digital front door

4.4 Integrated Care

- The pilots of the locality teams are progressing but realigned to the Primary Care Networks
- We are working towards the integration of the County Councils occupational therapy and reablement services to then merge with the rapid response and intermediate care service at Buckinghamshire Healthcare NHS Hospital Trust
- A single integrated hospital discharge team is being developed to help people get home as quickly as possible
- Scoping further development of the Single Point of Access to streamline referrals and speed up access to the right service
- We are piloting a joined up approach to sharing information to assist in the development and delivery of personalised care
- We are planning for the co-location of health and social care teams to enhance integrated team working to better meet the needs of people with a learning disability
- We will be working with a partner to scope the range of opportunities for integrating health and social care services to enable us to enhance delivery, experience, value for money and outcomes for our residents and patients
- We are undertaking a whole system baseline assessment and development of a Buckinghamshire digital strategy

4.5 Engagement

- **Engagement Framework**

Across Buckinghamshire, we are working to align our approach to engagement including having one strategy for the system. This fits with the Communications workstream for Unitary where there is a focus on the approach to consultation and engagement for the new Council.

- **Buckinghamshire ICS website**

www.yourcommunityyourcare.org.uk

The website was developed for staff to keep informed about the ICS after carrying out a survey across all six partner organisations.

- **ICS Newsletter**

The newsletter goes out monthly to keep staff and stakeholders updated on the developments of the ICS. Going forward, we plan a redevelopment of the newsletter to focus on the work of each Board.

Back copies of the newsletter can be found on the website - www.yourcommunityyourcare.org.uk/getting-involved/newsletter/

- **Residents Panel**

Having successfully won funding from NHS England, we are developing a resident's panel. It will have 1500 residents who are representative of our population. MES have been procured to do face to face recruitment to the panel.

- **Digital Engagement Tool**

Another successful funding bid is allowing us to procure one digital engagement tool across the Buckinghamshire system. This will allow us to do improved online surveys and cross-analysis of results. This will link to existing databases for patient involvement as well as the resident's panel.

4.6 Service planning and engagement

A scoping event was held on 6th June with 30 attendees from across the Buckinghamshire ICS and districts.

This reviewed an engagement framework introduced within Oxfordshire to consider whether to follow a similar approach within Buckinghamshire. It was agreed that we would adapt their approach with the following suggestions:

- A generic version that can be used by any partner
- A Health and Social care version that builds on the generic version
- A public version
- Guidance for HASC members on the approach

Using this approach will become "the way we do our business" rather than a framework that is not always followed. The next steps are to make the suggestion changes with appropriate reviews before following each organisations governance procedures.

Our aim is to launch this in September 2019.

4.7 Digital Strategy

The Strategy sets out our direction of travel and deliverables to integrate technology/data to improve services, taking account of national, regional and local priorities, so they are:

- shaped around individual need and convenience
- built on a secure, value for money, responsive and accessible infrastructure
- pushed out to provide responsive and timely information on individual care and service needs
- Support our ambition to be a learning System

It comprises **3 pillars:**

- **Technology** - infrastructure, hardware and software
- **Digital** – culture change, improved patient experience, improved processes and better tools for our Workforce to deliver better and safer patient care
- **Information** - creating information and intelligence that drive delivery and improvements in care

4.8 Single Digital Front Door

What will our residents see:

A Buckinghamshire "**public services passport**"

- details of all transactions and records
- personal digital health record
- all correspondence received from health and local government

They will be able to add information to their "passport" not just **'me as a person'** standard information but also how the person wishes to be viewed or treated, ie, phobias, speech/hearing disability, or circumstances such as a recent bereavement.

Supportive information "pushed" to individuals giving them easy access to relevant and appropriate information and services without having to go looking for them.

What will our residents get:

Choice of consultation types, virtual and remote, using the technology of choice

Those unable to use digital methods of service, access or keep electronic records will benefit from those same systems being used on their behalf by people they contact by telephone or approach face to face, or by someone they nominate to act for them.

Those using our services but living outside Buckinghamshire will receive the same level of access and ability to store their information centrally in their personal passport.

Benefits:

Each person's journey from first contact will be fully visible and data available for analysis, leading to improved demand management, forecasting, skills deployment and reduced cost per contact.

Partnering with our residents will increase engagement in service design, increase take-up and generate population level data moving Buckinghamshire to "push" services ahead of demand, reduce risk of deterioration and need for more complex services.

Real time data transmitted via remote monitoring will improve the timeliness of interventions.

4.9 Developing our workforce

The system is developing an approach to workforce that straddles organisations, so we best develop the knowledge, skills, capacity and capability that will enable us to deliver over programme of continuous improvement.

- Three tier system leadership programme
- Quality Service improvement and redesign (QSIR) system training
- Engagement roadshows with the workforce gaining feedback and ideas for improvement
- Established the Clinical and Care Forum – a professional system voice

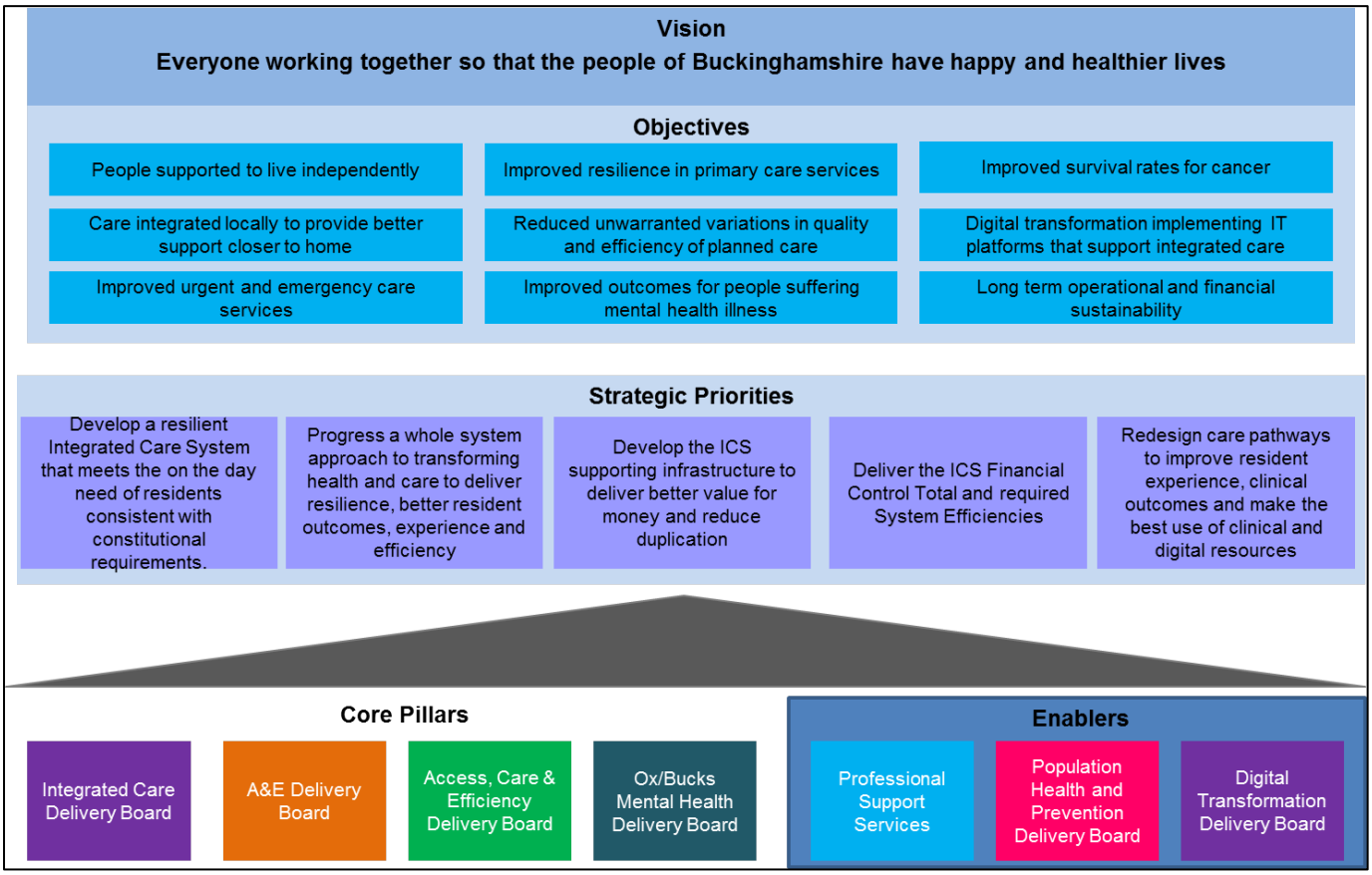
4.10 Better Care Fund (BCF)

The Integrated Care Executive Team (ICET) has evaluated all of the 18/19 BCF schemes. The BCF Planning Requirements (including the assurance process) are expected to be published in the next few weeks - although a definitive date has not been confirmed yet.

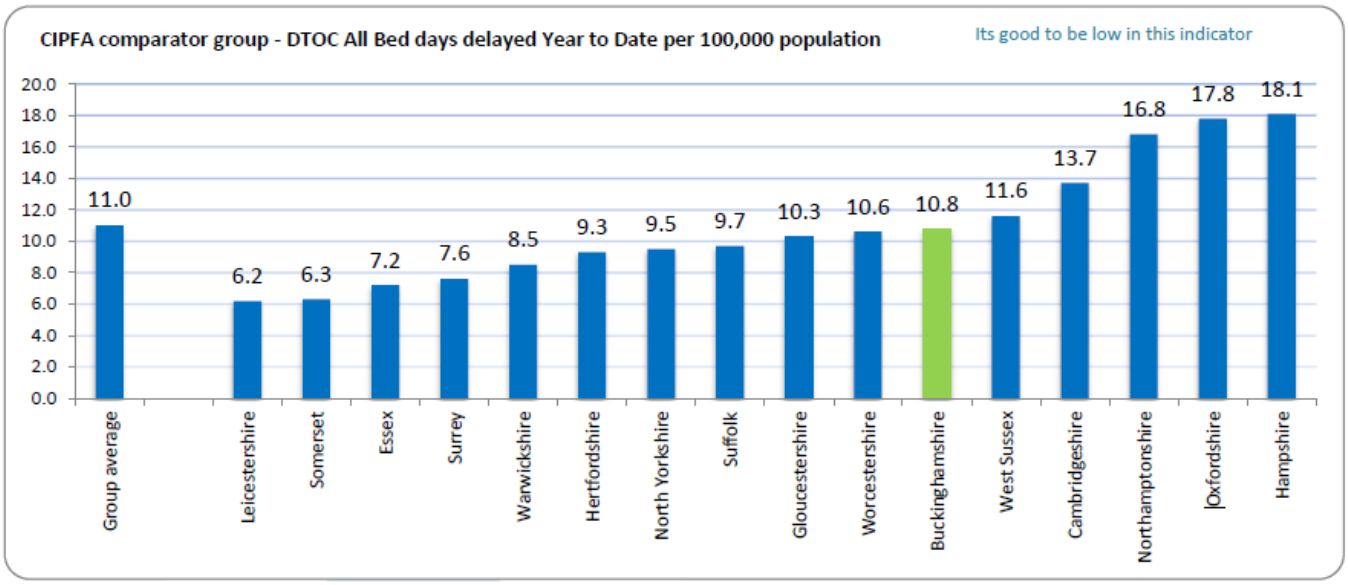
There will be no new metrics for 19/20 and there will be light-touch monitoring. Whilst an indicative plan for a 19/20 BCF plan for Buckinghamshire has been outlined, there is a national review of the BCF planned for 19-20 before a substantive change for 20/21 and beyond.

Performance for Delayed Transfer of Care (DTOC) for April 2019 can be viewed in Appendix 2.

Appendix 1 – Our Strategy and Transformation



Appendix 2 – DTOC Performance – April 2019



- National expectations continue for greater systems leadership and performance for DTOC through integrated working
- Buckinghamshire system continues to perform better than average compared to its statistical partners
- Continued efforts and new initiatives are being adopted to ensure we maintain and improve DTOC performance. This will benefit patients by ensuring timely discharge and reduced lengths of stay

Overall delays:

- The total number of bed days delayed for Buckinghamshire in April was 1,341 days compared to 1,295 in March
- This equates to an average of 44.7 bed delays per day in April

Month	No. of days delayed per month	Change from previous month
May 2018	1969	↑ + 402
June 2018	1593	↓ - 376
July 2018	1554	↓ - 39
August 2018	1245	↓ - 309
September 2018	1806	↑ + 561
October 2018	1464	↓ - 342
November 2018	1241	↓ - 223
December 2018	964	↓ - 277
January 2019	1204	↑ +240
February 2019	1188	↓ - 16
March 2019	1295	↑ +107
April 2019	1341	↑ +46

Delays attributable to Adult Social Care (ASC):

- The number of bed days delayed attributable to Adult Social Care (ASC) fell from 198 days in March to 189 days in April.

Delays by Trust	No. of days delayed (attributable to ASC)	
	April	Change from previous month
Frimley Health NHS Foundation Trust	116	↑ +36
Buckinghamshire Healthcare NHS Trust	48	↓ -14
Oxford Health NHS Foundation Trust	19	↓ - 15

- The most frequent reason for an ASC delay in April 19 was Delay reason E – Care Package in Home, accounting for 77 days delayed
- Performance remains below the target set for the month
- The targets for Joint, Health and All delays have been exceeded