



# Welcome to Big Chat 11 meets Annual Review

Bliss Hotel, Promenade, Southport 10 September 2019







### Welcome

**Dr Rob Caudwell** 

Chair

**NHS Southport and Formby CCG** 



@NHSSFCCG #CC

#CCGBigChat



# **About today**

- Housekeeping
- Take a look at the marketplace stalls
- Our CCG rolling displays cover:
  - Highlights of our work and achievements in 2018-2019
  - Breakdown of how we spent the money we are allocated by the government to commission health services
  - Examples of how we involved you in our work
- Pick up a copy of our annual report and accounts
- We're filming and taking photos, so let us know if you do not wish to be included



### What we will cover

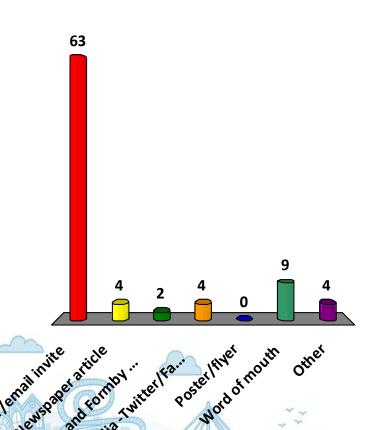
- Our year and where we are now –including how we are addressing the NHS Long Term plan
- Developing our Sefton 5 year NHS plan what it means for future health and care
- Your views so far Healthwatch Sefton's report on views about our local and national NHS plans
- Maximising quality and efficiency of your care –
   our ideas to do this, and your chance to input
- Q&A surgery put your queries to our team



# Fingers on the button question

How did you hear about today's Big Chat?

- Letter/email invite
- Newspaper article
- Southport and Formby CCG website
- Social media -Twitter/Facebook
- Poster/flyer
- Word of mouth
- 7. Other



Southport Social med





# Our year and where we are now

Fiona Taylor
Chief officer
NHS Southport and Formby CCG



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#### Some of our achievements 2018-2019

- We ranked top in the country for improving access to psychological therapies (IAPT), with 64% of patients who finished treatment moving on to recovery
- We were rated 'outstanding' for diagnosing 76% of the estimated number of people with dementia
- We were sixth highest in the country for patient experience of GP services at 90.5%.
- We ranked seventh highest nationally for cancer survival rates and fourth for patients experience of cancer services.
- We were tenth in the country for patients meeting the target of waiting 18 weeks or less from referral to hospital treatment



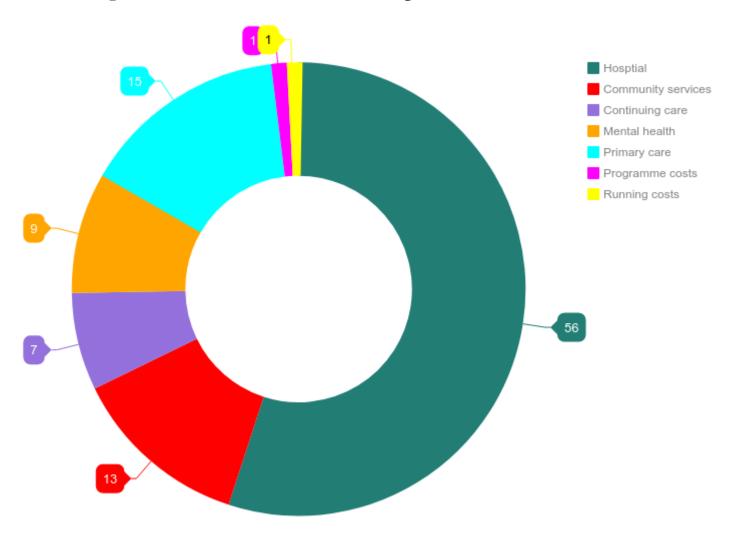


## How we involved you in 2018-2019

- We continued to involve patients in our review of over 100 local health policies, inviting people to share their views and experiences
- We held a 'Your Youth Health Day' to gather insight of young people's knowledge and experience of health services
- We joined forces with Healthwatch Sefton to hold several health themed events, for example, GP 7 day access
- We collaborated with CVS colleagues to strengthen our networks with minority groups, which have now been extended to include travellers and the homeless
- We worked with transgender residents to develop our Trans Health Sefton service, to improve health outcomes and support for these patients
- We were awarded the highest 'green star' rating in the annual CCG assessment of how well we involve our residents



# How we spent our money in 2018 - 2019





### Our performance 2018-2019

- We had a budget of £189 million equating to £1,508 for each Southport and Formby resident
- Our financial position improved in 2018-2019. At the end of the year we reported a £1 million surplus, compared to the £3.6 million deficit we reported in 2017–2018
- Maintained 'requires improvement' rating in the annual assessment of CCGs reflecting our hard work during increasingly challenging times

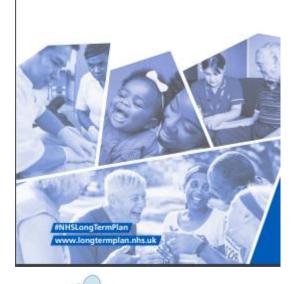
For more examples of our performance and achievements, see our market place displays and pick up a copy of our annual report and accounts



# **NHS Long Term Plan**



The NHS Long Term Plan



- A new service model for the 21st century
- More NHS action on prevention and health inequalities
- Further process on care quality and outcomes
- NHS staff will get the backing they need
- Digitally enabled care will go mainstream across the NHS
- Taxpayers investment will be used to maximum effect



# Long Term Plan video





# **Sefton Transformation Programme**

- Bringing together partners from across health and care in Sefton with a collective vision:
- "We want all of our health, care and wellbeing services to be more joined-up with as many as possible provided in our local communities. We want to empower you to make positive changes to the way that you live and make it easier for you to get the right support in the right place first time so that you can live longer, healthier and happier lives."



# Partners in our Transformation Programme

- NHS South Sefton
- Sefton Council
- Mersey Care NHS Foundation Trust
- Southport and Ormskirk NHS Hospital Trust
- Aintree University Hospital NHS Foundation Trust
- Lancashire Care NHS Foundation Trust
- North West Boroughs Healthcare NHS Foundation Trust
- Alder Hey Children's Hospital NHS Foundation Trust
- Liverpool Women's NHS Foundation Trust
- Sefton Primary Care Networks
- Sefton GP Federations
- NHS England and Improvement
- Voluntary, community and faith organisations
- NHS West Lancashire CCG



## Our plan for change

- Building on Shaping Sefton to develop a new 5 year plan for health and care in the borough
- This will address local needs set out in Sefton's Health and Wellbeing Strategy, as well as the requirements of the NHS Long Term Plan
- Your views informed Shaping Sefton and we continue to invite your feedback as we design Shaping Sefton II





# Southport and Formby Clinical Commissioning Group

**Shaping Sefton** 

We want all health and care services to work better together – to be more joined up – with as many as possible provided in our local communities, so it is easier for you to get the right support and treatment first time, to help you live a healthy life and improve your wellbeing ??

Older more frail people

We call this:

community centred health and care

Shaping Sefton

Start Well, Stay Well, Age Well

**Unplanned care** 

**Primary care** 







# **Future landscape**

Commissioning:

Leaner and more

pooled budgets:

strategic; a key enabler

and sub-system levels is

Integrated at place

Integrated at scale

(across places) for

with the Council

acute services

for integration at place

Neighbourhood (x 8 with 7 PCNs) 30-75,000

**Community First Locality** 

(x 3)

55,000 - 120,000

Sefton "Place"

274,000

North
Mersey CCG

c1 million

**ICS** 

2.5 million

#### **Service Provision:**

Based on "... footprints that respect patient flows"

Applying pareto's law:
80% of service provision is
expected to be within
"place" and built upwards
from PCNs. Place is the
emerging footprint (in C&M)
for an ICP with vertical
integration and where
population health
management is embedded

20% of service provision is "at scale" supporting acute collaboration across places and new acute provider group models as per Salford and Warks

# Sefton NHS 5 year place plan Re-shaping Sefton

**Big Chat** 





**Cameron Ward** 

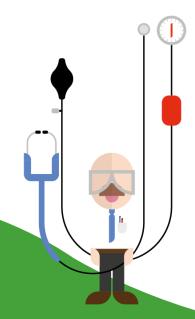
**Programme Director – Sefton Transformation Programme** 

# Health and Care Transformation Programme

# What I am about to say...

- Plan context
- Our approach
- Our ambitions
- Our priorities
- Our engagement
- Work plan
- Next steps
- Questions for today







## **Context**

#### Sefton

Health and Care Transformation Programme

- 1. Joint Strategic Needs Assessment priorities
- 2. 4 pillars of public health:
  - Wider determinants
  - Our health behaviours and lifestyles
  - Integrated health and care system
  - Places and communities we live in



- 4. Need to meet quality standards in health services eg acute services
- 5. Progress since 2014
- 6. Workforce shortfalls
- 7. Health and care finances not in balance
- 8. Increasing elderly population
- 9. Increasing incidence of children, young people and adult mental health issues
- 10. Children and young people's poverty
- 11. NHS Long Term Plan requirements eg reducing health inequalities, anchor institutions, social value



# **Our Approach**

- Define context, initial ambition and priorities
- Engaging with local groups, NHS organisations, Sefton Council, working closely with the Public Health Team
- Aiming to align the plan with the evolving Health and Wellbeing strategy
- Population health focus including how best the NHS can contribute to the wider determinants of health
- Using the draft outline plan refine the ambition and priorities
- Finalise plan in November

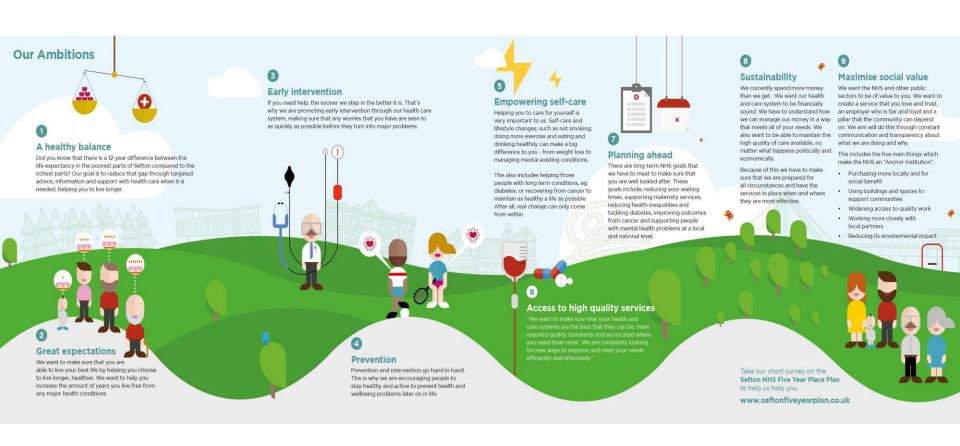
Health and Care Transformation Programme

- Improved access to GP practices with many open seven days a week
- Development of Primary Care Networks to improve the delivery of services and patient experience
- Improving after care for those who have sought emergency treatment through A&E
- Better linking cancer services with community based support and improving awareness and screening for patients
- Laying the foundations for a community based cardiology service which will bring services closer to people's homes and include diagnostics for patients.
- Reviewed children and young people's audiology services to improve the patient journey
- Developed a community hub for diabetes in Litherland with all of the specialists, including a dietician, under one roof. A similar satellite hub has been developed in Maghull
- Working closely with the Voluntary Community and Faith sector to improve and encourage "social prescribing", where people are referred for a range of programmes
   particularly for those with mild to moderate mental health problems
- Carried out a full review of mental health and dementia services

# **Our Ambitions**

#### Sefton

#### Health and Care Transformation Programme



Transformation Programme

- Providing help and support where it is most needed. This includes:
  - removing barriers to access
  - distributing resources and intervention proportionately to address need so as to achieve more equal outcomes
  - recognising the earlier onset of conditions in deprived areas
     compared to the least deprived areas
  - increasing the amount of funding for prevention and maximise the use of the VCF sector
- Support by CCGs, providers and Primary Care Networks (PCNs):
- Range of actions to help improve health and reduce health inequalities



# **Priorities (2)**

Sefton

Health and Care Transformation Programme

Based on local and national evidence the following are also priorities:

- Child development ensure all children are ready for school
- Mental health (all age) ensure timely access services and support
- Parenting & early years to help families with young children
- Prevention and early intervention (all age)
- Looked after children help reduce the number of looked after children and ensure their health is improved.
- Obesity (all age) to reduce the level of obesity and to turnaround the current increase at age 11.
- Smoking to continue to reduce the incidence especially within most deprived areas of Sefton and when pregnant.
- Alcohol to reduce the impact in all ages
- Cancer Prevention through a healthier lifestyle and increasing the rate of screening. Earlier intervention when treatment is required.
- Substance misuse improved access to services and reduce the incidence
- Social isolation acknowledging this is a significant issue for older people.
   Working with the VCF for all people who feel isolated to be supported to reduce the impact
- Dementia supporting patients to reduce the onset and provide support for patients and their families
- Frailty reducing the incidence of falls
- Dying well supporting people to die at their place of choice

#### DRAFT A confident and connected borough - future health, care and wellbeing in Sefton

Health, care and wellbeing services are joined-up, with many provided in local communities. Empowered people make positive changes to their lives and it is easy to get the right support in the right place first time and they live longer, healthier and happier lives as a result. There has been a reduction in health inequalities and key identified needs have been addressed



Integrated Care Partnership

Integrated Care System

Living, working and having fun

#### **Healthy behaviours** and lifestyles

Early Intervention, Self-Care and Prevention: coordinated and seamless healthy living.

Health, care and wellbeing services offer prevention and early intervention services in partnership with voluntary, community and faith sector services.

Mobilised communities are empowered to actively engage in selfcare and wellbeing for all ages. Integrated intelligence systems support self care and prevention; 'make every contact count' is embedded and enables risk stratification for targeted and personalised services.



#### **Integrated health** and care

**Primary Care Networks** are part of a multidisciplinary and multiagency integrated care team across all health, care and wellbeing providers with a digitally enabled single point of access and targeted care coordination supporting geographies of 30-50k population, with **GP**s as the **senior clinical** leader and an overseer of patient care.



#### **Optimised** acute care

Urgent & Emergency Care and Planned Care are focussed on whole pathway optimisation for physical and mental health and people only attend hospital when they need inpatient or specialist outpatient care.

People can access to acute services which will provide quality services that meet national standards, achieve best practice and deliver the best possible clinical outcomes. This, in most cases, will be **delivered locally**, but for **some** areas this may be further away to ensure the best possible expertise, facilities and care are available.

People know what local services are available to access for any urgent needs and will have access to care navigators to help them access services. People will experience seamless care between the hospital, community and primary care with integrated services making sure they are home and accessing community care as quickly and as safely as possible. Services are available closer to home and outside of the hospital setting wherever possible with Integrated Specialist Teams.

Starting well... living well... ageing well... dying well...



21st Century digital and technological solutions

An integrated trained flexible workforce supports care delivery; system leadership enables empowered teams to work 'without walls'



**Financial**ly sustainable and working to a capitated budget maximising the Sefton £



Whole system optimised estates across Sefton



System level coordinated communication and engagement

Visit, explore and enjoy

Ready for the future

Health and Care Transformation Programme

- Continue to engage with the public, voluntary sector groups,
   Healthwatch, NHS organisations and Sefton Council
  - Final engagement event on 9 October and online survey until October
- Await feedback from Cheshire and Mersey Health Care Partnership
- Refining the plan in September and November based on feedback
- Finalise plan November



#### **Comments and feedback to:**

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#### Sefton

Health and Care Transformation Programme

# Kings Fund video





#### What is Healthwatch Sefton?

- Healthwatch is here to give children, young people and adults a powerful voice both locally and nationally.
- Healthwatch Sefton will work to help people get the best out of their local health and social care services whether it's improving them today or helping to shape them for tomorrow.
- Our role is to ensure their views are taken into account by service providers – and their commissioners.
- We are part of a national network of local Healthwatch.



### Why did we engage with you?

- Our national body, Healthwatch England asked us to work with local people to find out what their priorities were.
- The NHS Long Term Plan also known as the NHS 10-Year Plan sets out its priorities for healthcare over the next 10 years.
- We used a national survey to find out what Sefton residents wanted our local NHS to prioritise on.
- We spoke with over 200 local residents and held 2 focus groups.

### What was important to you!

- Access to help and treatment when it is needed.
- Keep independent and stay healthy whilst getting older.
- Se able to stay in your own home for as long as possible.
- Access financial support for adaptations in your home
- Seing involved in the decisions about your support and treatment.
- Seing offered care and support in other areas if you cant be seen in a timely way in Sefton.

### What was important to you!

- Seing able to talk to your doctor or other health professional wherever you are.
- You want to be able to use technology more to access services but want to ensure your personal data is secure.
- Setter access to GP appointments.
- You would like to see more accessible services in the community, for example through the creation of health and wellbeing centres and 'one stop shops'.
- People with specific conditions felt that they would rather see someone they had seen before.



### Help to be healthy

Many people told us that they would like to lose weight and to attend exercise classes with some suggesting these should be made more easily accessible and cheaper.

"Facilities in the community to help me maintain a healthy life. Many that were available last year have now closed including importantly a number of the physical exercise classes suitable for people like me with disabilities."

#### Health Education

People also commented on receiving information about health care and self-help mechanisms:

"Better education about major health issues, Blood pressure, Diabetes, Stroke. We know lots about heart attacks and Cancer but not a lot about the above."



### Affordable health and wellbeing services

"Affordable and easier transport to self-help activities."

"Be able to get fruit and veg at reasonable price if you are on a limited income or have to use a food bank."

"Being able to access GP appointments outside working hours, for example during and weekends."



#### Support in the home

"Availability of practical help for working-age people with acute illness who live alone."

"Stop asking elderly residents to move location to access their care at the end of their lives... we don't provide adequate home care so they move to residential care ...then as they deteriorate they have to be moved to a nursing home... and if there is further deterioration they are moved again at the very end into hospice or hospital. What's wrong with escalating care up and down appropriately in a person's own home... It would be a lot cheaper and better for the people involved."



#### Financial support/ funding

"Some appropriate financial incentive to stay at home safely e.g. to make adaptions to home or employ appropriate carers."

#### Support with public transport

"Improved public transport - particularly buses in Southport. Routes have been cut which means there is no local bus service any more to my GP surgery - there were at least three options up to about two years ago."

#### Community support

"My neighbours and community help to retain my independence."



#### Funding for local services

You mentioned about the need to fund extra staff and that better online services are needed. You also shared feedback about the need to fund better treatment and to look at how funding is spent.

#### Staff

Along with investment, it was recognised that funding challenges and demand for services was putting the NHS and particularly its staff under strain, which impacts the way in which services are delivered to patients. We received praise from various people regarding NHS staff, while others were asking for more staff consistency and staff training.

#### **Appointments**

GP appointments were also mentioned by respondents, and for a number of reasons, including accessibility such as the ease of making weekend appointments; and the quality of appointments, including how much time people get to spend with their GP.

Appointments with hospitals was also mentioned;

"Care should be joined up so that patients don't have to follow up appointments or referrals themselves."



#### Communication

A common theme which people highlighted was the need for effective communication both within the NHS and when talking to patients and signposting them to other services. People also told us about the need for better information and better access to information

"Effective communication contains actual information about who you are seeing, for how long and why. Too many letters just say 'x clinician at y place'. Often I have no idea what I am going for, how long I can expect to spend there or what the appointment is about. As a carer I need information about how long to plan to be away otherwise I just can't attend."



#### **Next steps**

- The views you shared with us have been included into a report that covers Cheshire & Merseyside and your views were very similar to those in other areas.
- There is also a report which just shares in more detail what Sefton residents told us. You can find both of the reports on our website www.healthwatchsefton.co.uk
- Your views have been incorporated into Sefton's NHS 5 year place plan "I would like" and Healthwatch Sefton will continue to ensure that your views are listened to by the Sefton Health & Transformation Board.

# **Thank You**

# **Any Questions?**









#### Developing our 5 year plan – over to you

Cameron Ward

Sefton Transformation Programme



# Over to you

Health and Care Transformation Programme

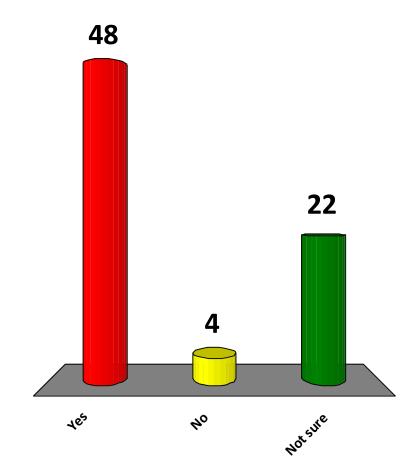
- Have we got our ambitions and priorities right?
- Are we heading in the right direction for the people of Sefton?
- Is there anything missing?



## Question 1

After today's discussion are you supportive of our 5 year plan?

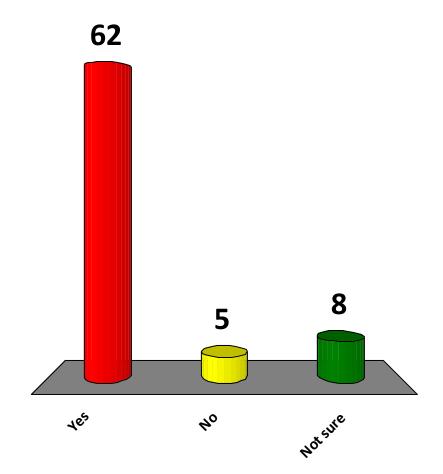
- 1. Yes
- 2. No
- 3. Not sure



#### Question 2

Are we right to focus on wellbeing factors, such as encouraging exercise and reducing pollution to help improve health?

- 1. Yes
- 2. No
- 3. Not sure





# Enjoy a short break and visit the marketplace

# See you in 20 minutes







# Maximising the quality and efficiency of your care

Karl McCluskey, director of strategy and outcomes NHS Southport and Formby CCG





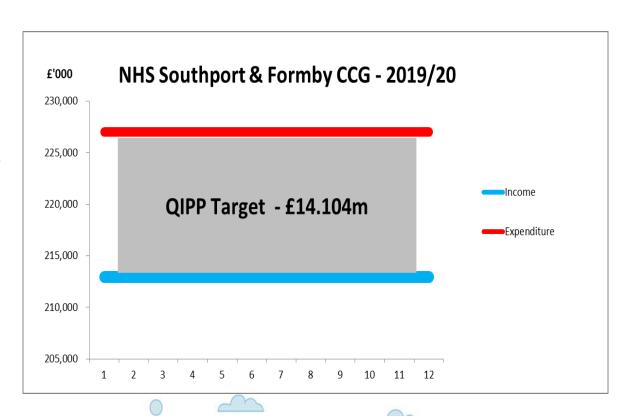
## What's the challenge?

- We want to ensure that every pound we spend in Southport and Formby on services offers the maximum benefits and quality of care to our patients and residents
- We do this through our local Quality, Innovation, Productivity and Prevention programme, known as 'QIPP'
- We set ourselves an annual 'QIPP challenge', describing where we intend to make quality improvements
- We do this by releasing savings in areas of spend that are not so effective or efficient
- This is also important in helping us to meet our financial responsibilities



# Our QIPP challenge

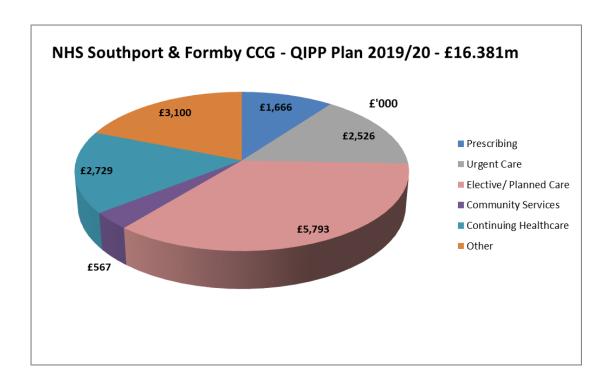
- We are required by NHS England to deliver a breakeven position in 2019-2020
- In order to do this we need to deliver just over £14 million of savings





#### Our QIPP plan 2019-20

Whilst we need to meet our 2019-2020 QIPP target of just over £14 million to achieve our 'control total', our identified QIPP schemes are in excess of this - at around £16.4 million





## Our challenge – why?

- To accommodate the growing and ageing local population
- To take account of the increasing costs of health care
- To care for a population that is living longer
- To care for patients who have a number of complex health conditions





# What are we doing?

- Targeting services where evidence suggests there is greatest opportunity to improve health care delivery
- What this means:
  - Strategy: Work quickly to redesign services that improve patient care for the future whilst making best use of the limited resources available
  - Focus:
    - Service models
    - Narrow health inequalities
    - Improving patient outcomes
    - Workforce
    - Technology



#### Successes to date

Redesign of our orthopaedic assessment service model (Joint Health) provided the following:.

- Reduced wait times from 26 weeks to 4 weeks
- Improved patient experience
- Increased number of clinicians
- Telephone consultations
- GP directed self-referral
- Provided recurrent savings of around £1.2 million
   annually



## Work in progress

- Identified service areas like gastroenterology, outpatients and dermatology
- Identify why services are not working well
- Enable patient to access services quickly
- Services working together to improve patient care (share expertise)
- Reduce cost making better use of limited NHS resources





#### Focus 1: improving outpatient services

Terry Hill, QIPP programme lead NHS Southport and Formby CCG





# Outpatients – ideas for change

- Single point of assessment, triage and treatment
- Improve access to community services (shorter wait times)
- Develop criteria for patients requiring hospital treatment/ diagnostic
- Implement digital solutions that will improve response to your doctors request for specialist support
- Develop access to patient records in order for appropriate clinicians to aid decision making
- Use digital solutions that help identify whether patients need follow up appointments, and allow patients to book follow up appointments convenient for them.



#### Over to you

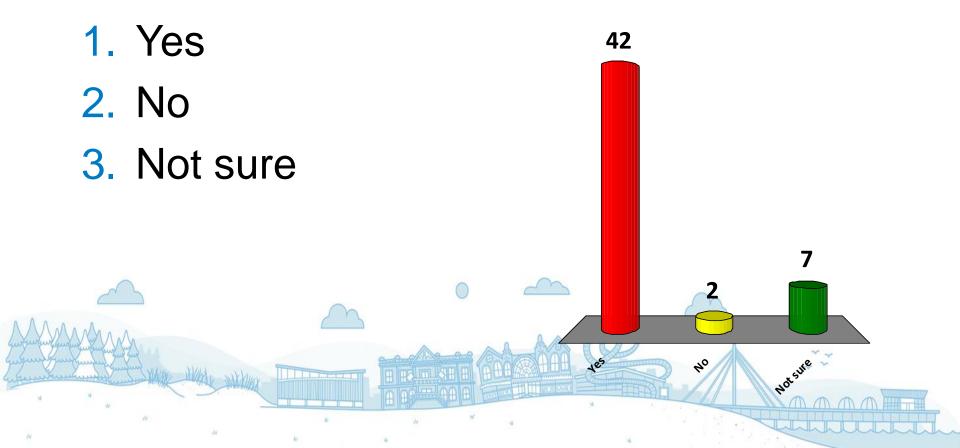
#### Your views:

- 1. What are the benefits of this approach eg single point of access?
- 2. How would you feel about accessing appointments and care in a different way, for example by telephone, Skype or group sessions?
- 3. As we develop this approach, are there any barriers or issues for patients that we need to consider?

#### You have 15 minutes for this session



After what you've heard, would you support making some changes to how outpatients appointments work?







#### Focus 2: supporting you to self-care

Billie Dodd, deputy director commissioning and delivery

NHS Southport and Formby CCG





#### Supporting you to self care

- Some conditions can be successfully managed at home rather than needing a trip to the doctor's
- At an earlier Big Chat attendees agreed there is more they can do to self care and wanted more options to do this when it's safe and appropriate
- We launched a self care policy last year for medicines as a result of this – helping us to make the best use of our limited resources on treatments that work for as many people as possible
- Now we want to look at other areas where people can better self

care



#### Example - ear wax removal

#### Where?

- In outpatients
- In treatment rooms
- In GP practice
- Other community based providers
- At home with drops from the chemist





#### Over to you

#### Your views:

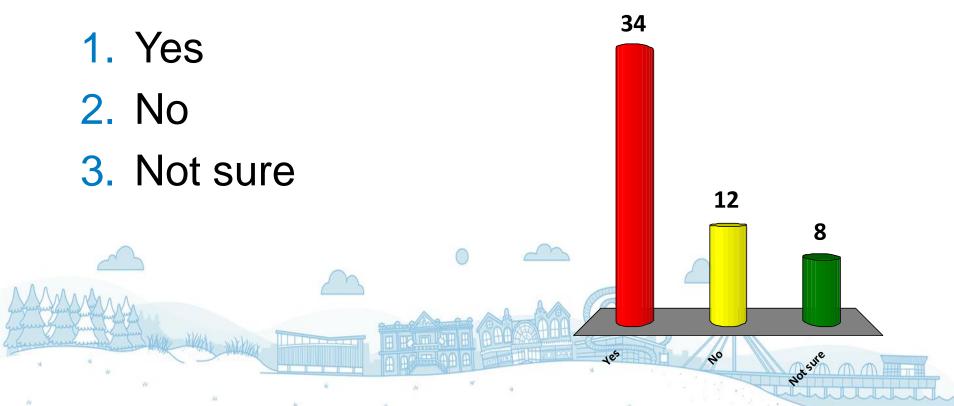
- 1. Do you think it is reasonable to manage ear wax removal at home for the majority of patients?
- 2. If not, why not?
- 3. Are there any other barriers or issues that need to be considered?

#### You have 15 minutes for this session





After what you've heard, would you support making some changes to the way ear wax removal treatment is managed encouraging people to self care?







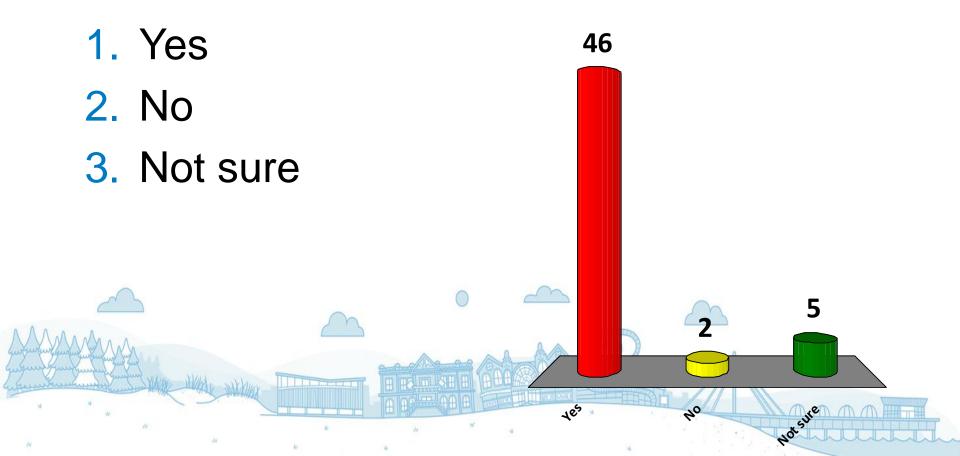
#### How was today's event for you?

Fingers on the buttons



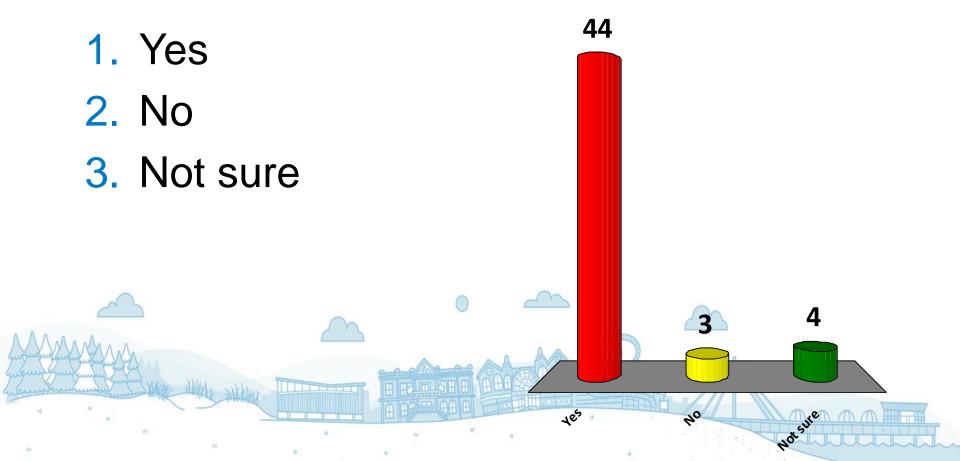


Would you recommend coming along to a Big Chat event to a friend, colleague, or member of your family?



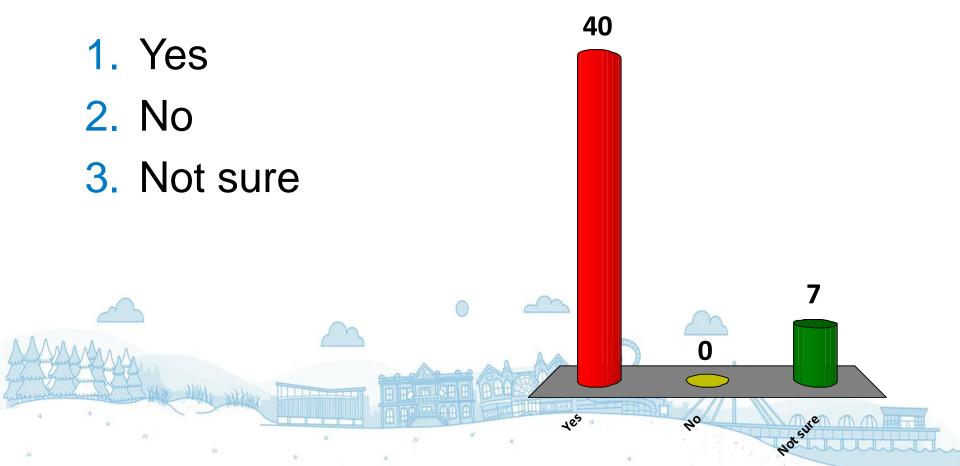


Did you find the stalls and the information available in the marketplace useful and interesting?



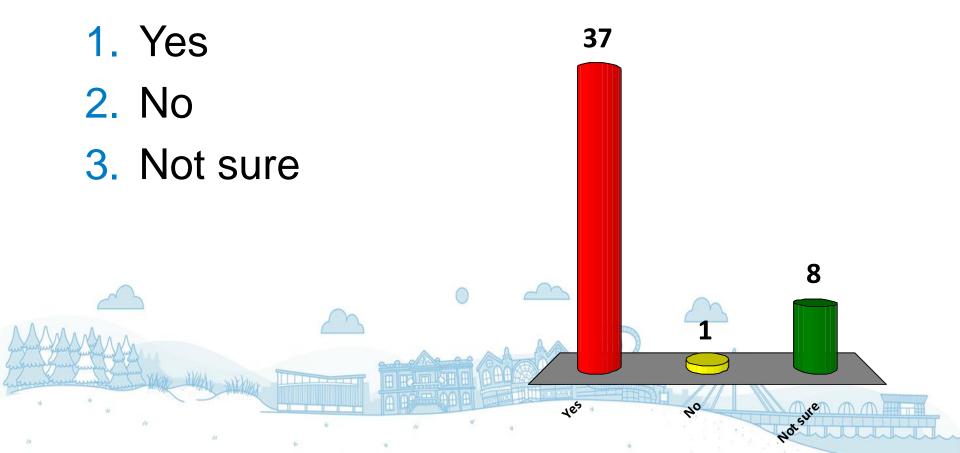


During the session today, did you feel that you had the opportunity to have your views heard?



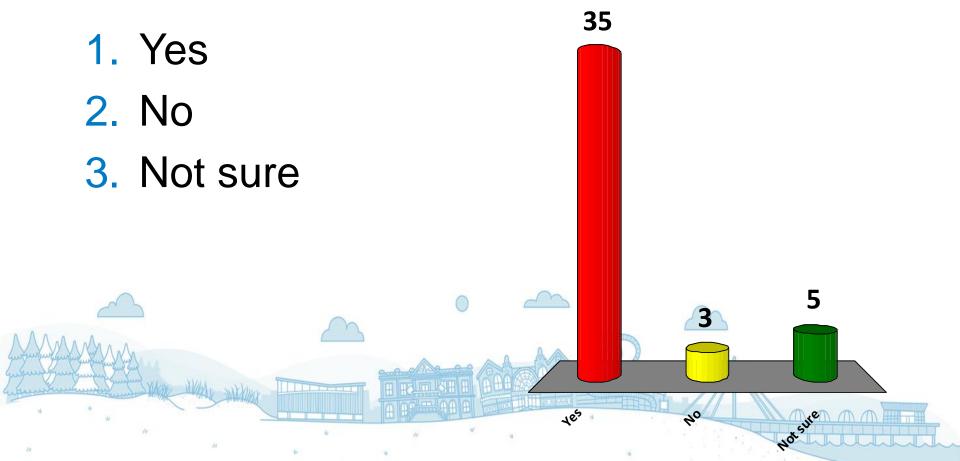


Did you find the session about Sefton's 5 year plan informative and helpful?



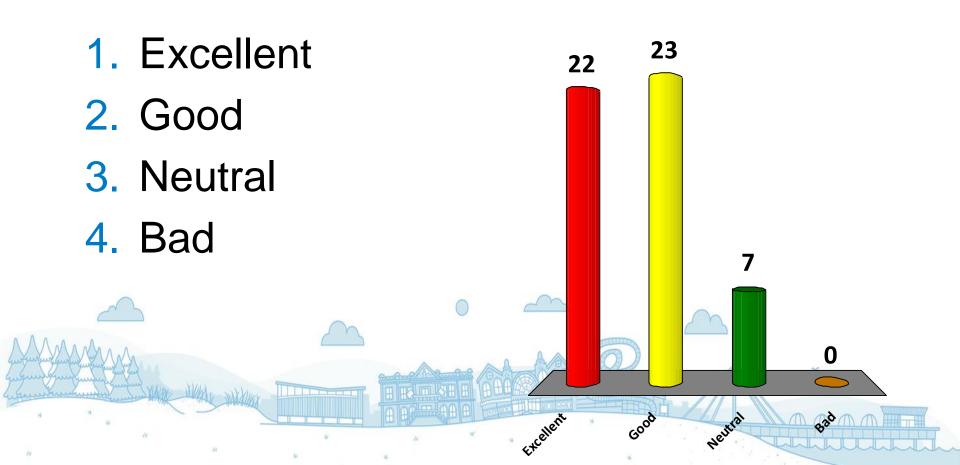


Did you find the sessions about Sefton's QIPP challenge informative and helpful?





How would you rate the choice and location of the venue for today's event?





# Any questions?

- Q&A surgery please speak to one of our senior leadership team who will be available at the end of the event
- Please complete a pink question form and pass to a member of the CCG team – we will contact you after the event





# Staying involved

- Fill in a 'keep in touch' form
- We will add your contact details to our database to keep you informed
- Details of this and all previous and future Big Chats also on our website: <u>www.southportandformby.ccg.nhs.uk</u>
- Please let us know if you require this in other formats
- Call our PALS team on 0800 218 2333







#### Thank you

@NHSSFCCG
#CCGBigChat

