# **Health Scrutiny**

### **Induction and Forward Planning**

Thursday 21 May 2015 at 10.30 am
Ashcombe Suite, County Hall, Kingston upon Thames, Surrey, KT1 2DN

For more information contact Ross Pike, Room 122 County Hall, tel: 020 8541 7368 or email ross.pike@surreycc.gov.uk or **Andrew Baird**, Room 122, County Hall, tel: 020 8541 7609, email: andrew.baird@surreycc.gov.uk

If you would like a copy of this agenda or the attached papers in another format, eg large print or braille, or another language please either call 020 8541 9122, write to Democratic Services, Room 122, County Hall, Penrhyn Road, Kingston upon Thames, Surrey KT1 2DN, Minicom 020 8541 8914, fax 020 8541 9009, or email ross.pike@surreycc.gov.uk or andrew.baird@surreycc.gov.uk.

This meeting will be held in public. If you would like to attend and get involved (and you have any special requirements), please contact Ross Pike or Andrew Baird on 020 8541 7368 or 020 8541 7609.



#### 1 NHS FIVE YEAR FORWARD VIEW

(pages 1 - 5)

Dr. Andy Brooks, Clinical Chief Officer, Surrey Heath Clinical Commissioning Group Julie Curtis, Director of Partnership, Surrey Heath Clinical Commissioning Group

The Chief Officer of Surrey Heath Clinical Commissioning Group (CCG) will provide information on the NHS Guidance "The Five Year Forward View" from a national and local Surrey Heath perspective.

#### 2 HEALTHWATCH SURREY STRATEGIC PLAN 2015/16

(pages 7 - 19)

Richard Davy, Executive Director, Healthwatch Surrey

Richard will outline the plans for one of our key partners, Healthwatch Surrey, and give Members an opportunity to discuss areas for collaboration between the two bodies in the future.

#### 3 INDUCTION AND FORWARD PLANNING

(pages 21)

Ross Pike, Scrutiny Officer, Surrey County Council

The Scrutiny Officer will outline the remit of Health Scrutiny in Surrey, scrutiny methods and facilitate discussion on the priorities for the 2015/16 Forward Work Programme.

# Health Scrutiny Committee 21 May 2015

#### **NHS Five-Year Forward View**

Purpose of the report: Policy Development and Review

To provide information on the NHS Guidance "The Five Year Forward View" from a national and local Surrey Heath perspective.

#### Introduction

- The Five Year Forward View acknowledges that the NHS needs to radically change and adapt in response to a growing population who are getting older and to evolve to meet new challenges that this presents.
- 2. These changes mean that we need to take a longer view to consider the future in partnership with patients, carers and citizens.
- 3. This paper provides details of the new models of care outlined in the Forward View and the proposals for the local population in Surrey Heath.

#### **National Perspective of the Five-Year Forward View**

- 4. The Forward View sets out a clear direction for the NHS over the next five years and focuses on three major areas for change. These areas for change include:
  - a. A radical upgrade in prevention and public health
  - b. People will gain far greater control of their own care
  - c. A breakdown of the barriers in how care is provided between family doctors and hospitals, between physical and mental health, between health and social care.
- 5. The Forward View provides us with details of four new models of care to help deliver the changes outlined above. The four models of care are described below:

#### **Multispecialty Community Providers (MCPs)**

Will permit groups of GPs to combine with nurses, other community health services, hospital specialists and perhaps mental health and social care to create integrated out-of-hospital care.

#### Integrated Primary and Acute Care systems (PACs)

An integrated hospital and primary care provider combining for the first time general practice and hospital services, similar to the accountable care organisations.

#### Viable smaller hospitals (franchises or chains) Smaller hospitals

**Urgent and emergency care services** will be redesigned to integrate A&E departments, GP out-of-hours services, urgent care centres, NHS 111 and ambulance services.

#### Models of enhanced health in care homes

The NHS will provide more support for frail older people living in care homes.

6. England is too diverse for a "one size fits all" model of care to apply everywhere and therefore local communities will be asked to design and co-create what is best for their local populations.

#### **Local Proposals for the Surrey Heath Community**

- 7. Over the last year Surrey Heath Clinical Commissioning Group (CCG) has been working with a wide range of partners to develop and deliver improved quality services for the community.
- 8. Organisations work in partnership across the Surrey Heath health and social care system and have so far successfully achieved the following:
  - a. Leadership of health and social care is jointly aligned to the commissioning and provision of services.
  - b. Took 9 months to develop and implement the CCG wide integrated care model across 90,000 residents by 9 separate organisations and 9 GP Practices.
  - c. 3 x integrated care teams (ICTs) commenced delivery of local community-based care running from 8am to 8pm to the population of Surrey Heath from April 2015.
  - d. Access to local rapid response services and the community rehabilitation team available seven days a week from April 2015.
  - e. A single point of access for community health and social care referrals will be available from June 2015.
  - f. The integrated care teams, rapid response service, community rehabilitation team and single point of access are co-located and hosted in four local GP practices.
  - g. Since November 2014 all 9 GP practices in Surrey Heath now offer core GMS/PMS Services from 8am to 8pm Monday to Friday.
- 9. In response to the Five Year Forward View we are also planning to explore the following principal changes over the forthcoming year:
  - a. Exploration of a local multi-specialty community provider model and the introduction of 7 day working in the community.
  - b. The CCG and Surrey County Council (SCC) to co-commission services from:

- i. Nursing and residential care homes to deliver local solutions and develop the market place.
- ii. Home care providers to deliver high quality local domiciliary care.
- c. The inclusion of local care providers in the planning of services through the local care homes forum.
- d. Develop a single service for young carer's.
- e. Promote integration between agencies and housing providers to deliver better outcomes for people.
- f. All patients discharged from hospital following an emergency admission receive contact from their GP practice to ensure they have care and support to reduce the possibility of future admission.
- g. Practice nurses and community nurses work together to support patients with long term conditions (LTCs) co-morbidity.
- h. GPs in hours and out of hours and A&E consultants work together to signpost appropriate patients to primary care.
- Alcohol liaison nurses to be involved with the ICTs and multidisciplinary community support to help reduce related hospital admissions.
- j. Streamline the admissions assessment process to residential and nursing homes.
- k. People with early on-set dementia and their carers have access to appropriate local services.
- I. Align and maintain consistent directory of services (DoS) across all agencies to strengthen the reliability of signposting.
- m. Promote a culture of co-design and co-production and ensure it underpins what we do.
- n. People with LTCs to access information and advice on their condition to help them make health choices and access to self help programmes where requested.
- Carers will be offered a personal health budget to support better outcomes.
- p. Single intake and joint health & social care assessments for all people with complex needs.
- q. Joint crisis escalation plans in place for complex patients who frequently attend hospital (with specific focus on residents in Care Homes).
- r. Promote an agenda with the voluntary sector to increase family, friends and community support.

#### **Conclusions:**

- 10. We will ensure strong clinical leadership will help to influence the design of any future model of care for the local population.
- 11. Surrey Heath CCG has a sustained successful track record of delivery achieved through listening and responding to the community.
- 12. We will continue to work with and listen to our population and in partnership with them we will test ourselves against our philosophy of commissioning and providing whole person, whole place based

services to ensure our community feels:

- I will only have to tell my story once
- "No door is the wrong door" as someone will lead me to the right place
- I will be able to remain independent for longer
- I will be treated with dignity and respect

#### **Public Health Impacts**

- 13. The Five Year Forward View provides the opportunity for local communities to radically re-design how we can commission and deliver improved outcomes on a population basis. We will ensure through collaboration with the public that improving quality remains at the heart of what we do.
- 14. We will utilise information produced through undertaking quality and inequality impact assessments on new ideas to tackle and further reduce inequalities.

#### Recommendations:

- 15. To note the new models of care introduced in the Five Year Forward View.
- 16. To note the successful implementation of integrated health, social care and voluntary sector services in Surrey Heath.
- 17. To note the future planning aspirations across all partners to improve outcomes for the Surrey Heath community.

#### **Next steps:**

Identify future actions and dates.

Spring 2015	<ul><li>ICTs embed community based services.</li><li>Structured Plan for the development of MCP</li></ul>
Summer 2015	<ul><li>Introduce Single Point of Access</li><li>Hospital discharge processes</li><li>Information sharing &amp; Interoperability</li></ul>
Autumn 2015	<ul> <li>Evaluation of integrated model and planning for the future</li> <li>Prepare for co-commissioning health &amp; social care services (i.e. care homes, domiciliary, dementia, carers services)</li> </ul>
Winter 2015/16	•7 day working proposal •MCP model agreed

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Sources/background papers:

N/A





# Strategic Plan 2015/2016 (Draft)

Healthwatch Surrey C.I.C. May 2015



#### Introduction

This Strategic Plan sets out how we will achieve our vision:

to improve health and social care services and outcomes for people in Surrey

We do this by:

- being an independent consumer champion ensuring that the voices of consumers and those who use services in Surrey reach the ears of the decision makers; and
- providing the NHS Complaints Advocacy service

This plan includes our key areas of responsibility, goals related to these and a high level description of how we intend to achieve these. It also sets out our existing priorities for our activity within Health and Social Care along with an outline of projects we have committed to carry out scoping or have committed to our work plan.

The plan has been driven by a set of Strategic Objectives, is supported by a detailed activity plan and is pursued in line with the values and principles agreed by the Healthwatch Surrey Board.



#### **Strategic Objectives**

This plan has been driven by our Strategic Objectives:

- Healthwatch Surrey is the respected, trusted and credible voice of the consumer within the Health and Social Care System in Surrey. We are integrated within the system while maintaining our independence from it and our objective perspective. (SO 1)
- Healthwatch Surrey's role, function and services are known and understood by consumers who readily contact us. (SO 2)
- Decisions Healthwatch Surrey takes, the contribution we make and our influencing, are based on robust evidence and knowledge. (SO 3)
- Healthwatch Surrey operates and is seen as 'One Organisation' with a unified approach. Our customers interface with "Healthwatch Surrey" regardless of how, why or where they come into contact with us. (SO 4)
- Healthwatch Surrey has robust strategic and operational plans, backed by processes that enable regular review and updating. (SO 5)
- Healthwatch Surrey has comprehensive performance measures in place that clearly demonstrate how we are performing and assist our continuous improvement. (SO 6)
- The Healthwatch Surrey social enterprise has secured a growing and sustainable future. (SO 7)



There are five Key Results Areas under which we have identified how and what we will achieve in 2015/16;

- **Empowering people with information, advice and advocacy** (links with SO 2)
- Listening to and engaging people who have views or experiences of services (links with SO 2)
- Shaping and challenging services (links with SO 1)
- Creating rewarding volunteer experiences (links with SO 1 & SO 7)
- **Developing a sustainable organisation** (links with SO 7)



#### We will:

- Continue to raise awareness that Surrey CABx are delivery partners in Healthwatch providing information and advice
- Widely publicise the new arrangements for advocacy services for NHS complaints in Surrey
- Develop and implement a new Communications Strategy to increase public awareness of Healthwatch Surrey, our Helpdesk and website as means of contacting us
- Work with the Surrey HUBs to raise awareness of Healthwatch Surrey services
- Monitor the experience of people contacting us for information, advice and advocacy

Desired impact: People in Surrey know how to - and are supported to - get the most out of health and social care services



#### Listening to and engaging people who have views or experiences of services

#### We will:

- Increase the number of engagement events we attend or stage ourselves to reach a larger number of people
- Pursue more marketing and advertising opportunities to increase public awareness of Healthwatch Surrey
- Identify seldom heard groups and arrange engagement events specifically for them
- Initiate and actively participate in the VOICE network



#### Shaping and challenging services

#### We will:

- Provide more support for the Healthwatch Surrey representative on the Health & Wellbeing Board
- Establish a regular and effective platform with all local commissioners to enable Strategic Ambassadors to shape and challenge services
- Develop methods of briefing and supporting Strategic Ambassadors in their role
- Encourage project proposals from our volunteers and the VOICE Network that reflect the needs and views of people in Surrey
- Implement a number of projects that result in reports that raise awareness of the views and experiences of people in Surrey
- Maintain a set of priorities that reflect the needs and concerns of local people, around which we will focus our activity



#### **Priorities**

Our Board review and agree priorities based on the available evidence each quarter. These priorities drive our work with decision makers. In order of priority, these are:

- Improving the experience of making a GP appointment
- Amplifying the voice of Young People
- Making it easier to make NHS complaints
- Increase involvement of people, patients and service users in decision making
- Promote and support people, patient and service user focussed cultures

#### **Projects**

The Board prioritise its projects each quarter. At least four projects will be completed this year. As of 23/04/2015 the following project had been committed to the work plan:

How people over 65 interact with Primary Care Services

This project seeks to bring to the attention of decision makers the behaviour and attitudes of people accessing primary care services in Surrey through a series of focus groups to contribute to the debate about solutions to improving access and peoples experience of making a GP appointment.



Primary care services are the most frequently talked about service in our conversations with people and the most frequently recorded topic and sub-topics are "Access to services". Our report *Getting an appointment with your GP (July 2014)* also identified specific issues in making appointments.

The project will support the Surrey Health and Wellbeing Boards priority to improve older adults' health and wellbeing (REF). We also know that this community is one of particular interest to the local health economy as it will be increasing by 13% by 2020 (JSNA Chapter: Older People).

Desired outcomes and impact:

- The system wide task group prompted by Healthwatch Surrey's report Getting an appointment with your GP and initiated by NHS England will consider the findings in its discussions about improving GP access.
- The findings influence decision making.
- The impact of decisions made are improvements in experiences and outcomes for people accessing GP services.

We have committed to scoping the following projects:

#### Investigation into Care at Home services

This project seeks to further explore the views and experiences of people receiving Care at Home and in particular to identify areas that require improvement and to seek out good practice.

There is particularly strong evidence from the experiences reported to us that people using these services are having proportionately more negative experiences than many other services. Although the overall number of



reports is low (60 experiences in 12 months) we feel that further investigation is required. These numbers should also be seen in the context of what we consider to be a seldom heard group, given the barriers that exist to getting their voice heard.

The project will support the Surrey Health and Wellbeing Boards priority to improve older adults' health and wellbeing as over 85's are particularly intensive users of this service. We also know that this community is one of particular interest to the local health economy as it will be doubling by 2033 (JSNA Summary)

Desired outcomes and impact:

- We make recommendations for service improvements informed by what people tell us and these are adopted by providers and commissioners.
- The impact of implementing these recommendations is that experiences and outcomes for people using Care at Home services improves.

#### Views of the seldom heard: The mental health and emotional wellbeing of young people

This project seeks to bring to the attention of decision makers the lived experience of young people that have had issues related to emotional wellbeing through a series of recorded discussions.

Our report *Our Health Matters: The views of young people in Surrey (November 2014)* identified that the top four health concerns for this community all related to emotional wellbeing. This is also a group of people that we have identified as underrepresented in the experiences and views that we capture. A poll during the Healthwatch Surrey Listening Tour 2014 also suggests that Mental Health was a top priority for those interacting with us.



The project will support the Surrey Health and Wellbeing Boards priority to improve children's health and wellbeing. This community has been identified as one with particular emotional wellbeing and mental health needs (JSNA Children's Summary Analysis).

#### Desired impact:

- We have raised awareness of the emotional wellbeing of young people with decision makers and the general public.
- The impact of raising awareness to this issue results in improved experiences and outcomes for young people with issues related to emotional wellbeing.

Desired impact: The views and experiences of people in Surrey are used to improve services and outcomes for people



#### Creating rewarding volunteer experiences

#### We will:

- Make greater use of volunteers in engagement events
- Encourage volunteers to fulfil more than one role so that they have a more satisfying participation in Healthwatch Surrey
- We will undertake targeted recruitment activity to bolster volunteer numbers from the East Surrey CCG area and to enlist Strategic Ambassadors for each CCG area
- We will provide development opportunities, support and supervision to our volunteers

Desired impact: An increasing amount of activity that achieves improved outcomes for people in Surrey



#### Developing a sustainable organisation

#### We will:

- Seek out commissioned research projects
- Pursue an opportunity to provide the 'Experts by Experience' service for the Care Quality Commission
- Investigate the opportunity of providing a paid service for visiting provider locations (similar to Enter & View)
- Conduct a review of forthcoming guidance from Healthwatch England on sustainability of local Healthwatch

Desired impact: On-going activity that achieves improved outcomes for people in Surrey

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## Health Scrutiny 21 May 2015

#### **Induction and Forward Planning**

#### **Summary:**

- 1. The Scrutiny Officer and Chairman will cover the role and remit of Local Authority Health Scrutiny and the health system in Surrey.
- 2. The Scrutiny Officer along with Members will identify possible work programme items for scrutiny in 2015/16.
- 3. Prior to the meeting Members are asked to identify issues for scrutiny in 2015/16 and any training and development that could be undertaken.

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Sources/background papers: Local Authority Health Scrutiny Guidance

