

REPORT FOR: HEALTH AND WELLBEING BOARD

Date of Meeting: 17 March 2016

Subject: Information Report – Integrated Care

Responsible Officer: Javina Sehgal, Chief Operating Officer
Harrow CCG

Public: yes

Wards affected: All

Enclosures: None

Section 1 – Summary and Recommendations

This report provides an update of integrated services for Harrow and what the current year's plans are to progress the integrated care model.

Recommendations:
Note the report for information

Background

The *NHS Five Year Forward View (5YFV)* explains the need to redesign urgent and emergency care services in England for people of all ages with physical and mental health problems, and sets out the new models of care needed to do so. The *Urgent and Emergency Care Review* details how these models of care can be achieved through a fundamental shift in the way urgent and emergency care services are provided to all ages, improving out-of-hospital services so that we deliver more care closer to home and reduce unnecessary hospital attendances and admissions. The vision is simple:

- For adults and children with urgent care needs, we should provide a highly responsive service that delivers care as close to home as possible, minimising disruption for patients, carers and families.
- For those people with more serious or life-threatening emergency care needs, we should ensure they are treated in centres with the right expertise, processes and facilities to maximise the prospects of survival and a good recovery.

One of the underpinning documents of this review, *The Commissioning Standards for a functionally Integrated Urgent Care service in England*, sets out the vision for an integrated approach to NHS 111, GP Out of Hours Services and wider urgent care service which provides the public with 24/7 access to urgent clinical assessment, advice and treatment.

Shaping a Healthier Future:

The model that is being designed for Harrow patients is a reflection of the requirements of our population, such as the implementation of a third GP Access Walk in Centre. Additionally the plans link intrinsically to the North West London Wide programme for Shaping a Healthier Future and the supporting Harrow Out Of Hospital Strategy.

Shaping a Healthier Future (SaHF) is a clinically-led programme being delivered across the eight Clinical Commissioning Groups (CCGs) in North West London (NWL) which will create a future healthcare system in NWL to meet the changing demands of the population, improve standards, and provide a sustainable financial future.

The vision for care in NWL is underpinned by three overarching principles detailed below:

- Localised routing routine? medical services means better access closer to home and improved patient experience;
- Centralising most specialised services means better clinical outcomes and safer services for patients;
- Where possible, care should be integrated between primary and secondary care, with involvement from social care, to ensure seamless patient care.

Delivery of SaHF is directly supported by the North West London Five Year Strategy and a series of transformation programmes have been initiated to deliver SaHF.

All of these programmes are relevant to the delivery of the Integrated Urgent Care Service. These transformation programmes are:

- Primary Care Transformation (including out-of-hospital): delivery of out-of-hospital services and improving access to GPs
- Whole Systems Integrated care: co-ordinating care across commissioning bodies and providers
- Hospital reconfiguration programme: delivering the reconfiguration of acute hospital in NWL
- Transforming mental health service: improving mental and physical health through integrated services

Section 2 – Report

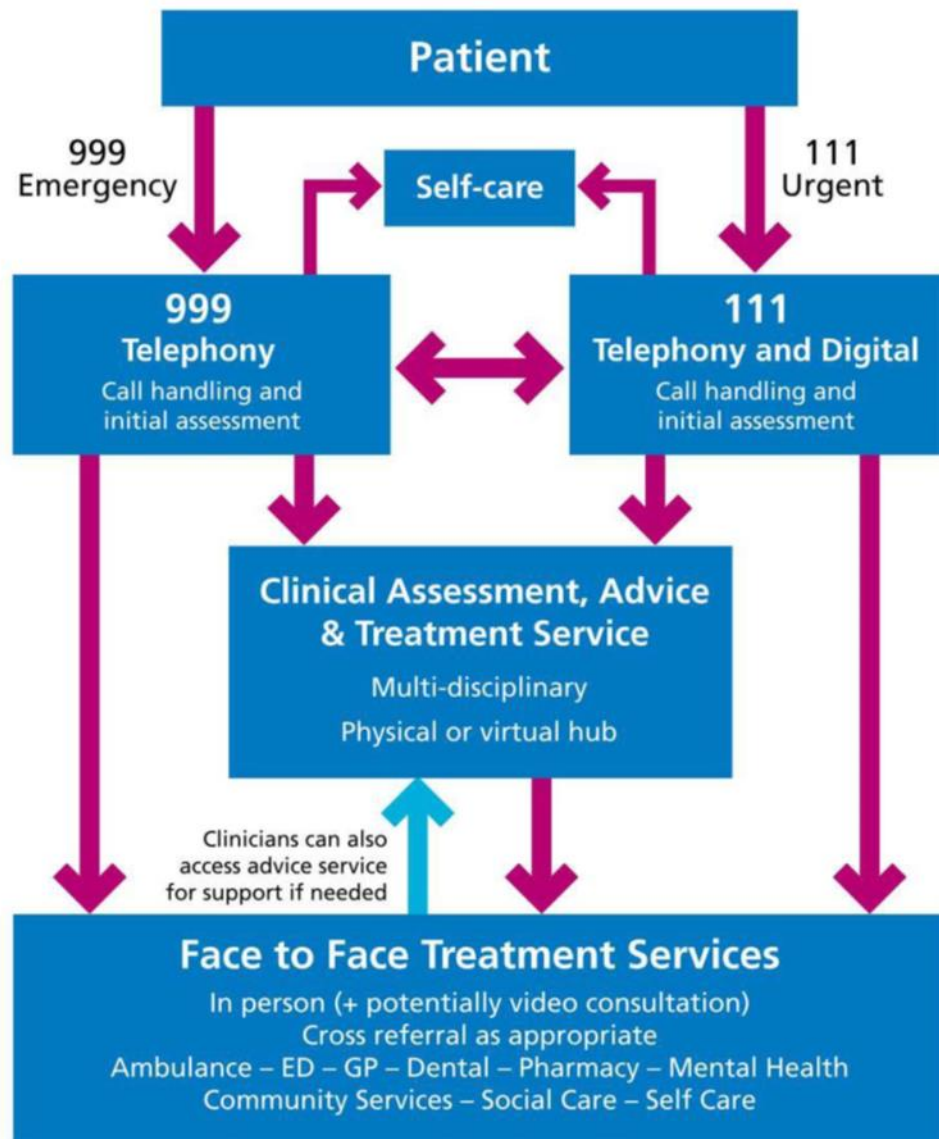
The North West London Collaboration of Clinical Commissioning Groups is currently re-shaping their NHS 111, GP Out of Hours and wider urgent care services with the aim of commissioning an Integrated Urgent Care Service. This will provide a single entry point for patients with an urgent care need – through NHS 111 – to be able to access to network system of integrated care services where organisations collaborate to deliver high quality, clinical assessment, advice and treatment.

The NWL Collaboration of Clinical Commissioning Groups is scoping a revised service specification for NHS 111 and the North West London Integrated Care Service; this largely focusses on the procurement of NHS 111 services and the opportunities of how this may be procured on a North West London scale. A newly commissioned contract for NHS 111 is expected to take effect from April 2017. Patient engagement activity for this work has already begun.

Harrow Clinical Commissioning Group is currently working with Brent CCG to investigate the benefits of a jointly commissioned Clinical Advice and Treatment Service, this would undertake the function of operating as a clinical hub to facilitate face to face and specialised healthcare requirements during the Out of Hours period. Where appropriate the integrated care model will promote the management of self-care and where face to face clinical intervention is required, an appointment at the nearest facility to the patient will be organised.

The integrated model for urgent care will improve pathways for patients who are at palliative or end of life stages of care by the recognition of Coordinate my Care records (CMC) and those patients that have care plans in place. Additionally patients with crisis plans, complex care needs and the elderly will also have improved pathways to care services through the Clinical Advice and Treatment Service utilising an integrated IT platform.

Unscheduled Urgent Care Model:



Aims and Objectives:

The following core principles reflect the ambition for the Integrated Urgent Care Service. As the service evolves these core principles are likely to develop further. People contacting NHS 111 for urgent care needs expect the service to:

- Be always available, 24 hours a day, 365 days a year
- Be accessible, personalised and based on their individual needs
- Have knowledge of when they have previously contacted NHS 111 so they do not need to repeat their story
- Be able to connect them to a clinician with access to important health records and notes
- Be safe and give the right advice based on the best and most up to date clinical and medical knowledge available
- Definitively resolve health concerns without the need to go anywhere else

- Book appointments with the urgent care provider they need
- To dispatch an ambulance without delay
- Be able to access the service through digital or online channels both to give better access to information and to meet specific needs people have
- Make sure that specific health needs, such as palliative care, mental health and long term conditions are properly catered for. NHS 111 should provide a consistently high quality service irrespective of the geographic area.

North West London Five Year Strategy:

The eight North West London CCGs have developed and agreed a five year strategic plan which outlines five strategic objectives. These are:

- Preventing people from dying prematurely
- Enhancing quality of life for people with long-term conditions
- Helping people to recover from episodes of ill health or following injury
- Ensuring that people have a positive experience of care
- Treating and caring for people in a safe environment and protecting them from avoidable harm.

The integrated NHS 111 Clinical Assessment, Advice and Treatment service will be expected to support the delivery of these five objectives

GP Access Walk in Centres:

Harrow CCG is currently in the process of re-procuring the Walk in Centres for Harrow residents, currently these services are located at the Pinn Medical Centre and Alexandra Avenue Health and Social Care Centre, and both centres will continue to be open between 8am-8pm, seven days a week and will include access to see a GP. The continuity of services is expected to remain, so although there may potentially be a new provider in place, patients should not be affected by any unavailability.

Additionally, the CCG is committed to establishing a third walk-in centre during 2016 as part of the same procurement exercise, further details of this additional service for our patients in the East of the borough will be made available as the procurement progresses.

Supporting Documents:

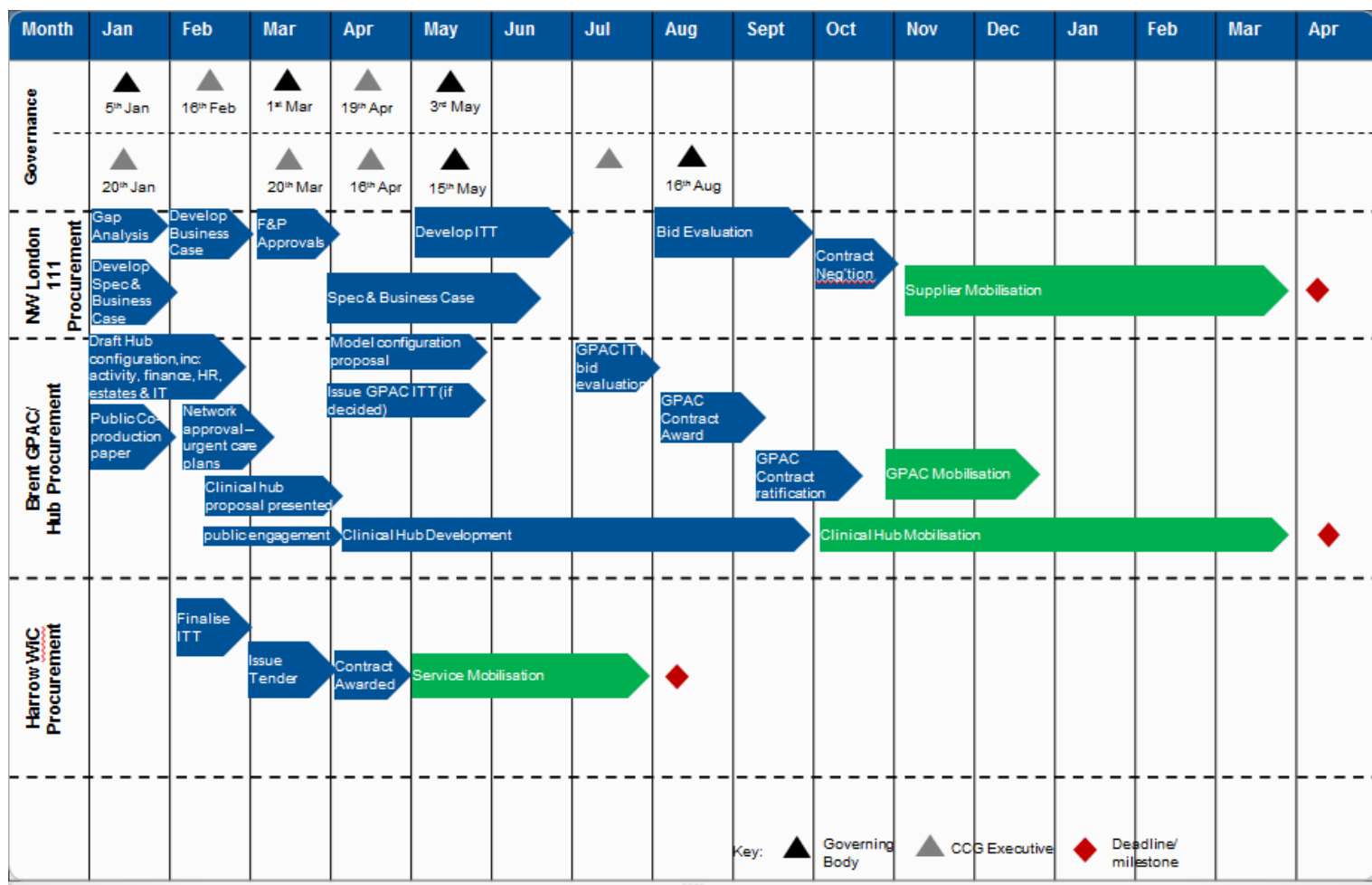
The following documents reference and support the programme for Integrated Care, the can be accessed directly at www.england.nhs.uk

The NHS Five Year Forward View (5YFV)

The Urgent and Emergency Care Review

The Commissioning Standards for a Functionally Integrated Urgent Care Service in England

Indicative Timeframe of Service Changes



Working Together to Make a Difference for Harrow

Please identify how the report incorporates the administration's priorities.

- Making a difference for the vulnerable

All staff involved in handling Integrated Urgent Care calls will undertake defined mandatory training programme training and will include:

- Safeguarding - An overarching requirement is that all staff must be trained in recognising and dealing with vulnerable adults and children, Providers will have in place approved policies which meet with statutory requirements;
- Mental Health,
- Learning Disabilities,
- Dementia,

- Making a difference for communities

Increasing the number of GP Access, Walk in Centres by opening one in the East Harrow locality and improving access to unscheduled care.

- Making a difference for local businesses
- Making a difference for families

By improving the access and integrated care links with:

- Mental Health (including Dementia)
- Intermediate non-bedded care
- Palliative / End of Life Care
- Paediatric Services

Section 3 - Statutory Officer Clearance (Council and Joint Reports)

Not required

Ward Councillors notified:

NO

Section 4 - Contact Details and Background Papers

Contact: Adam Mackintosh, Integrated Care Lead – Harrow CCG, 07876 74078

Background Papers: List only **public** documents (ie not Private and Confidential/Part II documents) relied on to a material extent in preparing the report (eg previous reports). Where possible also include a web link to the documents.