

HEALTH AND WELLBEING BOARD: 19 NOVEMBER 2015

**REPORT OF WEST LEICESTERSHIRE CLINICAL COMMISSIONING
GROUP**

COMMUNITY SERVICES PLAN

Purpose of report

1. The purpose of this report is to update the Health and Wellbeing Board of the West Leicestershire Clinical Commissioning Group (WL CCG) Community Services Plan and to give Board members an opportunity to review the final version of the plan.

Link to Better Care Together

Workstream	Relevance	Workstream	Relevance
Maternity, neonates, children and young people	√	Mental health	√
Long term conditions	√	Frail and older people	√
Urgent care	√	Planned care	√
Learning disabilities	√	End of life	√

2. Better Care Together (BCT) is a change programme involving all of the major NHS and social care organisations across Leicestershire, Leicester and Rutland. It brings together the three healthcare providers for the region, the three CCGs and the three local authorities plus the voluntary sector and Healthwatch.
3. The BCT Five Year Strategic Plan sets out what will be required for the whole health economy to be sustainable over the next five years, in the face of an increasing funding/expenditure gap and rising patient demand. A key component of the 5 year strategic plan is the requirement for greatly enhanced out of hospital care which will have a direct impact on how community services are configured and delivered.
4. The WLCCG Community Services Plan sets out how the CCG will achieve the system change required by BCT in the context of the work already taking place in the CCG.
5. The key priority for WLCCG is to further redesign community services and to transform primary care in order to reduce the proportion of our resources assigned to acute care; increase the proportion of care patients receive closer to home within their local communities and deliver good patient outcomes.

Policy Framework and Previous Decisions

6. The development of the Community Services Plan is consistent with national policies and drivers for change such as the Keogh Urgent Care Review, NHS Constitution pledges, national performance standards and NHS England's Five Year Forward View.
7. The NHS Five Year Forward view published in October 2014 sets out a shared vision for the future of the NHS based around new models of care. The document sets out why change is needed and how the NHS will need to work with local communities, employers and local authorities to address the challenges facing the NHS.
8. The Community Services Plan is a system change plan which sits between the Leicester, Leicestershire and Rutland (LLR) Better Care together 5 year Strategic plan and the CCGs own Operational plan. The Community Services Plan sets out West Leicestershire CCGs aspiration for community services. It explains how this fits into the broader framework of BCT and how the CCGs plan will help to bring care closer to home. It is also informed and aligned to Leicestershire's Health and Wellbeing Strategy.
9. It sits alongside the CCGs Primary Medical Care Plan developed in 2014 and discussed by the Health and Wellbeing Board in November 2014. It sets out the critical role of general practice in the achievement of the BCT programme and specifically integrated community service provision.

Background

10. Over the past three years the CCG has made good progress working with our practices and partners to invest in a range of community services that seek to enhance the care available to our local population to as close to home as is safe and practicable.
11. Whilst these service investments are locally based and significant in number we have not fully succeeded in knitting all of these developments together into a single, understandable model.
12. The community services plan seeks to address this and describes the vision for community services moving forward and the proposed model of delivery.

Proposals/Options

13. The CCGs vision for community services is the integration of health and social care teams, supported by secondary care specialist, clustered around groups of GP practices within three districts: Charnwood, North West Leicestershire and Hinckley and Bosworth. These will work towards joint outcomes and have the capacity and capability to accommodate a "left shift" of activity from the acute sector.
14. To provide better care and to do it affordably the CCG must increase the proportion of care it provides in local communities and people's own homes.
15. Currently acute services are used too often when other forms of care would be better, reflecting a mismatch between need, setting and provision of care.

16. WLCCGs intention is to redress this through an accessible range of services in the community that respond to the planned and unplanned needs of patients.
17. The CCGs ambition is to develop strong, sustainable, person centred and integrated community services which meet future demand, support the LLR BCT Strategy and improve patient outcomes.

Consultation/Patient and Public Involvement

18. In developing the Community Services Plan, officers have worked with the CCG clinical leads to inform the ambition, model and description of services. The plan has also been informed by extensive patient and public views a range of engagement exercises undertaken by the CCG and Better Care Together. During 2014-2015 five substantial engagement programmes informed our model including the Hinckley Community Services project and the Better Care Together Frail and Older People work stream.
19. The plan was presented and discussed at the Integration Executive in October 2014. Colleagues present felt that the plan clearly articulated the CCG's ambition and model for community services going forward; they recognised much of the content due to joint work to date with the CCG through the Better Care Fund and the implementation of the Primary Medical Care Plan. Specific feedback centred on reviewing the skill mix and capacity of current community teams to support the district level need of patients and the need to more clearly outline the quantum of the left shift of services to community settings, both of which have now been incorporated.
20. The plan was presented and discussed at all the general practice locality meetings during October and was well received by all four federated localities. The federation leads are keen to participate in early discussions regarding the implementation of the plan, particularly the development of Multispecialty Community Providers.

Resource Implications

21. The Community Services Plan presents a vision of the future system, the detailed cost implications have not as yet been fully worked through. This will take time due to the complex interconnectivity of services, providers and premises currently in place.
22. It is anticipated that many of the changes described will involve no increased funding requirements by the CCG but locations, providers and methods of delivery may change. This will mean that the start of a service by one provider will require the release of funding from another.

Timetable for Decisions

23. The Community Services Plan is to be presented to the WLCCG Board in November for final approval. However, it is important to recognise that the plan is an iterative document that will be informed by the forthcoming Better Care Together public consultation and the associated outcomes.

Background papers

24. Better Care Together 5 Year Strategic Plan
Joint Health and Wellbeing Strategy

Relevant Impact Assessments

Equality and Human Rights Implications

25. The Community Services Plan aims to make a positive difference to the health and well-being of our diverse population and reduce barriers that may exist for people from the 9 protected characteristics and other vulnerable and marginalised groups in West Leicestershire. As elements of the plan are worked up and implemented they will undergo a process of 'Equality Analysis'

Partnership Working and associated issues

26. Central to the Community services Plan is the development of Multispecialty Community providers (MCPs) .This is a new type of delivery model integrating primary, community, specialist and social care teams into new and efficient organisations or alliances.
27. These MCPs will need to mature and grow to establish their organisational form and working relationships across the system. The challenge now is to support the development of MCPs so that they will assume a greater leadership role in the provision and coordination of care
28. As a result the CCG will rapidly need to explore joint venture opportunities with its key partners i.e. Federations, UHL, LPT and Adult Social Care to agree the model for further integration of our community and primary care teams.

Conclusions/Recommendations

NOTE the development of the Community Services Plan

DISCUSS the final version of the Community Services Plan

COMMENT on areas to consider for the implementation of the Community Services Plan

List of Appendices

Appendix 1 Community Services Plan