

# Person centred, co-ordinated care in the Frimley Health STP:

## Recognising & Valuing Carers and Young Carers within the Frimley Health & Care STP/ACS

#NHSThinkCarer

Dr. Jim O'Donnell

Chair, *NHS* Slough CCG

“Together for Carers” Meeting

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**NHS**

Slough

Clinical Commissioning Group



# Top Tips

1. **Promote the benefits of strong Patient Participation:** some fail to engage patients and carers well enough, don't see the value of listening to feedback and ideas.
2. **Your Local Authority:** are powerful partners who believe in the commitment of the carers to serve the residents well.
3. **We Listen to patients, carers & families:** ongoing dialogue helps align the direction of travel. This helps carers be the best they can possibly be.
4. **Champion the Carers' Voice** – this is not a given, needs to be worked at daily, can so easily be lost.
5. Ensure you are leading them everyone to **'higher ground'**.
6. **Respond to what carers and patients tell you.**

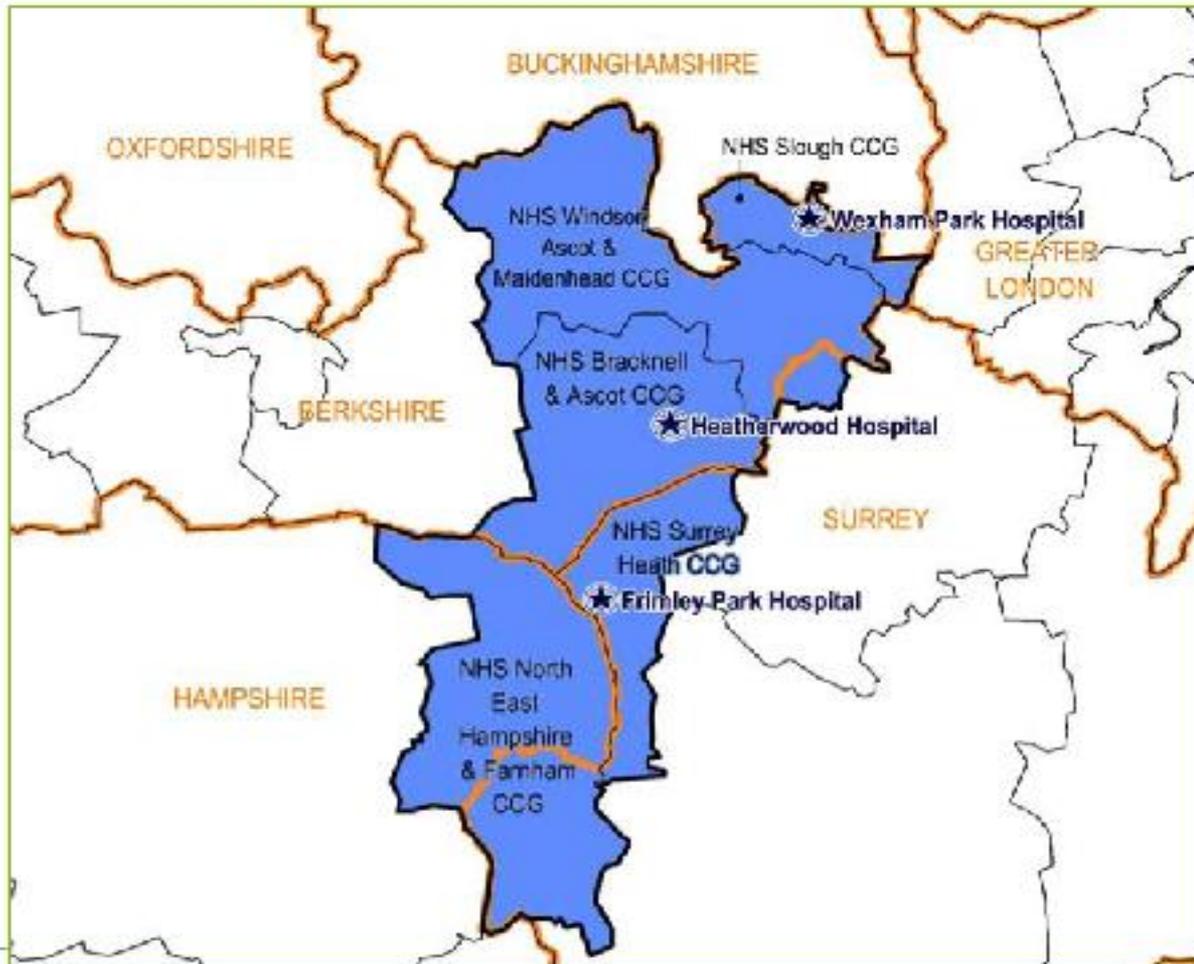


# The Frimley Health STP/ACS

- The acquisition of Wexham Park Hospital by Frimley Park
- The move to achieve systems at scale – CCGs to STPs
- Simon Stevens, 5 Year Forward View
- Sustainability & Transformation Plan
- Sustainability & Transformation Programme
- Sustainability & Transformation Partnership
- 5 CCGs, Three NHS Foundation Trusts, 5 LAs, plus 18 other bodies
- **5 priorities:** Self-Care & Prevention, LTCs, Complex patients, Urgent Care and timely GP, Reducing health inequalities & variation
- **7 initiatives:** taking responsibility, Integrated Hubs, GP at scale, Support workforce, Social Care Support market, Reduce clinical variation, Shared care record



# Our geography and context



**Frimley STP population of 750,000 people in east Berkshire, Hampshire and Surrey. Involves 30 statutory bodies.**

**Includes 220,000 people in North East Hampshire & Farnham – the vanguard population**

# Plan on a page: The Frimley Health & Care STP

Introduction

Many of our residents have the skills, confidence and support to take responsibility for their own health and wellbeing. We can do more to assist them in this and are committed to developing integrated decision making hubs with phased implementation across our area by 2018. Integrated hubs provide a foundation for a new model of general practice, provided at scale. This includes development of GP federations to improve resilience and capacity and provides the space for our GPs to serve their residents in a hub that has the support of a fit for purpose support workforce. Delivering services direct to residents in locations that suit them, at times that suit them, supports our ambition to transform the 'social care support market'. Through a personalised yet systematic approach to delivery of health and social care we have the possibility of reducing clinical variation. Change will be delivered through advances in technology and we will implement a shared care record.

Our priorities for the next 5 years

**Priority 1:** Making a substantial step change to improve wellbeing, increase prevention, self-care and early detection.

**Priority 2:** Action to improve long term condition outcomes including greater self management & proactive management across all providers for people with single long term conditions.

**Priority 3:** Frailty Management: Proactive management of frail patients with multiple complex physical & mental health long term conditions, reducing crises and unplanned hospital stays.

**Priority 4:** Redesigning urgent and emergency care, including integrated working and primary care models providing timely care in the most appropriate place.

**Priority 5:** Reducing variation and health inequalities across pathways to improve outcomes and maximise value for citizens across the population, supported by evidence.

Seven initiatives on which we will focus in 2016/17-17/18

**Initiative 1:** Ensure people have the skills, confidence and support to take responsibility for their own health and wellbeing.

**Initiative 2:** Develop integrated decision making hubs to provide single points of access to services such as rapid response and reablement, phased by 2018.

**Initiative 3:** Lay foundations for a new model of general practice provided at scale, including development of GP federations to improve resilience and capacity.

**Initiative 4:** Design a support workforce that is fit for purpose across the system.

**Initiative 5:** Transform the social care support market including a comprehensive capacity and demand analysis and market management.

**Initiative 6:** Reduce clinical variation to improve outcomes and maximise value for individuals across the population.

**Initiative 7:** Implement a shared care record that is accessible to professionals across the STP footprint.

Summary Financial Analysis

- The Frimley system will spend c£1.4bn on health and social care in 2016/17.
- Although there are modest increases in funding over the period to 2020/21, demand will far outstrip these increases if we do nothing.
- We have assumed health providers can make efficiency savings of 3% pa, and demand can be mitigated by 1% pa. This is in line with historic levels of achievement and existing efficiency plans following the acquisition of Heatherwood & Wexham Park hospital in 2014. Including broader efficiencies from Social Care will deliver about £176m by 2020/21.
- If a further £28m can be saved across our main priority areas, this coupled with an allocation of £47m from the national Sustainability and Transformation Fund (STF) will

STP 2020/21 Summary			
	Do Nothing £m	Solutions £m	Do Something £m
Commissioner Surplus / (Deficit)	(100)	89	(11)
Provider Surplus / (Deficit)	(67)	90	(7)
Footprint NHS Surplus / (Deficit)	(167)	169	(16)
Indicative STF Allocation 2020/21	-	-	47
Surplus / (Deficit) after STF Allocation	(167)	169	29
Social Care Surplus / (Deficit)	(49)	27	(22)
<b>Total Surplus / (Deficit)</b>	<b>(216)</b>	<b>197</b>	<b>7</b>

An underpinning programme of transformational enablers includes:

- Becoming a system with a collective focus on the whole population.
- Developing communities and social networks so that people have the skills and confidence to take responsibility for their own health and care in their communities.
- Developing the workforce across our system so that it is able to deliver our new models of care.
- Using technology to enable patients and our workforce to improve wellbeing, care, outcomes and efficiency.
- Developing the Estate.

## **NHS Commissioners**

- Bracknell and Ascot CCG
- North East Hampshire and Farnham CCG
- Slough CCG
- Surrey Heath CCG
- Windsor Ascot and Maidenhead CCG

## **Acute care provider**

- Frimley Health NHSFT

## **Mental health and community providers**

- Berkshire Healthcare NHSFT
- Southern Health NHSFT
- Surrey and Borders NHSFT
- Sussex Partnership NHSFT
- Virgin Care

## **GP Federations**

- Bracknell Federation
- Federation of WAM practices
- Salus GP Federation (North East Hampshire and Farnham)
- Slough GP Federation
- The Surrey Heath community providers

## **GP out of hours providers**

- East Berkshire Primary Care
- North Hampshire Urgent Care

## **Ambulance Trusts**

- South Central Ambulance Service NHS FT
- South East Coast Ambulance NHS FT

## **County Councils (including Public Health)**

- Hampshire
- Surrey

## **Unitary Authorities**

- Bracknell Forest Council
- Royal Borough of Windsor and Maidenhead
- Slough Borough Council

## **District and Borough Councils**

- Guildford Borough Council
- Hart District Council
- Rushmoor Borough Council
- Surrey Heath Borough Council
- Waverley Borough Council

# The STP/ACS Context

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- **Frimley Health System** – 750,000 population, 13 organisations, 3 FTs, 5 CCGs all outstanding, 5 LAs, Exemplar status. Practices being encouraged to work in new ways with the FTs & LAs. Winter Plans, GP Streaming, general practices on hospital campus at Wexham Park.
- **Organisationally agnostic:** Selecting clinical areas of service to pilot collaboration as if there were no organisational boundaries, focused only on the best pathways for the best patient outcomes.
- **LA Collaboration:** Many areas of shared priority, PHBs, securing electoral mandates to collaborate across borough boundaries. Planning consents granted for new hospital development and a new hospice building against the advice of their planning officers (RBWM).
- **Wider geography** – allows sharing of ideas across 84 practices on GP transformation progress.
- **Integrated decision making hubs** - to suit local needs



## **The Frimley Living Wage**, applied to carers within the Frimley STP/ACS

- unite and enfranchise paid care workers.
- demonstrate recognition to care workers they are valued.
- trained & developed to fulfil their potential.

### Coupled with **LA policies**:

- widespread provision of affordable accommodation locally for designated key workers, including paid carers
- easier to recruit staff at entry level & more experienced.
- recognise young carers especially, and their needs.

The **Frimley Healthcare Academy (FHCA)** will gain University status, the first establishment of its kind to recruit & educate school leavers and people who want to care for others, enabling all parts of the system to access new staff with bespoke skill sets. First time nationally there will be a clear pathway for entry level care workers to eventually achieve consultant status.

Aspire to having over 90% of patients on the End of Life Care pathway spending their last days at home.



# So as you consider and co-design the best system for our carers.....

- ✓ STP/ACS = a system of health & care for the population without boundaries
- ✓ Establish a set of shared values and system mission for all carers & care workers
- ✓ What opportunities and help would you value most?
- ✓ Design in career progression through education & training
- ✓ Change behaviours where these are not in patients interests
- ✓ A system of opportunity that will treat carers with recognition, dignity, equip them with transferrable skills
- ✓ Understand how the health & care system needs to change
- ✓ How caring will also need to change, and quality rise
- ✓ Every resident being cared for by “Teams Frimley”
- ✓ Caring system without gaps, multi-disciplinary, based on teamwork

