Item Number: 13		
Name of Presenter: Victoria Pilkington		
Meeting of the Governing Body	NHS Vale of York	
4 February 2016	Clinical Commissioning Group	
Update from the Partnership Commissioning Unit		
Purpose of Report To Receive		
1. Rationale This report has been produced to update the Governing Body and provide assurance on the key elements of the PCU's work programme.		
2. Strategic Initiative		
	anned care	
	ansforming MH and LD services	
	hildren and maternity	
	ancer, palliative care and end of life care stem resilience	
3. Local Authority Area		
CCG Footprint	ast Riding of Yorkshire Council	
City of York Council	orth Yorkshire County Council	
4. Actions / Recommendations The Governing Body is asked to receive and note the contents of this report.		
 Engagement with groups or committees Aspects of this report have been submitted recently to the CCG's Audit Committee. 		
6.Impact on Primary Care Continued work with York Teaching Hospital NHS Foundation Trust to ensure Continuing Healthcare Assessments are completed to avoid delayed hospital discharges.		
7.Significant issues for consideration The PCU is managing the delivery of a number of key performance targets and national priorities in relation to the Children and Families Act, Parity of Esteem, Safeguarding and integration.		
8.Implementation There are no specific actions for any teams within the CCG. The PCU continues to work in partnership with CCG Programme Leads to deliver objectives within given timescales.		
9.Monitoring The PCU provides regular reports to a number of the CCG's Committees, and a six monthly update on the PCU's work programme is produced for the Governing Body.		

10.Responsible Chief Officer and Title	11.Report Author and Title
Victoria Pilkington	Victoria Pilkington
Head of Partnership Commissioning	Head of Partnership Commissioning
12. Annexes	

None.

1. Introduction

The below details the main elements of the Partnership Commissioning Unit's (PCU) work programme and provides an update on key objectives. Where necessary it also highlights areas of risk and outlines how these risks will be managed.

2. Continuing Health Care (CHC)

There is now a well embedded system within the CHC Fast Track department. Between the 1st November 2015 and 8th January 2016, there were 116 new fast track referrals. The team is finding that there can be capacity issues within existing providers when sourcing care. Fast Track procurement days have been held and the decision has been made by the four CCGs to procure this service which will take place at the end of January.

There has been a considerable reduction in the total number of patients awaiting CHC assessments since June 2015. There is no patient waiting longer than 6 months for an assessment. There are 10 Decision Support Tools (DST) assessments remaining outstanding for the period 3 to 6 months. We are on target to achieve a 28 day turnaround for all DST referrals by April 2016.

We have introduced a new case management model to increase productivity and streamline the case management process. York CHC team is now completing all Decision Support Tools (DST) at York Hospital that historically were completed by the Discharge Liaison Team at York District Hospital.

NHS England has issued guidelines for all retrospective CHC cases to be completed by March 2017. The retrospective team continues to work on cases being returned by Examworks (former name UKIM). The total number of retrospective cases for Vale of York is 262.

Progression of completed records returned from Examworks has been slow due to the difficulty in Examworks obtaining medical records from other agencies. Work is taking place to expedite this through engagement with outside agencies, NHSE and local authorities. New processes have been implemented so cases are completed in line with the monthly trajectory set by NHSE.

The Transforming Care commitment made by NHS England in respect of 'Care and Treatment Reviews' (CTR) has taken precedence in respect to the Winterbourne agenda. This population refers to patient's access to beds that the PCU spot purchase in hospitals and for those patients who are in contracted hospital beds. These reviews are to be offered to individuals with a diagnosis of learning disability and/or autistic spectrum disorder who are currently reported on within the concordat returns. CTR reviews are to be completed prior to planned admission or 2 weeks post emergency admission and again within 6 months.

The PCU is submitting a two weekly tracker to NHS Yorkshire & Humber Area Team to report on target times for discharge. Discharge planning for those in acute assessment and treatment beds is captured within this two weekly report to ensure timelines to discharge are appropriate and timely.

The PCU continues to work with Learning Disability NHS commissioned services and City of York developing an 'At Risk of Admission Register' which was first reported on in October 2015. The aim is to identify the population that may be at risk of admission and identify gaps in service in order to enable flexible support plans to be put in place to support clients in the community.

The PCU commissioning and vulnerable people team is in consultation with key health providers and Local Authorities to establish non-hospital pathways to meet the Transforming Care Agenda.

An audit of Section 117 cases is currently taking place. Work will be undertaken with City of York County Council to review existing packages of care. Standard Operating Procedures have been reviewed to strengthen governance in respect of clinical case management and financial cost for vulnerable people in line with the out of contract activity.

2. Children and Maternity

Future in Mind: Local Transformation Plan

Following approval by NHS England on 18 November, the Plan has been published on the CCG website <u>http://www.valeofyorkccg.nhs.uk/publications/future-in-mind-n-our-transformation-plan/</u> and is also published to the local authority websites. At the beginning of January the first tracker report was submitted to NHS England, measuring spend to date and any improvements in performance for the quarter.

Work is in hand on specific projects within the Plan:

- Recruitment of a project manager: a conditional offer of appointment has been made following interviews on 21 December.
- Community eating disorder service: discussions are in hand with TEWV regarding the details of the service, including reviewing the TEWV proposal for the service against a draft specification, prior to a contract variation. If agreed the services can be delivered within the available financial envelope.
- Children and Adolescent Mental Health Services (CAMHS) workers linked to school clusters and GP surgeries: this work is subject to procurement rules. CCGs have previously reviewed the T2 specification, which is now being amended and discussed with local authority colleagues before being shared with CCGs. The draft procurement programme will run through March-June 2016.
- Online support for secondary pupils. We plan to review with the *Future in Mind* Reference Group and youth councils some online packages which would empower young people to access information, advice and support.
- Extension of the cluster pilot in City of York: the terms for an extension are being discussed with colleagues at the Council to ensure the extension is able to deliver to the outcomes set out in the T2 specification.
- The Plan Implementation Group has started meeting. This group is tasked with overseeing delivery of the Plan across agencies.

3. Maternity Services

The North Yorkshire and York maternity network continues to meet and members have helped shape the planned maternity engagement work. The York Maternity Services Liaison Committee has been involved in shaping this work, and 4 members volunteered to join a virtual task and finish group to develop the engagement tools and approach.

Service user engagement to inform the strategy for commissioning maternity services has been approved by CCGs and was launched on 11th January 2016. This includes paper and online

surveys as well as some smaller scale Discover! events within localities. We expect to engage with the Vale of York CCG Maternity Services Liaison Committee as part of the plan. Details will be posted to the CCG website and CCG communications and engagement colleagues are supporting the communication plan.

Phase 2 of this work will be the co-production of a maternity strategy and this is likely to be in 2016/2017. This work will link to the NHS 5 Year Forward View planning guidance recently published, and will look to support the CCG consideration of choice and personalisation agenda in maternity services, and perinatal mental health services.

4. Children and Families Act (Part 3)2014 – Special educational needs and disability code of practice: 0 to 25 years

The reforms as a result of the Children and Families Act (Part 3) and resultant Code of Practice, are focussed on enabling children and young people to achieve the best they can with an emphasis on outcomes rather than processes. This is to be achieved by greater co-operation between education, health and social care working together.

The majority of statutory duties rest at a local level, predominantly with local authorities but also with CCG's, in particular ; joint commissioning with local authorities, supporting the integrated Education, Health and Care needs assessment process, including the Designated Medical Officer and Clinical Lead roles and the provision of personal health budgets.

A local internal audit was conducted to assess CCG compliance of their responsibilities. The audit reported significant assurance on progress against the actions and the effectiveness of arrangements put in place to implement the CCG's statutory duties contained within the Act. It was supplemented with a series of recommendations which the PCU are currently underway with.

There is to be a SEND Ofsted/Care Quality Commission (CQC) local area inspection expected to commence early 2016. The PCU are engaged with 3 local authorities to ensure preparedness.

A Designated Medical Officer/Clinical Leads network workshop is planned for February 2016 to articulate the strategic role of the named individuals and how the role will link with the PCU to provide CCG assurances around the statutory responsibilities of the Act and Code of Practice.

5. Children's Autism Diagnostic Services

The PCU continue to collect children's autism diagnostic monitoring data for a 2nd year, this is supplemented with quarterly PCU/CCG meetings to discuss the monthly reports and any emerging issues, in particular progress towards NICE compliance; the start of the autism assessment being within 3 months of referral to the autism diagnostic team.

The PCU has completed the autism quality review and is currently in the report writing phase. This project set out to formally review the quality of autism diagnostic services for children and young people in North Yorkshire and York. The review was conducted in 2 phases, the first phase concentrated on gathering user feedback, the second was a meeting with service providers and to collect and triangulate data from other sources.

6. 0 to 19 Healthy Child Programme

The PCU is a member of the 0-19 Healthy Child Programme Steering Group which is overseeing the direct provision of services transfer to City of York on the 1st April 2016. The PCU supporting the CCG in the consideration of health assessments for looked after children, specialist school nursing role, and to continue work with the Lead CCG Commissioner of the Looked After Children and Safeguarding Children service, to understand how this links to the City of York as a commissioner and provider of services moving forward.

7. Children who are Looked After

The PCU is a member of the Multi Agency Looked After Partnership Executive Group, and work is underway to finalise a new strategy for children who are looked after. The PCU is also working with the Designated Nurses for Safeguarding Children to improve supporting processes and systems between City of York and York Teaching Hospitals NHS Foundation Trust. This will support the improved timeliness of initial health assessments.

8. Adults - North Yorkshire Mental Health Strategy

PCU have supported development of a joint strategy with North Yorkshire County Council (NYCC), which was signed-off by Health Well Being Board (HWBB) in September 2015 and final strategy launched in November. An implementation group is being jointly planned with PCU and Health Adult Services (HAS) Commissioning team.

PCU will be working with City York Council (CYC) to develop a mental health strategy for the York area, building on the findings of the CYC Joint Strategic Needs Assessment (JSNA) "deep dive" in mental health and subsequent developments.

9. Dementia

Currently 54.2% of patients likely to have dementia have received a diagnosis, and TEWV are now implementing the newly specified Cognitive Impairment Pathway. The PCU will continue to support CCG colleagues in achieving the national target of 66.8% diagnosis rates, through attendance at regional Strategic Clinical Networks (SCN), York Dementia Action Alliance and contract review of current support service with Dementia Forward.

10. IAPT

TEWV has reviewed the parameters for recording and coding access to treatment; updated accurate figures are now available. TEWV are now overseeing recruitment into the enhanced service. PCU have attended the new 2015/2016 targets workshop and prepared an analysis of waiting times. Monthly monitoring will continue through the Contracting team. The Commissioning team are liaising with Business Intelligence on a regular basis to provide profiling data on new patient groups; establish incidence of anxiety and depression for each group.

11. Autism and ADHD

The Joint Age Autism Joint Strategy for North Yorkshire was signed off by the Health and Wellbeing Board and published in December 2015. PCU are working with CYC to develop a similar All Age Joint Autism strategy in 2016. The new assessment and diagnosis service provided by the Tuke Centre began on 4th January 2016. The PCU are working with partners and the Tuke Centre to plan and scope the new pathway for assessment, diagnosis and post diagnostic support.

The PCU are working with Health Education England to progress the development of training in autism for NHS staff across the North Yorkshire and York area and support the St John's Autism Action Learning Collaborative.

12. Crisis Care Concordat

Work to implement the action plan from the Crisis Care Concordat is ongoing. The groups formerly known as the Gold, Silver and Bronze groups have been restructured. Crisis Care Concordat Strategy Board replacing the gold group, the membership and remit of this group remains unchanged. Crisis Care Concordat Reference Group replaces the silver group. It is now a wider Reference Group for the purpose of engagement and information sharing and meeting three times per annum. Crisis Care Concordat Delivery and Implementation Group replace bronze group as a smaller Delivery and Implementation Group which will focus on the delivery of the North Yorkshire and York Action Plan.

The restructure will ensure that the plan is delivered according to local need.

13. Adult Mental Health Services

Section 136 Suite: Following completion of minor works, service at Bootham Park Hospital (BPH) resumed mid-December 2015.

Mental Health Street Triage: service is active in York and Selby and enhanced provision has been developed during the closure of BPH.

14. Learning Disabilities Self-assessment Framework:

Work continues on the Self-Assessment Framework (SAF) action plan ahead of feedback from NHSE on their review of the SAF process and their directives on this agenda going forward. As a result, no submission of the SAF was required this January.

The current action plan includes delivering a GP Pilot (x 3 practices) in Scarborough to support Annual Health Review of people with LD, increase uptake of Health Action Plans and improve accuracy of LD registers with a view to applying the findings and learnings across the VoY patch and other NY CCG areas. The PCU is also supporting NYCC to develop a Learning Disability (LD) employment strategy as part of the SAF action plan and recently attended the NYCC Employment Strategy workshop (9 Dec).

15. LD National Plan – Building the right support (BTRS)

New NHSE policy indicates that by 2018 inpatient CCG-commissioned LD beds will be reduced to 10-15 per million population. Therefore, resettlement planning and enhancing the provision of community services need to be scoped and developed. A detailed 'BTRS' project plan is to be

developed by the Transforming Care Partnership (previously known as the Transforming Care Group and submitted to NHSE in February 2016).

16. Early Intervention Psychosis

PCU have held meetings with TEWV to establish delivery plans to meet the target of 50% of first episode psychosis patients received NICE approved care package within two weeks following referral, from April 2016. Assurance returns have been submitted to NHSE at the end of December.

17. Armed Forces: Veteran Community Mental Health (MH) Services

The PCU represents the VoY and North Yorkshire CCGs at the Armed Forces Commissioning Network. An Engagement Programme (with Service Users (SU) and their families, charities, etc.) to inform development of future service models for Veteran MH Services is being planned by NHSE. Current Veteran-specific provision locally is supplied by The Yorkshire & Humber Veteran Outreach Pilot Service and commissioned by NHSE until September 2016. £8.4m Department of Health funding will be available over the next 5 years for Veteran Mental Health Commissioning with £1.68m being used this financial year to fund 3 new Pilot Projects details to be confirmed.

18. Personal Health Budgets

PCU is working with the SCN "Getting Started programme" for LD and MH, hosting Multi-Disciplinary Team discussions with service users and social care, as well as expert patients and education. PCU is also attending workshops provided by NHSE through the national "Moving Forward programme".

PCU is providing support to CCGs in developing the local offer, linking in relevant data analysis, local themes, input from existing service users and carers accessing PHBs through Continuing Health Care and Vulnerable People.

The commissioning team will work with TEWV as the lead MH and LD provider to explore new approaches to PHB within main contracted activity e.g. mental health/LD. PCU will coordinate, implement and management the engagement and communication based on the principles of the "Discover!" process to support the Local offer.

19. Mobilisation Project

Now the mobilisation project is complete the VoY Mental Health transitions plan will now be monitored through monthly VoY Quality group meetings and contract management board.

An ongoing project to develop the Bootham Estate continues, following the recent CQC inspection and report. TEWV is delivering a Bootham Hospital Action Plan and Long-term Estates Strategy. In the interim, Ward 6 has now relocated to Cherry Tree House and Wards 1 & 2 in-patients relocated to other TEWV hospitals (Middleborough and Darlington). In December 2015, the S136 suite was reinstated at BPH and the CQC has agreed to reinstate Outpatient services to BPH subject to NHS Property Services certification and compliance.