

Introduction to the Berkshire West ICS

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Geography and partner organisations

The following organisations are full members of the Berkshire West ICS:

- Acute Hospital Providers:
 - Royal Berkshire NHS Foundation Trust
- Community / Mental Health Services Providers:

 Berkshire Healthcare Foundation Trust

- Primary Care Provider Alliances
 - South Reading Alliances
 - Wokingham Alliance
 - Newbury Alliance
 - North & West Reading Shadow Alliance
- Clinical Commissioning Groups:
 - NHS Berkshire West CCG

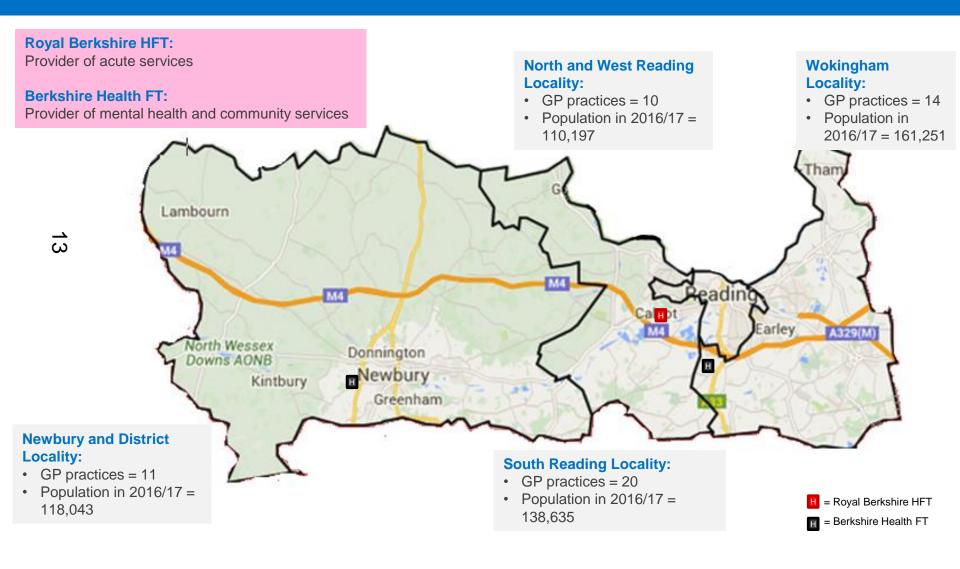
BW10

 The partnership of 3 Local Authorities and NHS bodies

Through these organisations, the footprint of the Integrated Care System covers a registered population of 528,000 residents, living in three Local Authority areas:

- West Berkshire Council
- Reading Borough Council
- Wokingham Borough Council

Geography and partner organisations





To enable people to take more responsibility for their own health and well-being



To move care closer to home, wherever appropriate



To evolve clinical pathways to be better integrated across providers to improve patient experience.



To increase the capability and capacity of primary, community and social care to provide multidisciplinary "wrap around" co-ordinated care that efficiently meets the patient's needs.



To use a population health management approach to better understand the clinical needs of our population and maximise the opportunity to prevent, and to intervene early to reduce the need for more intensive on-going care.



To ensure a high quality, fit for purpose acute and specialist hospital service



To develop a shared Quality Strategy and systems and take a single, system wide approach to the delivery and monitoring of quality.

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Achievements - One year on

New Clinical Pathways designed and implemented

- Outpatient redesign
- New Primary Care Streaming model
- MSK

New ways of doing business between NHS Partners

- New risk share arrangements & partial system control total
- New payment mechanisms
- Aligning of incentives

Changed organisational landscape

Merged, single CCG with development of 4x primary care alliances



New Ways of Working with Local Authority Partners

- The BW10 Partnership continues to develop and joint working has delivered a number of success:
 - Reduced emergency admissions to hospital
 - Reduced delayed transfers of care
 - Reduced requirement for costly social care packages
- In Wokingham the new CHASC team which bring together Community Health and Social Care working with GP Alliances are a particular success.
- LA partners are identifying greater opportunities for joint working that improve efficiency of the whole system eg single social worker team at RBH
- LA CEOs are meeting together with HWB Chairs and portfolio leads across the LAs to identify ways to strengthen working with the ICS.



NHS England MoU Domains

ICS Objectives

Deliver the 5YFV four priorities: Progress urgent care, strengthen general practice, improve mental health and cancer

Meet the system and organisation level financial control totals by delivering efficiencies and other improvements

Develop integrated care pathways that build on a Population Health Management approach

Act as a leadership cohort and contribute to the National ICS Programme of work

An improvement in the health and wellbeing of our population

Enhancement of patient experience and outcomes

Financial sustainability for all constituent organisations and the ICS

18/19 Strategic Priorities

Develop a resilient urgent care system that meets the on the day need of patients and is consistent with our constitutional requirements

To redesign care pathways to improve patient experience, clinical outcomes and make the best use of clinical and digital resources

Progress a whole system approach to transforming primary care to deliver resilience, better patient outcomes and experience and efficiency

Develop the ICS supporting infrastructure to deliver better value for money and reduce duplication

Deliver the ICS financial control total agreed to by the Boards of the constituent statutory organisations

ED streaming

Urgent Treatment Centre at WBCH Outpatients Programme

iMSK

Deliver the enhanced access requirements set out by the FYFV and ICS MOU

Implement networks / neighbourhoods of practices

each with a registered population of 30-50k

Key projects

Develop the ICS implementation plan

Work with Kings Fund to Agree the ICS Vision and Objectives

Develop and

implement a new

contractual form

Credible financial recovery plan for 19/20 and 20/21

Progressing transparency of

cost information at SLR level

High Intensity User project

Demand & Capacity Model for bedded care Wellbeing service

CPE

Medicines utilisation

Respiratory

Long Term Conditions (Care and support planning and egrated Falls assessment)

Cardiology

covering the localities in Berkshire West Strengthen the workforce through better recruitment and retention to support sustainability and expansion of primary care

Group Agree and deliver ICS public engagement programme

Progress the workforce

projects identified by

the ICS Workforce

Agree blueprint for PHM and implement a solution

Launch 111 online

Develop LUC &

Produce a UEC

Ophthalmology

Phlebotomy

Develop and work with provider Alliances to provide greater resilience and capacity in addition to enabling the implementation of new care models

Shared Corporate Services

Shared Estates project

Berkshire West

Strategy for

Benefits

- Patients being seen in the most appropriate setting
- Services located where they are needed which provide care in a timely manner
- Fewer patients needing to access on the day services from the acute hospital
- Patients to receive more of their care closer to home
- Greater reliance on technology to free up clinical time for more complex tasks
- Unlock estate capacity through fewer F2F appts
- Services provided at a lower cost to the taxnaver
- Patients to be able to see a GP 7 days a week from 1st October 2018
- Greater resilience and capacity within the primary care sector
- Development and deployment of new care models which are more integrated and delivered closer to patients' homes
- Increased public and patient involvement and understanding
- New ways of working together to resolve
- New payment mechanisms
- Clear investment programmes based on objectives
- Improved decision making to support health
- A system that is delivering its financial trajectory

Metrics

- · 4 hour A&E standard performance against the agreed trajectory
- Reduced growth in A&E Attendances
- Reduced growth in NEL admissions
- DTOC performance
- NEL and EL admissions per 100k
- ALOS (MH, Community & Acute) · Aggregate £ savings from projects
- · Patient experience measure (to be defined)
- Patient outcome measures (to be
- defined) Reduction in Out of Area Placements
- · Workforce bundle metrics (TBC)
- Access to GP services including evenings and weekends for 100% population by 01/10/18
- · Ensuring every practice implements at least 2 high impact "time to care" actions
- Proportion of practices that are members of an alliance
- · Proportion of practices doing care planning through integrated teams

- · Workforce bundle metrics (TBC)
- · Presence of a 3 year 'roadmap' that delivers the KPIs
- Presence of a PHM blueprint
- · New contract form agreed and in place
- · Presence of an OD plan

- · RBFT CT performance BHFT CT performance
- CCG CT performance
- · System CT performance
- · Agreed financial strategy in
- place for 19/20 and 20/21

BW10 Health & Local Govt (inc. BCF)

Berkshire West ICS

