

NHS Crawley CCG – working together to deliver health and wellbeing for you and your community

Purpose and Vision

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Focus on system-wide transformational change.

Integrated Commissioning: The CCG and West Sussex County Council have developed a framework for Care Between Hospital and Home (Sub acute Care) which aligns and includes the plans brought forward from 2013/14 and provides a sustainable basis to move care from hospitals into the community.

During 2014-15 extending further into joint and integrated arrangements with WSCC that enable the sharing of information (where appropriate), personal health budgets, improving the quality of care in nursing and residential homes and the development of primary care services in the community - The focus will be on keeping people independent and well.

This will require services to be provided 7 days a week, with improved access in and out of hours.

Strategic Context and Challenge

- Relatively high BME population
- Large number of children
- LNIA areas of deprivation and Health Inequalities
- 14/15 QIPP programme of 4% £6m
- Better Care Fund in 15/16 requiring £4.4m redeployment of funds

NHS Outcomes Framework

Three Local Priorities: Improving primary Care Access, Care Home Admissions, Shared Decision Making

Infrastructure and services strategy

Crawley Strategic Outline Case – During 2014-15 consultation with patient, public and stakeholders to develop with NHS England Area Team plan for primary care and services estates and infrastructure.



Primary and community care development – Patient centred integrated care

Planned Care

Improving pathways

Elective Care

Service areas that will be developed and delivered differently are:

- Musculoskeletal (MSK) integrated pathway including Pain services, rheumatology and therapies and rehabilitation
- Shared decision making
- Medicines management (including interface agreements and shared care pathways)
- Areas highlighted by clinical audits, cancer or other network peer reviews
- Better Care Better Value

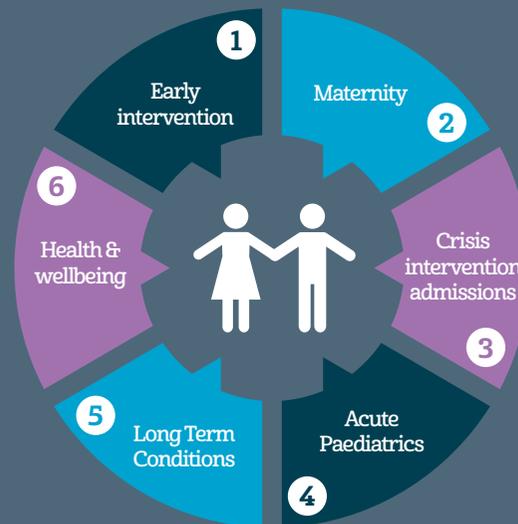
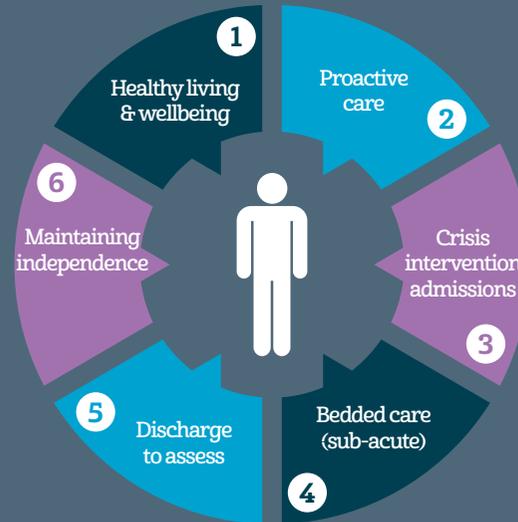
Patient safety & quality

Implement the agreed strategy for quality improvement

Ensuring that the added value of clinician and patient and public involvement is realised

- Commissioning for improved health outcomes
- Strong links with contracting through the single performance conversation
- Zero tolerance MRSA and C Difficile targets
- Friends and Family Test
- NHS Constitution Pledges

Care Between Hospital and Home (Sub Acute Care)



Long Term Conditions

Pathways

Supported Self Care (telehealth and telemedicine). Health Coaches

Cardio-respiratory and diabetes hubs in the community 'Menu of Care'

Dementia - Improving the integration of dementia support into proactive care programmes.

Improve crisis support for people with dementia and review dementia inpatient bed usage and capacity in context of whole dementia support system

Develop a joint commissioning strategy for dementia support and local support networks and forums for people living with dementia and their families

Stroke pathways in conjunction with CVS Network

End of Life Care

Performance Improvement and Finance

2015-16 – full adoption of financial planning framework.

The creation of a sustainable local health economy (LHE) integrated Unscheduled Care Programme Budget.

Unbundling stroke tariff: Implementation of the new specification

Split or sub tariff: As a result of agreements reached in 13/14 from a change in pathway

Risk sharing: As a result of PbR changes in 13/14

Gain sharing: As a result of agreements negotiated in 14/15

Performance improvement plans agreed in 13/14 will be delivered:

- Cancer waiting times, Stroke, # NOF, Neurosurgery, Waiting time in A&E, Ambulance handover times