

Clinical Commissioning Group Governing Body
Paper Summary Sheet
Date of Meeting: 25 July 2017

For: PUBLIC session **PRIVATE Session**
For: Decision **Discussion** **Noting**

Agenda Item and title:	GOV/17/07/15 NHS Right Care Programme
Author:	Lucy Baker – Acting Director of Acute Commissioning Danielle Harris – Planning and Transformation Information Manager
Lead Director/GP from CCG:	Mark Harris, Chief Operating Officer Dr Mark Smithies, Secondary Care Doctor Lucy Baker, Acting Director of Acute Commissioning Dina McAlpine, Director of Quality
Executive summary:	<p>NHS RightCare is leading the work to address unwarranted variation in England, and has developed a wide range of resources, in particular the series of Commissioning for Value (CfV) data packs at clinical commissioning groups (CCG) and sustainability and transformation plans (STP) level.</p> <p>The CCG is within Wave 2 of the programme and must set out a programme of work that demonstrates how 40% of the opportunities will have actions identified by September 2017.</p> <p>Wiltshire CCG's RightCare delivery plan has been assured by NHS England and work progresses on the 3 prioritised programmes to meet the 40% threshold.</p>
Evidence in support of arguments:	Information packs produced by NHS RightCare Programme.

Who has been involved/contributed:	<p>Mark Harris, Chief Operating Officer Dr Mark Smithies, Secondary Care Doctor Dr Peter Jenkins, Chair Lucy Baker, Acting Director of Acute Commissioning Dina McAlpine, Director of Quality Emma Higgins, Quality Manager Kate Blackburn, Public Health</p>
Cross Reference to Strategic Objectives:	<p>2. Commission the right services in the right place, which are accessible when required to meet the needs of the local population and national priorities;</p> <p>4. Achieve a sustainable health economy optimising appropriate use of resources for the delivery of efficient and effective healthcare;</p> <p>6. Enhance quality and safety of services by having effective mechanisms to set quality standards and drive for continuous improvement;</p> <p>7. Encourage and support the Wiltshire population to manage their own care, improve their health and wellbeing and make their own choices.</p>
Engagement and Involvement:	<p>None at this stage</p>
Communications Issues:	<p>None at this stage</p>
Financial Implications:	<p>Potential financial efficiency as a result of improving outcomes and service delivery.</p>

Review arrangements:	None at this stage
Risk Management:	To be set out by sub-group.
National Policy/ Legislation:	NHS Right Care Programme www.england.nhs.uk/rightcare/
Public Health Implications:	Links to improvement in prevention and prevalence at topics level within the programme.
Equality & Diversity:	Not reviewed at this stage.
What specific action re. the paper do you wish the Governing Body to take at the meeting?	<p>The Governing Body are asked to :-</p> <p>NOTE the progress made and next steps to use the deep dive information to generate the improvement actions and focus on embedding RightCare across the organisation. .</p>



Wiltshire
Clinical Commissioning Group

NHS RightCare

July 2017 Update

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NHS RightCare Approach - Maximising value

PHASE 1

Where to Look

Highlighting the top priorities and best opportunities to increase value by identifying unwarranted variation.

PHASE 2

What to Change

Designing optimal care pathways to improve patient experience and outcomes.

PHASE 3

How to Change

Delivering sustainable change by using systematic improvement processes.

Key ingredients **Indicative & Evidential Data**

Key ingredients **Clinical Leadership & Engagement**

Key ingredients **Effective Improvement Processes**

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What we had to do and update on 15 Steps completion

STEP	Description	Target date
1	Engagement completed with CCG and key partners	31 January 2017
2	Priority programme areas reported	24 February 2017
3	Decision criteria agreed and approved to drive RightCare high impact/ quick wins workstream. Ideas generation process agreed and live.	15 April 2017
4	CCG diagnostic completed	21st April 2017
5	Credible Delivery Plan shared with Delivery Partner- CCG PLANS ASSURED BY NATIONAL TEAM	5th May 2017
6	Optimal design workshops (or equivalent process) held for at least one programme area	9th June 2017
7	High impact/ quick win ideas prioritised through decision criteria and cases for change in production.	9th June 2017
8	RightCare Delivery Plan for programme 1 developed- <u>MSK</u>	30th June 2017
9	Optimal design workshops (or equivalent process) held for at least two programme areas	7th July 2017
10	RightCare Delivery Plan for programme 2 developed- <u>GASTROINTESTINAL</u>	31 July 2017
11	Optimal design workshops (or equivalent process) held for at least three programme areas	04 August 2017
12	RightCare Delivery Plan for programme 3 developed- <u>CVD</u>	31 August 2017
13	Evidence of quick wins/high impact priority projects being implemented	01 September 2017
14	Logic Models, Health Outcome Trajectories, Financial Trajectories approved for all programme areas	08 September 2017
15	Latest date monitoring started using logic models etc.	October

CCG Plans assured by national team – May 2017

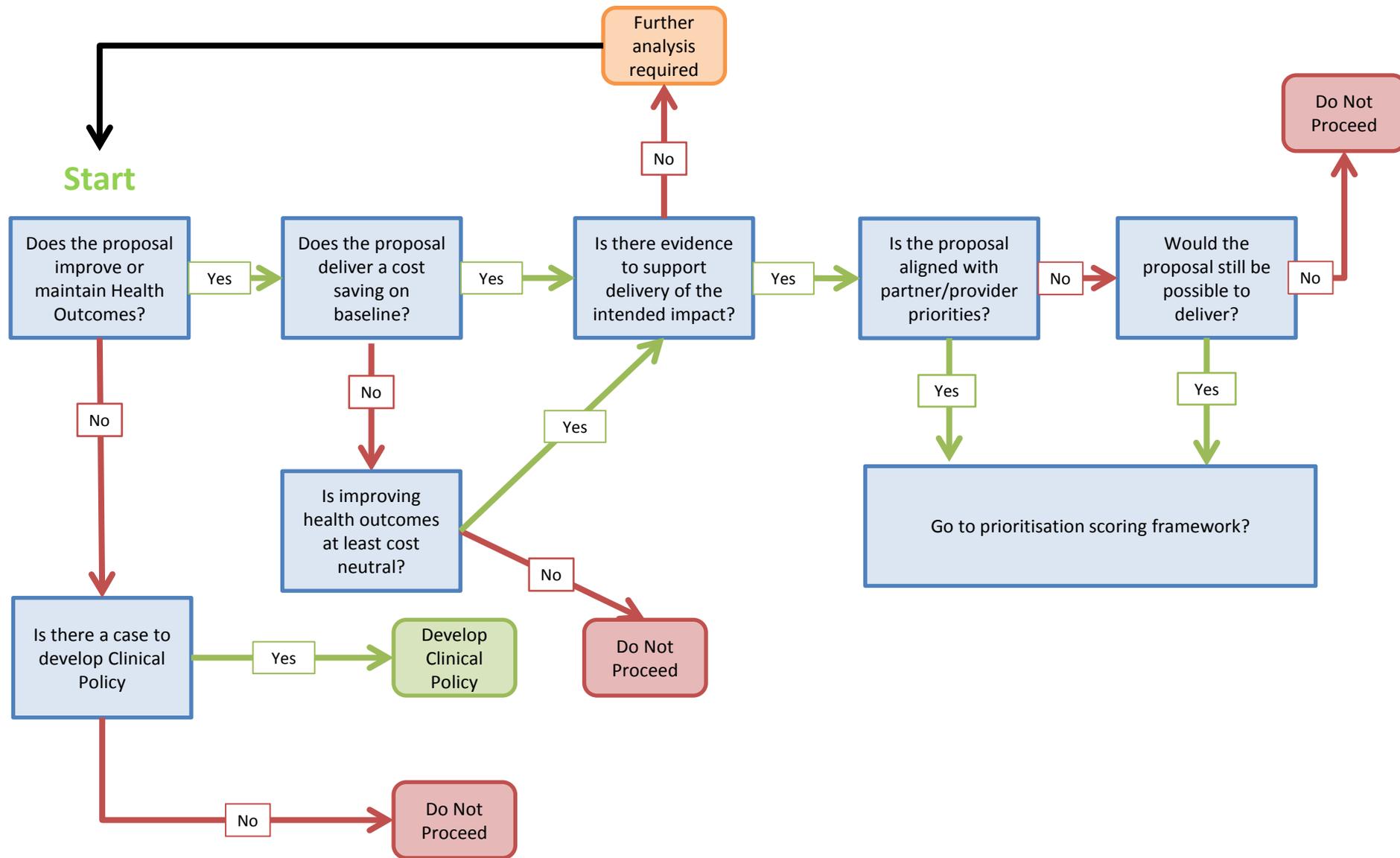
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Right Care for Wiltshire CCG

What we have done so far:

- Completion of a RightCare diagnostic, to understand where we are and what we need to do to improve.
- Completion and sign off of decision tree. (annex a)
- Submitted a RightCare Delivery plan for Wiltshire CCG.
- Embedded RightCare into PMO processes, particularly around project work books.
- Incorporated RightCare into the Wiltshire CCG Corporate induction.
- Submitted an MSK Delivery plan, including logic model (annex b), key milestones and financial trajectory.
- Organised training sessions with CCG colleagues to ensure RightCare is embedded as a BAU process.
- Developed local data packs using RightCare information, digesting and locally interpreting data and understanding what it means. Completing gap analysis where projects are already in place.
- Priority area data packs are scheduled to go through CAG in July, August, September.

Annex a- Wiltshire CCG - Decision Tree for testing and prioritising Investment /Improvement Proposals

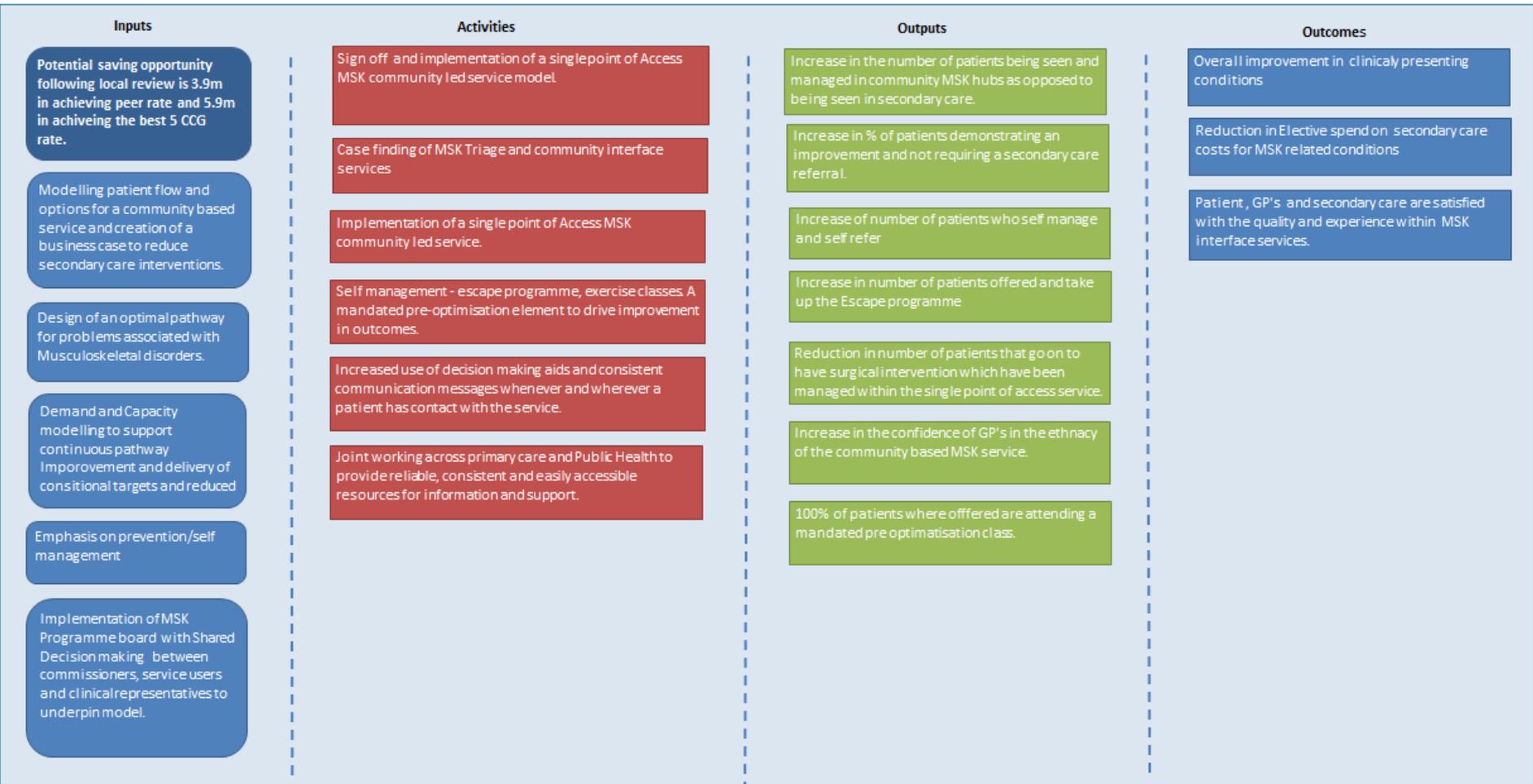


Annex b- MSK Logic model- Submitted as part of the MSK RightCare delivery plan

RightCare collection template
Evaluation Plan - logic model

Wiltshire CCG

MSK Programme



Priority programme areas

Programme	Right Care £Opp.	Quality Opp.	Notes
1. MSK	Elective £7,277 NEL £414K Prescribing £118K	Hip replacement, EQ-5D Index, average health gain Knee replacement, EQ-5D Index, average health gain % fractured femur patients returning home within 28 days	Data pack completed and to be shared at August CAG including gap analysis. Local review shows 3.9m opportunity to achieve the peer average. Large proportion of Elective opportunity within Osteoarthritis related admissions. Non-Elective opportunity within Back, Neck and Musculoskeletal pain. Also growth within Osteoarthritis and Rheumatoid Arthritis related admissions. MSK Investment business case for a community led interface service currently going through the governing body.

Programme	£ Opp.	Quality Opp.	Notes
2. Gastrointestinal	Elective £796K	<ul style="list-style-type: none"> • Alcohol specific hospital admissions • Rate of emergency gastroscopies, upper GI bleeds and peptic ulcerations • Reported Clostridium difficile cases 	<p>Data pack to be shared at August CAG</p> <p>STP Gastroenterology group set up, with case for change document being worked through.</p> <p>Local review shows significantly lower opportunity.</p>
3. Circulatory Disease	NEL £716K Prescribing £766K	<p>Reported prevalence of CHD</p> <p>Patients with CHD whose BP < 150/90</p> <p>Patients with CHD whose BP < 150/90</p> <p>Patients with hypertension whose BP < 150/90</p> <p>Patients with stroke/TIA whose BP < 150/90</p> <p>SNAAP metrics including ESD</p>	<p>Data pack to be shared at September CAG.</p> <p>Opportunity mainly within Stroke related conditions.</p> <p>Opportunity within reducing Length of stay, where Length of stay is above trim point.</p>

Further programme areas

Programme	Right Care £opp.	Notes
Cancer & Tumours	Elective £246k Prescribing £42k	Work stream expedited due to focus on cancer. Cancer Rightcare data pack reviewed and fed back to NHSE as part of national cancer plans. Data pack to be produced on refreshed data from NHS RightCare End July and taken to CAG.
Endocrine, Nutritional and Metabolic	Quality measures only	Review scheduled for October 2017
Genitourinary	Prescribing £337k	Review scheduled for October 2017
Maternity and Early Years	Quality measures only	Data pack presented at STP Maternity forum and will be embedded in Maternity Transformation Plan (Oct 17)
Mental Health problems	Quality measures only	Review scheduled for October 2017
Neurological system problems	Prescribing £343k	Review scheduled for September 2017
Respiratory System Problems	Elective £213k Prescribing £243k	Review scheduled for September 2017. GP lead identified.
Trauma and injuries	NEL £660k Prescribing £127k	Review scheduled for September 2017. To be progressed via Falls and Bone Health pre-existing group.