

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

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COMMUNITY SERVICES RE-PROCUREMENT PROGRAMME: PROGRESS REPORT

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Summary

This report provides an overview of NHS Medway Clinical Commissioning Group's (Medway CCG) Community Services Re-Procurement Programme (CSR). The aim of this programme is to transform the way in which community services are delivered. Our focus is to create integrated community based care organised around the needs of our patients; improving quality and efficiency through designing and delivering clear outcomes measures.

All of the community services commissioned by the CCG have been reviewed to determine the services within the scope of this programme. This is detailed within a Project Initiation Document (PID) which also sets out the scope and objectives of the Programme within Medway and how it will operate for its duration. The PID was reviewed and approved at the CCG's Governing Body in May 2017.

A twelve week formal public consultation is included within this programme and therefore, this report is presented to the Health and Adult Social Care Overview and Scrutiny Committee for information and agreement of future updates.

It is proposed that the Committee will be asked to agree at a future meeting whether or not the proposals amount to a substantial development of or variation in the provision of health services in the local authority's area.

1. Budget and Policy Framework

- 1.1 Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway. The Council has delegated responsibility for discharging this function to this Committee and to the Children and Young People's Overview and Scrutiny Committee as set out in the Council's Constitution.
- 1.2 The terms of reference for the Health and Adult Social Care Overview and Scrutiny Committee (Chapter 4 Part 5 paragraph 22.2 (c) of the Constitution)

includes powers to review and scrutinise matters relating to the health service in the area including NHS Scrutiny.

2. Background

2.1 Current services need to be re-commissioned and re-procured:

- As current contracts are due to expire,
- To ensure optimum outcomes within the available resources,
- To align with the Sustainability and Transformation Plans. This coupled with the recent publication of the GP Forward View and the emerging new models of care now requires the CCG to consider the local community service re-provision in line with these emerging models.

2.2 The aim of this programme is to transform the way in which community services are delivered. Our focus is to create integrated community based care organised around the needs of our patients; improving quality and efficiency through designing and delivering clear outcome measures.

2.3 The case for changing our community services is now even stronger; the 'Medway Model' is being developed with key partners to form the CCG's future model for out of hospital care, see Appendix 1 for the Medway Model. This responds to the challenges posed by people living longer, having multiple and more complex health issues, and at a time when there are constraints on future NHS spending.

2.4 This programme will be critical to the development of the local vision – redesigning and improving the way in which community services are accessed and provided locally, supporting reductions in health inequalities, improving patient experience in using the services, which in turn, will ensure that patients remain well and cared for in their place of choice (home). This will also reduce the demand for A&E and inpatient care as well as continuing to support appropriate early discharge and improving the use of technology.

2.5 The integration of community services will support the development of new ways of working within primary care; supporting delivery of patient facing services and providing greater resilience in the primary care workforce.

2.6 The programme will align to the local estates strategy to ensure that services are underpinned by fit for purpose premises and accommodation large enough for the growing population.

3. Advice and analysis

3.1 A Project Initiation Document (PID) sets out the scope and objectives of the Community Services Re-procurement Programme within Medway and how it will operate for its duration. The PID was reviewed and approved at the CCG's Governing Body in May 2017.

- 3.2 This Programme is overseen by a Steering Group with representatives from across the CCG, Public Health and Partnership Commissioning. The Steering Group reports via the CCG Commissioning Committee to the CCG Governing Body. The Steering group is accountable to the Commissioning Committee, with Governing Body sign off required at key stages of delivery.
- 3.3 The objectives of the Programme are:
- To confirm the services in scope of re-design re-procurement.
 - To confirm the programme budget, governance structure and timeline.
 - To carry out due diligence stocktake activities to ensure that accurate information is available on current service provision - financial values, activity and workforce.
 - Agree and seek the relevant approval for a new community service model, adapting the model within the timeline as required to meet national direction and emerging models.
 - To develop the programme benefits through integrated service provision, including reducing costs and improving quality and patient experience.
 - To procure the new service model.
 - To develop a robust approach to communications and engagement ensuring that our patients and public and other key stakeholders including providers, the voluntary sector and social care are integral and are formally consulted on the re-procurement of community services.
 - To ensure that the local estate provision is appropriate to accommodate and support the new integrated community service model.
- 3.4 A number of impact assessments will be completed as part of this programme, including an equality and diversity impact assessment and individual service impacts assessments to confirm the impact on services commissioned by other CCGs/Providers, and future sustainability of current Providers.
- 3.5 The main provider of community services in Medway is Medway Community Healthcare (MCH), Kent Community Healthcare NHS Foundation Trust (KCHFT). The voluntary and community sector also provide a small number of community services.
- 3.6 All community services within Medway have been reviewed and the services that are within scope of this programme are listed below. Please note that 'in scope' means that services will be included within the due diligence stocktake that will be undertaken, it does not mean that they will be re-procured as part of this programme. The approach to procurement will be determined following completion of the due diligence stock take.
- 3.7 Due diligence stock take reviews are being scheduled during 2017 to undertake a stock take of current services and compliance against contract. This means that services within scope of this programme will be subject to a detailed review of current service specifications, activity and finances.
- 3.8 The services within scope of the CSR Programme are listed below:
- Anti-Coagulation
 - Cardiology (including Arrhythmia)
 - Learning Disabilities

- Clinical Assessment Service
- Community Nursing
- Community Rehabilitation Services
- Community Respiratory
- Continence Care
- Cruse Bereavement
- Dementia
- Dermatology
- Diabetes
- DVT and Cellulitis
- Epilepsy
- Lymphoedema
- Neuro Physiotherapy
- Nutrition & Dietetics
- Occupational Therapy / Hand Therapy
- Palliative Care
- Phlebotomy
- Podiatry
- Speech & Language Therapy - Adults
- Stroke Services
- Tissue Viability and Wound Therapy
- Vasectomy

3.9 The CSR Programme is subject to NHS England (NHS E) effective service change assurance processes which set out the four tests for service change that all significant service change proposals must comply with throughout pre-consultation, consultation and post consultation phases. The four tests are:

- Strong public and patient engagement
- Consistency with current and prospective need for patient choice
- A clear clinical evidence base
- Support for proposals from clinical commissioners

3.10 In addition, the CCG is in contact with NHS E to seek clarification on whether the NHS Integrated Assurance and Support Process (ISAP): an introduction to assuring novel and complex contracts will be applied to the CSR Programme. This process (if applicable) will provide support and assurance for procurements of complex contracts or new care models.

3.11 Key milestones are listed below.

Key Milestone	Date
2017	
Sign off Project Initiation Document	May 17
Complete due diligence stock take reviews	Dec 17
2018	
Complete stakeholder engagement and model development	Feb 18
12 week public consultation ends	Jun 18
Sign off final business case, service specifications and tender documents	Aug 18
Tender advert and selection questionnaire (PQQ)	Oct 18
2019	
Contract award	Sep 19
2020	
Go Live	Apr 20

4. Consultation

- 4.1 There must be a genuine consultation where the views of the public are taken into account in important decisions that may impact on them. A twelve week formal public consultation is factored into the overall CSR Programme plan.
- 4.2 This will build on an ongoing dialogue that we intend to have with local people and stakeholders to understand what is important for people and communities locally around a new care model for community services. The outputs from consultation will be used to inform the final service specifications before the contract is put out to tender.
- 4.3 Patients, local communities, staff and clinicians will be involved at every stage of the programme. The CCG is committed to engaging with people in a way which is:
- Open and transparent
 - Independent
 - Fair & inclusive
 - Clear, timely, accurate and targeted appropriately to the differing needs of our stakeholders
 - Compliant with legislative frameworks and national policy guidance
- 4.4 A communications and engagement plan will be formulated. This will include our plans for formal consultation on a new model.
- 4.5 Our first stage of engagement will focus on reviewing how well services are currently working. We will need to know from local people, patients and their families and from clinical staff how these services are working and what needs to change, including whether people feel they can access community services easily and how well services are joined up to meet patient needs.
- 4.6 Consultation and engagement activity will be run alongside and be informed by the work of Involving Medway. This partnership, led by Red Zebra, has been commissioned to gather public and patient views on the wider Medway Model.

5. Risk management

- 5.1 The CSR Programme has a risk register which is managed in line with the CCG's Integrated Risk Management Strategy. Risks are reviewed by the CSR Programme Steering Group every month and form part of the risk register reviewed monthly by the CCGs Commissioning Committee.

6. Financial implications

- 6.1 There are no financial implications arising from this report.

7. Legal implications

- 7.1 This report provides a brief overview of CSR programme. There are no direct legal implications to the Council at this stage. However, Regulation 23 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 requires relevant NHS bodies and health service

providers (“responsible persons”) to consult a local authority about any proposal which they have under consideration for a substantial development of or variation in the provision of health services in the local authority’s area.

7.2 It is proposed that the Committee will be asked to agree at a future meeting whether or not the proposals amount to a substantial development of or variation in the provision of health services in the local authority’s area

7.3 The CCG has a legal duty to tender services when a contract is due to end.

7.4 A formal 12 week public consultation is included within the overall approach and timeline for the CSR programme. In addition, the CSR Programme is subject to NHS E effective service change assurance processes, as detailed above.

8. Recommendations

8.1 Medway NHS CCG asks the Committee to note the CSR programme and to consider and agree the approach for providing future updates.

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Appendices

Appendix 1: Medway Model

Background Papers

None