



Meeting: Strategic Commissioning Board				
Meeting Date	02 October 2019	Action	Consider	
Item No	8	Confidential / Freedom of Information Status	No	
Title	Bury System Urgent Care Review and Re-design Brief			
Presented By	Margaret O'Dwyer, Director of Commissioning & Business Delivery/Deputy Chief Officer			
Author	Margaret O'Dwyer, Director of Commissioning & Business Delivery/Deputy Chief Officer			
Clinical Lead	Dr Jeff Schryer, CCG Chair			
Council Lead	-			

Executive Summary

A savings proposal and financial update report was submitted to the CCG Governing Body meeting on the 28th August 2019.

The report proposed a number schemes and service reviews for prioritisation and development in 2020-21 which was based on the work undertaken to date and discussions at the Clinical Cabinet and Professional Congress. It can be noted that savings targets have been attributed to these reviews in line with service redesign and delivery of value for money principles.

Attached is a copy of a scoping paper that has been developed in order to take forward the Bury System Urgent Care Review. The paper includes further details in relation to: -

- Review Objectives
- Services in Scope
- Proposed Project Teams
- Project Sub Structure
- Required outputs
- Key Local Reviews to be considered
- Governance
- Key Inter-relationships

A further discussion in relation to this scoping paper will also take place at the Bury Health and Wellbeing Board on the 2nd October 2019.

Recommendations

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It is recommended that the Strategic Commissioning Board: -

(i) Consider the Scoping Paper in relation to the Bury System Urgent Care Review.

Links to Strategic Objectives/Corporate Plan	Yes	
Does this report seek to address any of the risk Governing Body / Council Assurance Framewo below:	No	

Implications						
Are there any quality, safeguarding or patient experience implications?	Yes	\boxtimes	No		N/A	\boxtimes
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?		\boxtimes	No		N/A	
Have any departments/organisations who will be affected been consulted?			No	\boxtimes	N/A	
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	\boxtimes	No		N/A	
Are there any financial implications?	Yes	\boxtimes	No		N/A	
Are there any legal implications?	Yes	\boxtimes	No		N/A	
Are there any health and safety issues?	Yes		No		N/A	\boxtimes
How do proposals align with Health & Wellbeing Strategy?	See attached Brief.					
How do proposals align with Locality Plan?	See attached Brief.					
How do proposals align with the Commissioning Strategy?	See attached Brief.					
Are there any Public, Patient and Service User Implications?	Yes	\boxtimes	No		N/A	
How do the proposals help to reduce health inequalities?	See attached Brief.					
Is there any scrutiny interest?	Yes	\boxtimes	No		N/A	
What are the Information Governance/ Access to Information implications?	N/A					
Has an Equality, Privacy or Quality Impact Assessment been completed?	Yes		No	\boxtimes	N/A	
Is an Equality, Privacy or Quality Impact	Yes		No	\boxtimes	N/A	

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Implications						
Assessment required?						
Are there any associated risks including Conflicts of Interest?	Yes	\boxtimes	No		N/A	
Are the risks on the CCG /Council/ Strategic Commissioning Board's Risk Register?	Yes		No		N/A	\boxtimes
	Risks					
	There are several common risks with the delivery of schemes including: - • Ensuring that all decisions including					cluding
Additional details	 Ensuring that all decisions including gateway decisions are made robustly based on clear and accurate information/ evidence Ensure that changes to services are managed safely The requirement to maintain pace to ensure that outcomes are delivered a soon as safely possible Due the demand led nature of the services commissioned, together with the requirement to deliver national targets, the range of options to support delivery of financial sustainability are limited in the short term. The time over which organisational culture and public behaviour change takes to embed is not in line with the time required to become financial sustainable. 					
	 There could be qualitative and quantitative unintended consequences. Some commissioning decisions required in the short term may not be 					
	•	Red to g sys	configura enerate	stranded need to b	aims. ervices and costs the costs are the costs and the costs are th	nat the
	Stakeholder engagement					
	It is cri	itical tha	at we v	vork eff	ectively	with all

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Implications

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stakeholders to ensure that service developments and changes are delivered safely, 'right first time' and at pace. This is achieved by having all stakeholders involved and contributing to the delivery of schemes through multi-disciplinary and multi-organisation scheme delivery teams.

Due to the complex nature of services, the risk of unintended consequences and the large web of interdependencies, an agile approach to delivering change will be adopted with clear gateways where:

- progress can be assessed
- decisions to continue can be made
- necessary changes to the approach can be made
- communication about progress can be shared with stakeholders
- impact assessments can be revisited as required

A process will be agreed, and the progress will be monitored through the Health and Care Recovery Board (which reports to the Joint Executive Team) with regular updates to Strategic Commissioning Board, Clinical Cabinet and Professional Congress.

All relevant policies have and will be adhered to in this process e.g. decommissioning and engagement policies.

Conflicts of Interest

Conflicts of Interest will be taken into account in line with the statutory obligations of both the CCG and Council.

Governance and Reporting				
Meeting	Date	Outcome		
Governing Body	28/08/2019	Governing Body		
Health and Wellbeing	02/10/2019	To be discussed further		
Board				

Bury System Urgent Care Review and Re-design Brief

1. Review Objectives

- Improve performance of 4 hour waits to reach the Provider Sustainability Fund agreed trajectory of 92% at FGH by March 2020
- Reduce Non-Elective Admissions at FGH (metrics tbc)
- Deliver £2.6m savings from current spend from Urgent Care Services "in scope" by April 2020
- Redesign to simplify access points to improve patient experience

2. Services in-scope of Review:

- Accident and Emergency at PGH
- Urgent Care Treatment Centre at FGH
- Walk in Centres at Moorgate and Prestwich
- GP Out of Hours Service (BARDOC)
- GP Extended Access (Direct Enhanced Services, now commissioned via the Primary Care networks to ensure additional 30 min access per 1000 population)
- GP Extended working Hours (Extends appts 6.30 8 p.m. and at weekends)
- GP in hours availability of appointments
- Green Car service
- Same Day Emergency Care
- Integrated Virtual Clinical Hub (tbc)

3. a) Proposed Project Teams

J. Schryer Urgent Care Chair and SRO N. Parker Programme Manager (tbc)

K. Patel LCO MD

S. O'Hare

D. Latham

K. Lee

S. McCallum

CCG Finance and Analytics

CCG Urgent Care Commissioner

CCG Urgent Care Commissioner

Senior Clinical Leads, FGH

A. Abbass Senior Clinical Leads, FGH
K. Wynne Jones LCO Senior Manager
S. Taylor LCO Senior Manager

I. Trafford LCO, Urgent Care PMO Lead

V. Riding CE, BARDOC

K. GibbonsL. WilliamsFGH Senior Urgent Care ManagerFGH Senior Urgent Care Manager

with support from:

S. Barnard GM Urgent Care Lead A. Osei GM Primary Care Manager

b) To be identified:

PMO Support via SRFT/NCA

- Analytics support from GM and NCA
- c) Project sub structure to include:
 - Finance
 - BI / analytics
 - Workforce
 - Estates

4. Outputs

- High Level Project Plan to go to Governing Body on 28 September 2019.
- Final Project Plan with key milestones and timelines to Governing Body on 23 October 2019.
- Regular update reports to the Governing Body with savings to commence from April 2020.
- 5. Key Local Reviews to be considered:
 - North of England Commissioning Support Unit Capacity and Demand Review – September 2019
 - Utilisation Management Review of ED attendances at FGH September / October 2019
 - Emergency Care Intensive Support Team (ECIST) Review of FGH September 2019 which will also support the Intermediate Care Review (below)
 - Various reports developed by the CCG vis-à-vis reviews of urgent Care in Bury
 - FGH local analysis (August 19) of ED Growth

6. Governance

- This Project to be part of the Bury/NCA Transformation Programme (link: Jude Adams)
- Project Group to be established to include: J Schryer as Chair, S
 Taylor (MD, FGH), G little (Accountable Officer), Kth Wynne-Jones
 (LCO), S Barnard as Representative from GM, N Parker (Project
 Manager), Councillor A Simpson

7. Key inter-Relationships:

- Intermediate Tier Review (on-going, also with a separate savings target, Scope of Review includes Integrated Discharge Team; recommendations from this Review should support flow across the Urgent Care System)
- Review of Operating Model for Integrated Neighbourhood Teams