



North East Hampshire and Farnham Vanguard

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Vanguard Programme

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Our context



- 220,000 people in North East Hampshire and Farnham
- Strong primary care, Frimley Health is the main acute care provider
- Integral part of the Frimley STP and the Hampshire and Isle of Wight STP
- Partnership of four CCGs in Hampshire with single Chief Executive formed on 1 April – brings strength and influence

Serving our population of 220,000 people

Our Vision is that local people are supported to improve their own health and wellbeing and that when people are ill or need help, they receive the best possible joined up care


**North East Hampshire and Farnham
Clinical Commissioning Group**
(23 Member Practices)

Southern Health 
NHS Foundation Trust



Frimley Health 
NHS Foundation Trust

 **NORTH HAMPSHIRE
URGENT CARE**
Delivering essential healthcare services


Salus
MEDICAL SERVICES

 **Hampshire
County Council**


**SURREY
COUNTY COUNCIL**

Surrey and Borders Partnership 
NHS Foundation Trust

South East Coast Ambulance Service 
NHS Foundation Trust

The people of North East Hampshire and Farnham

Local third sector partners

What we are aiming to achieve

The changes we are making are designed to have the following impacts:

- 1** Local people being **happier, healthier and receiving more of the care they need at home** or in the community. Aiming to halt the growth in A&E attendances and emergency admissions
- 2** Better value for money for taxpayers, contributing £23M to closing the £73M gap between the available resources and the costs of delivering care
- 3** Improved staff satisfaction ability of health and care providers to **recruit and retain** sufficient numbers of skilled staff to meet the needs of local people



The new care model to achieve these ambitions



We are taking targeted action to prevent ill health and promote self care:

- ▶ Social Prescribing
- ▶ Recovery College Courses
- ▶ Crisis Café
- ▶ Support to carers and staff

We are strengthening local primary and community care:

- ▶ Practices working together
- ▶ Separation of on-the-day urgent primary care from planned primary care
- ▶ Integrated Care Teams
- ▶ Proactively managing the health and social care needs of the population

We are improving services for patients in a crisis and those who need specialist care:

- ▶ Expanding the capacity of community and social care response services, and extending their working hours to 8am-9pm
- ▶ Redesigning the interface between hospital care and primary care – eg hospital consultants supporting locality hubs, GPs working in hospital

Engagement with local people at the heart of our work



Working with **70 community ambassadors** from a wide range of backgrounds with individual skills and experiences, ensuring patient views are integral to service development.

Measuring Impact

Considerable effort and focus on collecting and understanding patient reported outcomes, wellbeing, health confidence and experience...

...as well as measuring impact on admissions, delayed transfers of care and costs

Choose one answer to each question

How are you today? (past 24 hours)

Personal Wellbeing Score
How much do you agree with

Pain or discomfort

Feeling low or down

Limited in what you can do in your life

Require help with everyday activities

Health Confidence Score
How much do you agree with

I am satisfied with my health

I know enough about my health

I can look after my health

I was happy yesterday

I can get the right help if I need it

I was NOT anxious

I am involved in decisions about my health

Strongly agree Agree Not sure Disagree

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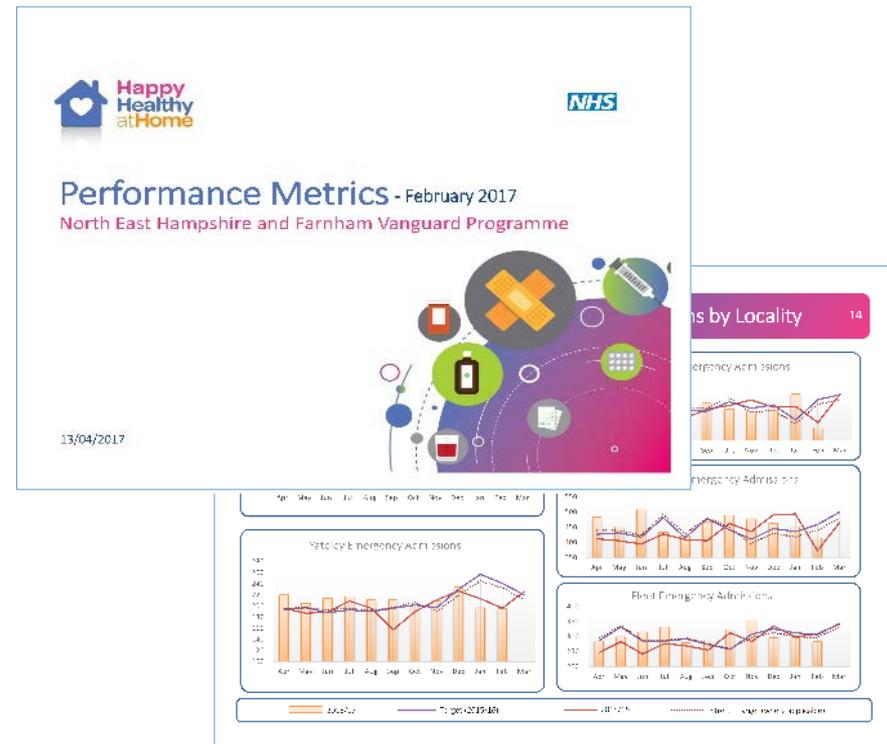
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R-outcomes



Measuring Impact

Impact on Hospital Utilisation

- A&E attendances up by only 0.2% (historical annual growth 3-4%)
- Reduced growth in emergency admissions of 2.5% compared to 4% historically – and we are learning from others who have gone further
- We see greater impact on admissions as our locality hubs mature
- GP peer review of referrals showing very good value for money
- Consultants delivering new models of planned care with GPs
- Delayed transfers of care continue to be high

Safe Haven Cafe

- Independent study showed the Safe Haven reduced acute psychiatric admissions by 33% in its first year of operation.

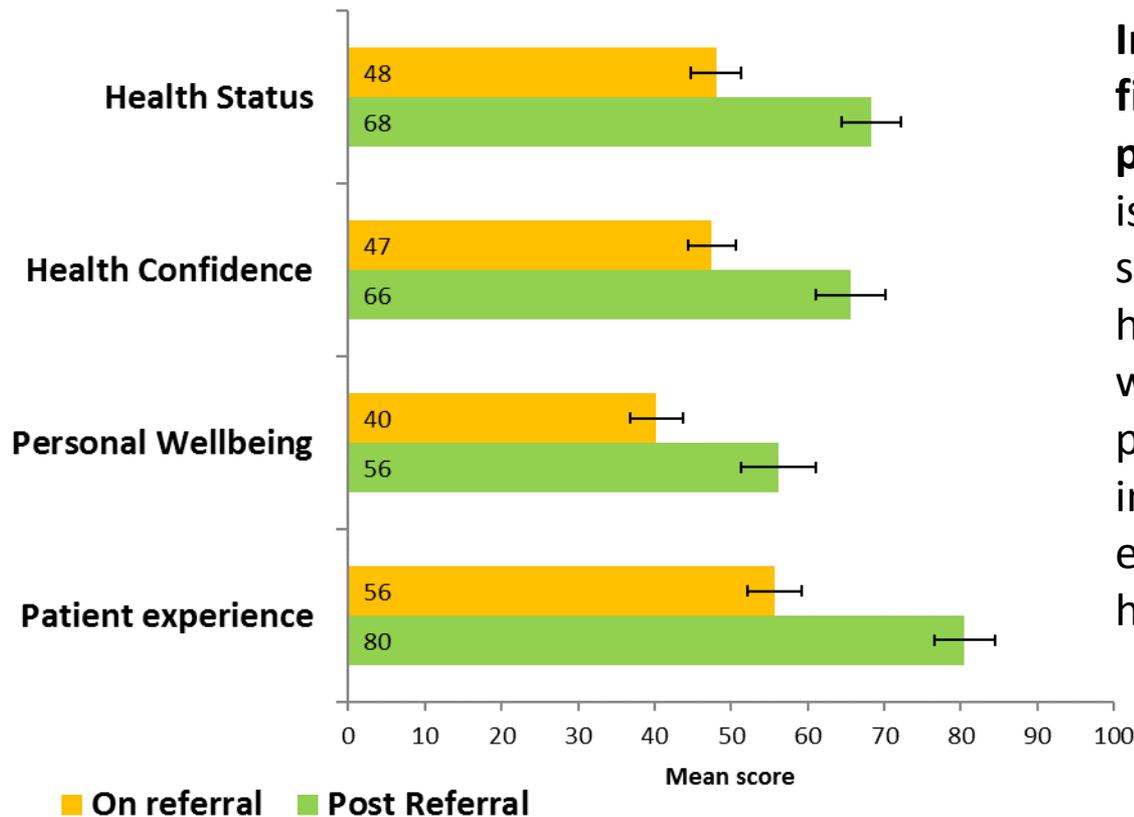
Recovery College

- 84% of students met their course goal
- 26% improvement in measured levels of recovery
- 20% improvement in measured levels psychological distress
- Trend of reduced use of GP, A&E and mental health services
- Good return on investment and service now in baseline contracts

Social Prescribing

- Evaluation shows a reduction in A&E attendance of 18% and in emergency admission of 19% for those using the service
- Significant improvements in wellbeing and health confidence
- Increased impact and lower costs, in order to be affordable

Impact of new model of integrated care



Independent evaluation of all five integrated care teams using patient reported outcome data is demonstrating statistically significant improvements in health status, health confidence, wellbeing and experience for patients being managed by integrated care teams – key enablers to avoid or reduce hospital admissions.

Increasing the scale our interventions is our key focus for 2017/18

Organisations working together as one

- Accountable Care System Board: Chief Executives and Accountable Officers from acute, community, mental health, primary care, county councils and CCG
- Taking accountability together for health and care for the population – this is a population health model
- Board meeting monthly since September 2016
- Reviews system performance, delivery of the vanguard programme, resource allocation.
- Enabled transparency in contract discussions for 2017/18
- Partnership Agreement to underpin and formalise the arrangements for 2017/18
- Provides learning to the Frimley STP Accountable Care System

Summary and reflections

- Working together we are showing we can achieve a huge amount – making a difference for patients and for staff
- Clinical leadership, a strong clinical voice, and joint clinical development with consultants and GPs key
- Breaking down artificial barriers and changing long established cultures and behaviours
- Moving from success on a small scale to full implementation across the whole system
- Spreading the learning across our CCG Partnership and our STPs
- Bringing our combined expertise, resources, skills and experience to bear to bring about improvement