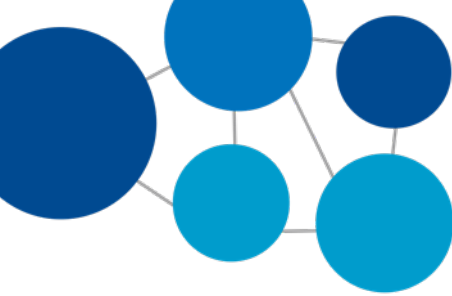


<b>Reporting to:</b>	<b>Trust Board, 30<sup>th</sup> June 2016</b>
<b>Title</b>	Future Fit Update
<b>Sponsoring Director</b>	Simon Wright Chief Executive
<b>Author(s)</b>	Debbie Vogler Future Fit Programme Director
<b>Previously considered by</b>	
<b>Executive Summary</b>	<p>The purpose of this paper is:</p> <p>To provide a brief update on recent Programme activities and to summarise some key outputs in the next month.</p> <p>The Board is asked to NOTE the Future Fit Programme Directors Report and the next steps to be taken in order to meet the key programme milestones.</p>
<b>Strategic Priorities</b>	
1. Quality and Safety	<input checked="" type="checkbox"/> Reduce harm, deliver best clinical outcomes and improve patient experience. <input type="checkbox"/> Address the existing capacity shortfall and process issues to consistently deliver national healthcare standards <input type="checkbox"/> Develop a clinical strategy that ensures the safety and short term sustainability of our clinical services pending the outcome of the Future Fit Programme <input type="checkbox"/> To undertake a review of all current services at specialty level to inform future service and business decisions <input checked="" type="checkbox"/> Develop a sustainable long term clinical services strategy for the Trust to deliver our vision of future healthcare services through our Future Fit Programme
2. People	<input type="checkbox"/> Through our People Strategy develop, support and engage with our workforce to make our organisation a great place to work
3. Innovation	<input type="checkbox"/> Support service transformation and increased productivity through technology and continuous improvement strategies
4. Community and Partnership	<input type="checkbox"/> Develop the principle of 'agency' in our community to support a prevention agenda and improve the health and well-being of the population <input type="checkbox"/> Embed a customer focussed approach and improve relationships through our stakeholder engagement strategies
5. Financial Strength: Sustainable Future	<input checked="" type="checkbox"/> Develop a transition plan that ensures financial sustainability and addresses liquidity issues pending the outcome of the Future Fit Programme
<b>Board Assurance Framework (BAF) Risks</b>	<input type="checkbox"/> If we do not deliver <b>safe care</b> then patients may suffer avoidable harm and poor clinical outcomes and experience <input type="checkbox"/> If we do not implement our <b>falls prevention</b> strategy then patients may suffer serious injury <input type="checkbox"/> If the local health and social care economy does not reduce the <b>Fit To Transfer (FTT)</b> waiting list from its current unacceptable levels then patients may suffer serious harm <input checked="" type="checkbox"/> Risk to <b>sustainability</b> of clinical services due to potential shortages of key clinical staff <input type="checkbox"/> If we do not achieve safe and efficient <b>patient flow</b> and improve our processes and capacity and demand planning then we will fail the national quality and performance standards <input type="checkbox"/> If we do not get good levels of <b>staff engagement</b> to get a culture of continuous improvement then staff morale and patient outcomes may not improve <input checked="" type="checkbox"/> If we do not have a clear <b>clinical service vision</b> then we may not deliver the best services to patients <input checked="" type="checkbox"/> If we are unable to resolve our (historic) shortfall in <b>liquidity</b> and the structural imbalance in the Trust's <b>Income &amp; Expenditure</b> position then we will not be able to fulfil our financial duties and address the modernisation of our ageing estate and equipment

<b>Care Quality Commission (CQC) Domains</b>	<input checked="" type="checkbox"/> Safe <input checked="" type="checkbox"/> Effective <input checked="" type="checkbox"/> Caring <input checked="" type="checkbox"/> Responsive <input checked="" type="checkbox"/> Well led
<input checked="" type="checkbox"/> <b>Receive</b> <input type="checkbox"/> <b>Review</b> <input checked="" type="checkbox"/> <b>Note</b> <input type="checkbox"/> <b>Approve</b>	<b>Recommendation</b> The Board is asked to NOTE the Future Fit Programme Directors Report and the next steps to be taken in order to meet the key programme milestones.



## Programme Director's Update Report

**30th June 2016**

The purpose of this report is to provide Sponsor Boards with a brief update on recent Programme progress and to summarise the activities in the next phase.

### **1 STRATEGIC OUTLINE CASE**

The work to address the caveats and concerns set out in the CCG draft letter of support to the Sustainable Services Strategic Outline Case (SOC) is progressing including the preparation for a Senate Review of the options, the development of models of community care required to support the SOC assumptions, a sensitivity analysis on those assumptions and the affordability of the whole model. Engagement of GPs at a locality level to address their concerns continues to take place. An extraordinary Shropshire CCG Board meeting is taking place on 29<sup>th</sup> June to reconsider the letter of support for the SOC.

### **2 DEVELOPING THE COMMUNITY MODEL**

Phase One of Community Fit is complete and the system now has a strong evidence base that can be used to inform future planning. The value of this foundation should not be underestimated; there is a growing evidence base that the population focus and segmentation are critical to understanding the population broken down into relevant groups.

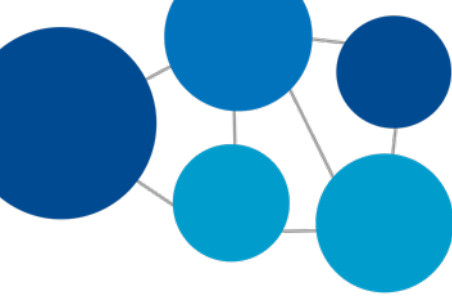
Recommendations for the next phase of the work will be received by the STP Partnership Board in June to be included within the STP submission on 30th June.

As we move into a phase of designing the community services models of care, the Clinical Design Group membership has been refreshed to include local authority colleagues, public health practitioners and the voluntary sector. It is now co-chaired by Dr Steve James from Shropshire County CCG and Dr Jo Leahy from Telford & Wrekin CCG.

As a start point the Group reviewed the original design principles and vision set out in the May 2014 Future Fit Clinical Design Report. The high level vision for the ambition around community services is there to build on and at that point the clinicians strongly emphasised three additional challenges, beyond hospital services, that should be addressed;

*"...the need to integrate health and social care and resolve the funding anomalies between them, the absolute requirement to create community capacity to manage the shift in care closer to home and the need for local communities and society as a whole to tackle the prevention and wellbeing agenda..."*

These three challenges have become the focus of the STP.



The focus for clinical design over June has been drawing together a more detailed draft case for change, and setting out the work required over the next 6 months through a draft Project Plan. These documents will be submitted to the STP Partnership Board for approval this month.

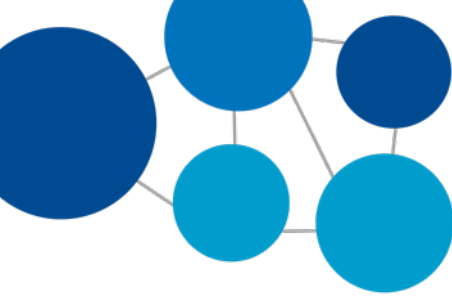
Long Term Condition (LTC) Pathway task and finish groups have been proposed for 6 pathways: Respiratory, Chronic Kidney Disease (CKD), Diabetes, Heart Failure, Frailty and MSK. Each will have a GP and acute consultant lead together with other health professionals and will embrace any existing pathway work rather than replace it. The approach to step changes in public health and prevention have been discussed and public health representatives now sit on the Clinical Design Group. It is recognised that governance arrangements going forward will need to adjust to align with the STP structure and work will need to be shaped by the ambition around Community Resilience under the strengthened Neighbourhood Groups.

Following approval of the rural urgent care report at the Future Fit Programme Board in May, Shropshire CCG's Clinical Advisory Panel (CAP) selected a locality to prototype the full approach. However, this was also accompanied by a strong recommendation that conversations begin in parallel with all localities in Shropshire CCG to begin to develop different ways of working, coproduced with existing NHS staff working in the localities. The prototype will be further refined over the next month by a small clinical working group together with patient representation and the case presented to the relevant CCG committee for approval in July. The prototype once approved will be evaluated through a set of agreed success criteria to inform any wider roll out of rural urgent care services.

### **3 CLINICAL REFERENCE GROUP**

As part of the detailed work plan, the Clinical Reference Group met on June 22nd with a focus on the case for change in community provision, rural urgent care and examining primary care models including a number of case studies from other health systems. Over 90 health and social care professionals from across Shrewsbury, Telford & Wrekin and Powys attended and there was an overwhelming endorsement for the proposed place based approach to be the main vehicle further developing the community response to our current challenges.

The group fully accepted the community case for change and welcomed input from two Vanguard sites (Erewash and West Wakefield), who presented their learning and progress. The proposal from the Clinical Design group that a Locality co-production approach should be adopted was welcomed, as this would free up local health, voluntary sector and care leaders to work with their populations, capitalising on existing local assets. Following the commitment from senior health and care leaders to provide project and management resource to support the proposed locality based projects, we will now actively working up the detailed design with a number of localities. These will include practices covering rural areas and larger urban groupings. Localities have registered interest in a range of potential delivery models which include close working with the acute trust; independent practice groupings and a potential social enterprise type model. Leaders are committed to support



rapid development of these models so that a range of approaches can be tested to support wider roll-out, depending on locality support.

As previously stated above, the work on setting up pathway groups across the health and care economy to review and redesign a number of high volume care pathways from prevention through to end of life care was also endorsed as essential parallel work. The Clinical Design Group is proposing to oversee both the pathway work and locality based service redesign to ensure consistency with the overall Neighbourhoods approach.

#### **4 CLINICAL SENATE REVIEW**

Preparing for the Senate review in September/October has begun with a clear set of actions and leads set out in order to collect the necessary evidence against each element of the Senate checklist. This information will also be required for the Pre consultation Business Case submission to NHSE in November. Clinical design will monitor the progress of this work. The programme team have been invited to present to the Senate Council meeting on 20<sup>th</sup> July to provide an update on the programmes progress and initiate the review process.

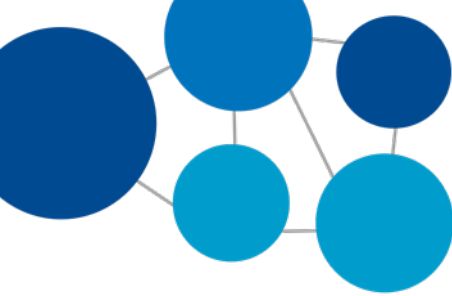
The CCGs have commissioned an independent external review of the C2 Option; this is the variant option where the single EC would be in Shrewsbury but Women and Children's would stay in its new Centre in Telford. This will be completed by September 2016 prior to the non-financial option appraisal and the Senate Review.

#### **5 ACTIVITY ASSUMPTIONS AND AFFORDABILITY**

The FF phase 2 models aimed to quantify the impacts of an ambitious clinical vision to redesign healthcare services in Shropshire and Telford. Questions from stakeholders have indicated concerns about the high level of ambition in this model and the risks of underestimating acute capacity if these ambitions are not realised. SaTH's work to date continues to be developed on the basis of the implementation of Phase 1 and Phase 2 activity assumptions. Sensitivity analysis of delays in delivery of these changes is being undertaken by the Trust.

#### **6 COMMUNICATIONS AND ENGAGEMENT**

A new Executive sponsor for the Communications and Engagement element of Future fit has been appointed through Bharti Patel-Smith and has met with team to set out expectations. An agreement with all providers has been established to move towards a single integrated communications and engagement plan for health in the county and at the heart of this will be a partnership agreement, which is being developed in line with STP principles. A workshop has taken place attended by partners and patient representatives to review the current approach and set out a detailed plan of action going forward. As a result, the risk register is being updated, mitigation and actions are being embedded into the integrated plan, and mechanisms to help communicate key messages in an integrated manner are also being developed.



A number of case studies have been identified and released to the media which will help illustrate how the NHS Future Fit model could work in the future (i.e. Point of care testing initiative).

As part of preparation for the option appraisal, the telephone survey was completed during April and May. A total of 2,460 residents were surveyed and as far as possible the sample was split equally across the five old districts of Shropshire, the three districts of Telford & Wrekin and the wards along the eastern boundary of Powys. The survey was representative by age, gender, and ethnicity. The survey asked questions on recent healthcare experiences and views on the latest proposals.

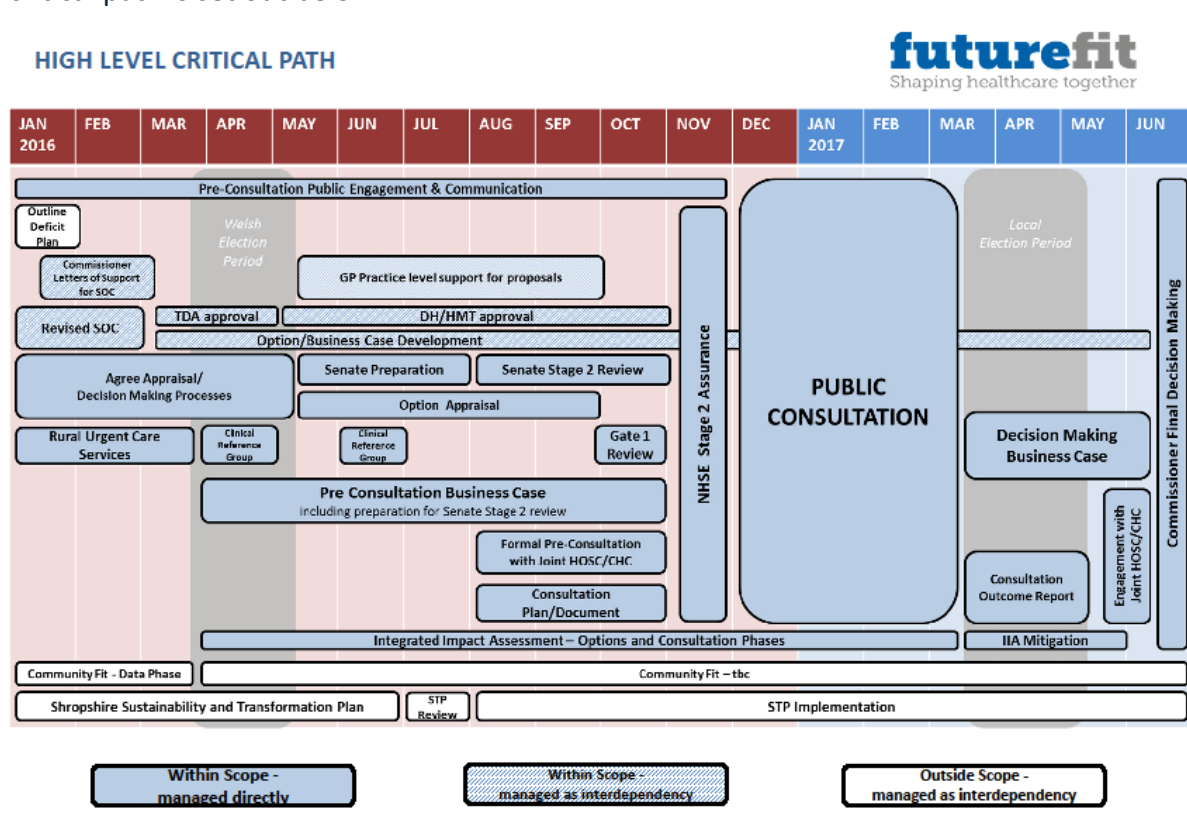
Work is beginning to support the Integrated Impact Assessment on the revised delivery solutions within the SOC, sharing learning and coordinating information on working with groups with Protected Characteristics.

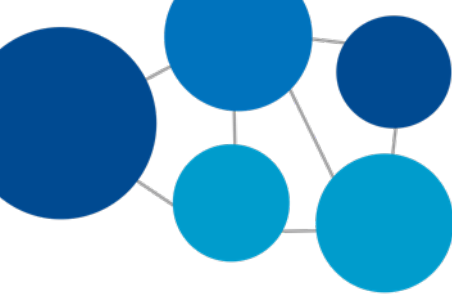
## 7 PROGRAMME TIMELINE

The Programme is continuing to work towards three critical milestones:

- Summer 2016 – appraisal of options
- Winter 2016/17 – Public Consultation
- Summer 2017 – Final Commissioner Decision.

It is proposed to carry out the appraisal of the options in late September 2016. The revised critical path is set out below.





Whilst the Programme is currently on track to deliver these three critical milestones, they are subject to a wide range of statutory approvals which are beyond the programme's control and which carry an unquantifiable risk of delay. The focus of the Programme Office is on ensuring the required documentation and evidence is prepared to facilitate those approvals.

## **8 PROGRAMME GOVERNANCE**

A new governance structure has been developed to oversee the implementation of the STP. Future Fit is an integral part of this wider programme structure which would seek to improve coordination with Community Fit and other projects. The impact on Future Fit of new arrangements will be assessed as they emerge, and proposals taken to the Programme Board.

## **9 RECOMMENDATIONS**

Sponsor Boards are asked to receive this report.

**Debbie Vogler**

**Programme Director**