

Summary Commissioning Intentions 2017/18 & 18/19



right care
right place
right time
right outcome

Purpose

- The purpose of this paper is to provide a summary of Merton Clinical Commissioning Group's 2017/18 and 18/19 Commissioning Intentions.
- Our commissioning intentions are aligned to the ambitions of the South West London footprint contained within the STP

Principles

- All Merton patients should have consistent access to high quality care regardless of where in the borough they live
- Services should be safe, evidence-based and focused on improving outcomes for patients
- Services should target health inequalities
- Services should be patient centred, seamless and accessible
- Where services can be effectively provided out of hospital and closer to patients' homes, they should be.



3/20/2017

Planned care

The CCG will continue to focus on the STP priority areas ensuring appropriate referral into hospital, use of community based services to support out patients and improved pathways of care

2017/18

- Utilisation of Nelson Out Patients and Diagnostic services
- MSK – T&O referrals through ICATS
- Commence STP top 7 priority areas work
- CSA Forensic Assessments
- Prior Approvals process for Effective Commissioned Services (ECIs) in place
- Complete review for All Procedures of Limited Clinical Effectiveness (PLCV)
- Continued focus on practice variation

2018/19

- Continue STP priorities



3/20/2017

Right Care Best Setting – Unplanned and Urgent care

The CCG will focus on developing integrated care provision to facilitate development of alliance provision across providers. This programme has potential to be accelerated

2017/18

- Optimising BCF to deliver Right Care Best Setting Plans
- Optimising BCF to deliver improved integrated provider networks
- Commission a borough wide case finding service using e-Fraily searches and principles for case management
- Commission 'Primary Care Centres' to improve primary care access and reduce A&E attendances. These to align with out-of-hours and 111 services.
- Crisis teams deliver to 2 hr and 24 hr response standards to prevent attendance at A&E
- BCF investment used to commission a specified number of interim packages of care to prevent admission
- BCF investment used to commission a joint health and social care reablement response.
- Intermediate care bed length of stay optimised through clear discharge pathways into the community, specifically where patients require on-going packages of care.
- Implement A&E frequent attenders pathway between Acute and locality teams for case management
- Initiation of CMC specifically contracted from all providers.

2018/19

- Continue STP priority plan delivery
- Leverage BCF, Community and Primary Care contracts to formalise integrated provision through alliance contracts.
- Commission a borough wide person centred extensive service for people with complex health and social care needs. Service to include case finding, case management, crisis response and interim packages of care to ensure people are holistically supported in the last 2 years of life.
- Commission 'Primary Care Centres' that improve access and offer same day appointments, IV and dressing clinics for mobile population and high use primary care demand. This might also include incorporating wider roles, such as; physiotherapists; health care assistants; physician associates; pharmacists; mental health practitioners; specialist nurses (such as emergency, paediatric or respiratory); paramedics; and radiographers.



3/20/2017

Primary Care –

The CCGs priorities over the next 5 years are set out in the GP 5 year forward view and include improving Access, Improving Quality, Integration

2017/18

- Education and Workforce issues
- PMS review
- Full implementation of Referral Management Centre (April 2017)
- Registered GP list at the Rowans : 5 yr APMS Contract
- Implement Revised Primary Care Locally Enhanced Services (LES)
- Implement revised PMS + KPIs
- Support integration of GP Federation with Community Services.
- Organisational development and support to individual Practices to improve access, (including increased use of technology).
- Pilot of Social Prescribing to a network of GP Practices in East Merton.
- Implement outcomes of Interpreting Service review
- Work on One Merton Model

2018/19

- Multispecialty Community Provider Contract in Place from 1 April 2018
- Full implementation of social prescribing
- Implementation of integrated models of care as part of alignment of providers; and which works supports the development of Merton's MCP. These being aligned to QiPP and other provider incentive schemes



3/20/2017

Medicines Optimisation

Priorities include Improving the value derived from prescribed medicines, reduction in medicines waste, promotion of self care and making better use of pharmacists' skills to improve the quality of care provided

2017/18

- Continue to implement agreed STP and local medicines optimisation initiatives which focus on reducing medicines waste, increasing the value derived from our spend on medicines and transforming medicines systems/ processes for inclusion in new models of care and care pathways
- Explore, design and implement new ways of working that optimise the use of medicines as part of planned and unplanned care pathways.
- Scope opportunities from RightCare packs, benchmarking and agreed planned and unplanned care projects, in particular:
 - Anticoagulation (appropriate use of DOACs)
 - Diabetes (optimising drug therapy)
 - Care homes (medicines review and waste)
 - Rheumatology (appropriate optimisation before anti-TNF use)
 - End of life care
- Implement findings from Scriptswitch review to improve medicines optimisation

2018/19

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 - Rheumatology (appropriate optimisation before anti-TNF use)
 - End of life care
- Monitor and review medicines optimisation IT systems



3/20/2017

Mental Health - aims to reduce the demand for secondary mental health care, Develop primary care services for people with mental illness, Collaborate with the Local Authority to improve the support for local residents recovering from mental illness.

2017/18

Focus on

CAMHS

- 28% of children with diagnosable mental illness receive NHS care

PERINATAL

- Increase number of women accessing evidenced based perinatal care

IAPT

- 16.8% of 'morbid' local population to access evidence based talking therapies
- 50% 1st onset psychosis (14-65) to receive NICE treatment within 2 weeks

ADULTS

- Review CRHTT to meet CORE Fidelity Criteria
- Eliminate OATs by Oct 2017
- Improve performance of CDAS and IAPT
- Training for primary care personnel to support patients with MI
- Clozapine Clinic for Merton patients, based in borough
- Monitor and implement urgent care pilot services

2018/19

CAMHS

- 30% of children with diagnosable mental illness receive NHS care

PERINATAL

- Increase number of women accessing evidence based perinatal care

IAPT

- 19% of morbid local population to access evidence based talking therapies
- 50% 1st onset psychosis (14-65) to receive NICE treatment within 2 weeks

ADULTS

- Implement action plan for CRHTT
- Physical health checks in primary care for 30% of patients with SMI
- Fund urgent care pathway service developments from CCG baseline, where efficacy is proven.



3/20/2017

Enablers:

IM&T:

We aim to have in place robust and fit-for-purpose ICT systems and services that support service transformation and enable integration across commissioners and care providers."

Estates

Merton's strategic estates development plan will help to inform where future premises investment needs to be prioritised. It will also play an important role in enabling new models of care.

Workforce

As part of the STP this work reviews workforce to deliver the challenges set out working closely with CEPN

Commissioning

Working with Wandsworth CCG as part of the Local Delivery Unit to deliver services across the two boroughs where possible



3/20/2017