

A summary of NHS Peterborough's **QIPP**
(Quality, Innovation, Productivity and
Prevention) and reform plan



Peterborough people living longer, healthier, independent and self-determined lives

Contents

What is QIPP?	3
Changing our NHS together	3
How does this affect the NHS in Peterborough?	4
What is the thinking behind these plans?	9
What are we spending?	9
How do these plans affect staffing numbers?	10
Ensuring quality	11
Reform and vision	12
Will I be involved in decisions about the local NHS?	12
How will I find out what is happening?	12
How to get in touch	14

Our commitment to you

Over the next four years those giving care to people in Peterborough have made a joint commitment to saving lives, helping people stay as healthy as possible and reducing health inequalities. Our plans will make a difference to people's lives – by improving care, preventing more debilitating illnesses and making the best use of increasingly scarce public resources.

NHS Peterborough faces a major challenge to continue to improve the quality of services that are provided. At the same time, the demand for health services continues to grow as the population grows and ages and as new treatments and technologies are developed.

If we do nothing differently and the demand for services continues to grow at the same rate as recent years then the health and social care system across Peterborough will have a financial gap. If we want to improve our financial situation, meet the health needs of the population and improve the quality of services at the same time we can only do this by working together to improve the efficiency of services.

To meet this challenge we have developed a system-wide Quality, Innovation, Productivity and Prevention (QIPP) plan with our key partners and stakeholders which puts your local GPs at the heart of these changes. We are all committed to working together on this. Everyone has a part to play in meeting the challenge which will mean we sustain the high quality care we provide now and continue to improve.

One of the ways that we can maintain quality, provide services that are value for money and are more accessible is to deliver services in the community closer to home.

Throughout the health and social care system in Peterborough we have identified new ways of working that will:

- Deliver a better patient experience
- Improve people's health
- Reduce unfairness in health.

At the same time, these new models of care will save £128 million, through more efficient ways of working, by 2015.

What is QIPP?

In order to deliver savings without sacrificing quality, the NHS is using the term QIPP nationwide. QIPP stands for Quality; Innovation; Productivity; Prevention.

QIPP is the way in which the quality of patients' experiences can be improved through redesigning services to ensure they work to a high standard efficiently and ensure value for money. QIPP focuses on improving health outcomes, delivering care in the most appropriate setting, improving value for money and keeping people healthy.

We are proud of the NHS. We can celebrate the achievements of the last 60 years since the NHS was created. People are living longer and are more healthy. When the NHS was created average life expectancy was age 65 and it is now age 80.



This is not about cuts – in fact the NHS budget has risen slightly this year but because of increasing pressures we have to do more with the money we have.

Changing our NHS together

We have come a long way in the NHS over the last few years. The focus across England is for doctors and nurses to lead and improve the NHS which has led to some impressive results.

Increased funding in the NHS in recent years has helped us improve health and healthcare services for our population.

However, the tough financial climate, coupled with the demands of a growing and ageing population and advances in technology means that we are facing our biggest challenge yet. Whilst the NHS is protected by the Government, funding is not able to keep up.

To continue to deliver on the promises that people across our whole region told us are important, the NHS organisations in the east of England need to save £1.7 billion by 2014/15 to re-invest in services. It is the East of England's contribution to the nationally required NHS savings of £20 billion.

This document highlights how your local NHS will deliver quality services with improved patient safety,

patient experience and clinical outcomes at its heart. It has been developed with doctors, nurses, managers and other health professionals across all NHS organisations. By transforming services, and delivering them in new ways, and by preventing ill-health, we can make the necessary savings and get better quality. This is a significant challenge for all of us, but we have a strong track record of achieving change.

The changes to the way we deliver treatment and care, moving services closer to peoples' homes, through new techniques and better procurement means that we will not need the same staff in the same roles or settings in the same numbers as we have in the past.

In addition, the Government has a new vision for the NHS which is currently being considered by Parliament. This promises to truly empower local people with more choice, better information and more control over their care – so that ‘no decision about me, without me’ becomes the norm. It puts doctors and nurses in control of the commissioning decisions on behalf of patients and local populations, and enables the health service to innovate to meet the quality and productivity challenge. NHS Peterborough has been working closely with local GPs over the last year in preparation for the new way of buying services through clinically led commissioning.

Our journey over the next four years will free up the resources we need, to deliver the new and better outcomes local people deserve. And then we will ensure that these changes happen by ensuring that decisions about care and finance are taken by local GPs and doctors who know their patients best.

Over the next ten years, the number of people aged over 65 in Peterborough is set to increase by 24 per cent and currently we spend 70 per cent of the money we have for health on people in this age group, this is just one of the significant financial challenges we face.

Peterborough as a city has seen a large and sustained amount of demographic growth in the last 30 years and this population is planned to continue into the next two decades with six substantial new township developments. Latest population projections show an estimated residential population in mid 2011 of 174,900 and increasing to 183,900 by mid 2016 and 192,400 by mid 2021

In addition, changing lifestyles are having real impacts on the illnesses that the NHS has to deal with. Obesity, lack of exercise, smoking, alcohol consumption and drug abuse all impact on the way we spend NHS resources. We need to be able to invest in prevention rather than cure.

To meet these demands we need to look creatively at how we tackle services which help prevent illness and offer treatment. We are working with local GPs, Peterborough City Council, Peterborough and Stamford Hospitals NHS Foundation Trust, Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) and Cambridgeshire Community Services NHS Trust and have identified a number of ways to provide the same or better care more efficiently.

How does this affect the NHS in Peterborough?

NHS Peterborough has been working with local health and care partners to co-ordinate a response to the challenges of delivering increased quality across health and social care in response to rising costs and demand.

We have seven key areas that we are working on together:

- Children and maternity
- Acute care
- Planned care
- Mental health and learning disabilities
- Health improvement
- Primary care
- Community and older people

Living well until you die

End of life care is important – it affects all of us and improving care for patients within the last year of life, supporting them to live as well as possible, is the focus for developments in a range of services across Peterborough.

Clinicians will identify patients earlier, assess their needs, symptoms and preferences and plan care on that basis, enabling people to live and die where they choose. As the majority of people would choose to be cared for close to home, work is beginning in community services, with an

emphasis on reducing unnecessary admissions to hospital. This will result in better outcomes for patients and their families and provide the most cost effective use of NHS resources.

Mr Smith aged 78 with COPD (Chronic obstructive pulmonary disease)

Before

Services responding to occasional requests and deterioration in symptoms prompts action.

End of life never discussed, no one asked what was important to him or what to expect. Ad hoc visits and advice only given if asked for.

Wife struggling to cope unsupported – when Mr Smith became unwell everyone was upset and panicked, called 999 which led to A&E and an admission to hospital, he died on the ward, his wife didn't realise he was this poorly and was not there.

Mrs Brown aged 81 with Heart Failure

After

Early identification by GP practice added to care register and multidisciplinary team review patient on regular basis.

Mrs Brown felt in control, end of life discussion offered and her wishes were recorded and shared .

All the practice team aware that she needs priority care. Possible future needs anticipated including out of hours care. Services available 24/7.

Family and carers supported with fewer crises. Hospital admission was avoided and Mrs Brown died at home as she wanted, with her family around her.

Integrated COPD service launched

There is now an integrated acute and community chronic obstructive pulmonary disease (COPD) service for Peterborough patients.

The service replaces the previous separate Acute Respiratory Assessment Service (ARAS) and COPD aspects of the community respiratory nurse service.

The team provide rapid access to services, treatment and monitoring. Peterborough and Stamford Hospitals NHS Trusts' Pam Patton, respiratory outreach nurse, is based at Peterborough City Hospital and assesses respiratory patients within the hospital and provides additional

support to ensure these patients receive the best possible care and expedite their discharge from hospital when safe to do so.

Cambridgeshire Community Services NHS Trusts' community team provide clinics at GP surgeries and the City Care Centre with multi-disciplinary teams including a hospital consultant respiratory physician, as well as community nurses undertaking home visits, when appropriate.

Innovative re-ablement service introduced in Peterborough

Cambridgeshire Community Services NHS Trust (CCS NHS Trust), which manages adult community services in Peterborough, together with NHS Peterborough, has introduced a new re-ablement service.

The service aims to help local people with physical or mental ill health accommodate their illness or condition by learning or re-learning the skills necessary for daily living. The reablement service commenced on 4th July 2011 and sits alongside the existing Intermediate Care Services to ensure that people are able to access opportunities, experience and expertise across the range of services to maximise their potential.

In Cambridgeshire, where the service has also been introduced, the evidence shows that significant numbers of people every year can be helped to improve their quality of life, maintain their independence and avoid unnecessary hospital admissions and we have every confidence that similar success would be achieved in Peterborough.

Re-ablement aims to:

- Help maintain or regain independence
- Improve health and well-being
- Have a positive impact on quality of life.

The re-ablement programme will normally last up to six weeks and will be free of charge as long as people are participating in the programme and making progress.

Who's in the re-ablement team?

- A dedicated occupational therapist
- Eight social care workers
- One service manager
- Physiotherapists
- Support workers/carers
- Mental health support workers.



Mrs W came to the re-ablement service on 30th June 2011, she had been admitted to hospital with severe diarrhoea and vomiting, and then contracted pneumonia so had spent approximately three weeks in hospital. When she joined our service she was extremely upset, fatigued and was unable to climb her stairs, unable to carry out her own personal care or food preparation. At first she was very anxious about doing any tasks for herself and took a lot of encouragement to carry out any personal care or food preparation. Within three weeks of being with the service she was making it halfway up the stairs and back again but only when staff were present, as she did not feel safe to practise this goal when on her own. This was a big step for Mrs W. She was also starting to do certain tasks of food preparation without any prompting from our re-ablement staff.

At the 4/5 week visit Mrs W was a different person, she was now going up and down her stairs independently, had returned to sleeping in her bedroom and was carrying out all her own personal care. Mrs W had gained over half a stone in weight since her discharge from hospital and was very happy with the progress she had made. Mrs W was discharged from the service on 19th August requiring no further care.

Musculoskeletal service in the heart of the community – 12 month pilot (April 2011-March 2012)

Cambridgeshire Community Services NHS Trust staff based in Peterborough, primary care colleagues and NHS Peterborough are undertaking a joint initiative to redesign the musculoskeletal pathway for people living in Peterborough. Musculoskeletal is the medical term for a wide range of conditions that cause pains and other problems in the arms, legs, back, neck, hips and feet.

Local residents who go to their GP with a musculoskeletal problem will now be managed in the following way:

- For those conditions that can be managed by their GP, additional support and information would be provided within Primary Care
- People whose clinical needs cannot be met within general practice, can now be referred through a single point of access which then directs the patient to the most appropriate clinician or service including specialist physiotherapists, podiatrists, doctors and an orthopaedic consultant.
- Improve access and waiting times for routine physiotherapy and podiatry
- Provide access to specialist clinicians in the community who can arrange appropriate investigations, such as x-rays
- For most referrals, treatment can be managed within a community setting. However the team of specialist clinicians have the experience to identify serious problems which might require hospital treatment and refer them to hospital directly
- Following a consultation, your condition will be explained to you and together with the clinician a plan of treatment will be agreed.

The pilot aims to:

- Reduce the need for unnecessary trips to hospital to see a consultant

Shared lives scheme

Cambridgeshire Community Services NHS Trust's Peterborough-based shared lives scheme is where carers offer their home as a place for vulnerable adults to live or be cared for.

This could be for a short break, day care or a more permanent living arrangement. The adult needing the service may have learning disabilities, be an older person who needs help, or someone with a physical sensory disability. The scheme is very

similar to fostering, but for adults instead of children. The scheme is known to be better for users and is a cost effective alternative to institutional services.

Nicky

Nicky has been a carer for many years and provides long-term care for people with learning disabilities and has two vulnerable adults living with her. Recently she assisted one of the adults to realise lifelong ambition – to go abroad on holiday. Nicky helped her book the holiday, organise her spending money and clothes and liaised with the holiday company about the support she would need once she arrived. The holiday was a great success, she had a fantastic time and has many photographs to prove it!

Nicky said: "I enjoy providing support to people and helping them to eventually move on to independent living. It can be stressful and demanding at times, but the benefits far outweigh the negatives. I feel rewarded offering this service and I enjoy the company of the adults who come to live with me."

Mental health

Mental health services are provided by Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) and these have undergone significant transformation and modernisation over recent years. In particular, new services that have been developed in the past ten years include:-

- Primary care mental health teams (including “Increased Access to Psychological Therapies (IAPT”) for people with mild to moderate mental health problems;
- Crisis and intermediate care teams providing intensive support to people at home rather than in hospital;
- Other more specialist services such as rehabilitation and recovery teams, eating disorders etc.

This has meant that we are able to support far more people at home and in the community. However one consequence of this success is that currently those people requiring an in-patient admission are likely to be more acutely ill and require greater skilled care from a wider range of clinical practitioners and in a more secure environment than was the case previously.

Through extensive consultation with GPs, service users and other stakeholders, we are planning :

1. A shift in emphasis, in line with national policy and best practice, towards prevention, early intervention, self-help and patient driven care.
2. Reconfiguration of community mental health services by development of an Advice and Brief Intervention Centre with a single point of access for all services,
3. Implementation of a number of lifespan pathways: eating disorders, early intervention in psychosis and Aspergers / ADHD. With plans to develop similar pathways for personality and affective disorders.
4. A more assertive and outward-focused model of rehabilitation, with service users moving out of long stay rehabilitation units into more appropriate accommodation
5. Streamlining in-patient care for adults, including short-term admissions
6. Closure of some older people’s beds due to overcapacity following successful previous implementation of community models of care.

Pharmacy initiatives delivering results

Peterborough and Stamford Hospitals NHS Foundation Trusts’ (PSHFT) City Hospital pharmacy team’s Quality, Innovation, Productivity and Prevention (QIPP) schemes are starting to produce results. Their schemes cover purchasing and usage of drugs, wastage, and how the department can be more efficient.

Claire McIntyre, chief pharmacist said: “Our trust-wide drugs spend is over £14m per year and we currently have seven QIPP schemes looking for savings and reviewing the services we provide. The team has been working with colleagues on a range of initiatives looking at the clinical appropriateness of the drugs we use, how we can use our medicines more effectively and where we can introduce new services. By working with ward staff they have already reduced the average cost of prescribing per patient by 14 per cent since March.”



What is the thinking behind these plans?

Our shared vision for Peterborough is that by 2014/15:

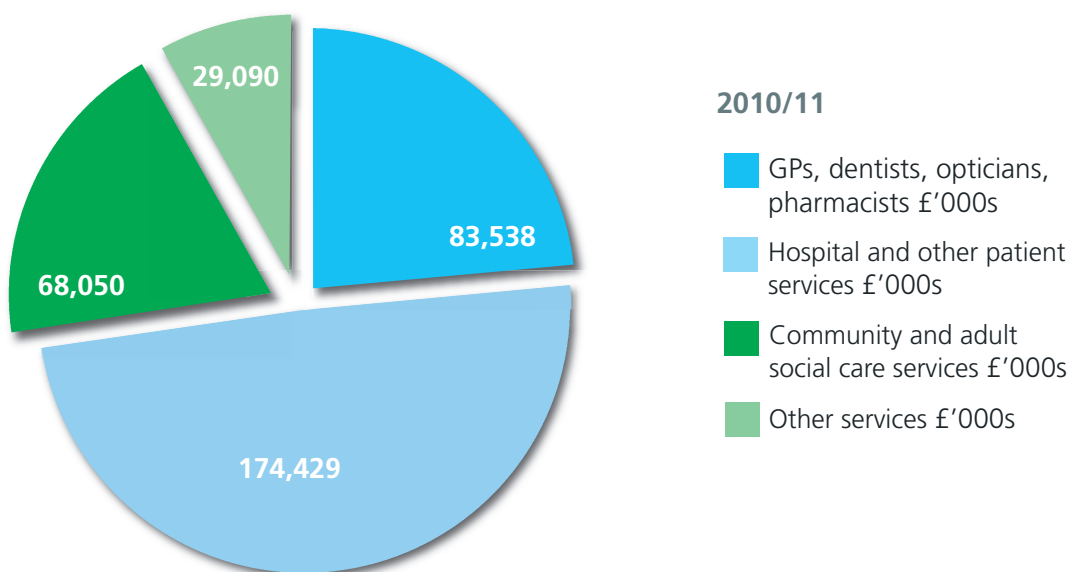
- Clinically-led commissioning will be well established and matured
- The new hospital will continue to deliver high quality and safe services and achieve its business strategy
- Services, where clinically appropriate, will be provided closer to home to the same high quality
- Patient education and a more pro-active approach by providers of health services will have significantly improved the management of long term conditions
- We are working with local people to ensure that they have the most appropriate treatment at the right time and only have surgery when that is the best solution for their illness

- Schemes which help prevent illnesses will have improved the overall health of our population
- We will embed innovation and system wide planning in how we do business; and
- We will work closer with our hospital and community services to provide more efficient and sustainable services.

The health and social care system, which includes hospitals, GPs, community services, local authorities and others, will need to work even more closely and creatively. We will redesign some services, develop new ones and stop investing in others that are not clinically effective, do not provide quality or value for money.

What are we spending?

NHS Peterborough has had a small increase in budget for 2010/11 and is expecting a modest growth in resources in 2011/12 and 2014/15. However, the impact of the economic recession on public sector finances will be significant over the next few years and the system will need to respond flexibly, and in partnership, to ensure that services are maintained and improved for the benefit of patients.



In Peterborough we have on average £2,305 to spend on healthcare for each person each year.

We have identified a challenge of £100.34 million. We have also identified a number of opportunities which amount to £128.56 million. This means we have some flexibility, or a built-in safety net of £28.22 million.

What impact will these plans have on NHS staff?

For the Peterborough health system, our workforce plans from March 2011 to March 2015 show a six percent reduction in the pay bill in our acute hospital (Peterborough and Stamford Hospitals NHS Foundation Trust). The pay bill for staff working for a community provider is expected to reduce by about 12 per cent – this reflects staff transferring to other local providers such as Cambridge and Peterborough NHS Foundation Trust, and local government as well as, subject to the successful outcome of ongoing contract negotiations, Cambridgeshire Community Services NHS Trust.

The pay bill for Peterborough Community Services provided by Cambridgeshire Community Services NHS Trust, subject to successful contract negotiations, is expected to increase in 2011/12 by approximately 23 per cent as we intend more care to be delivered in the community and less in acute settings.

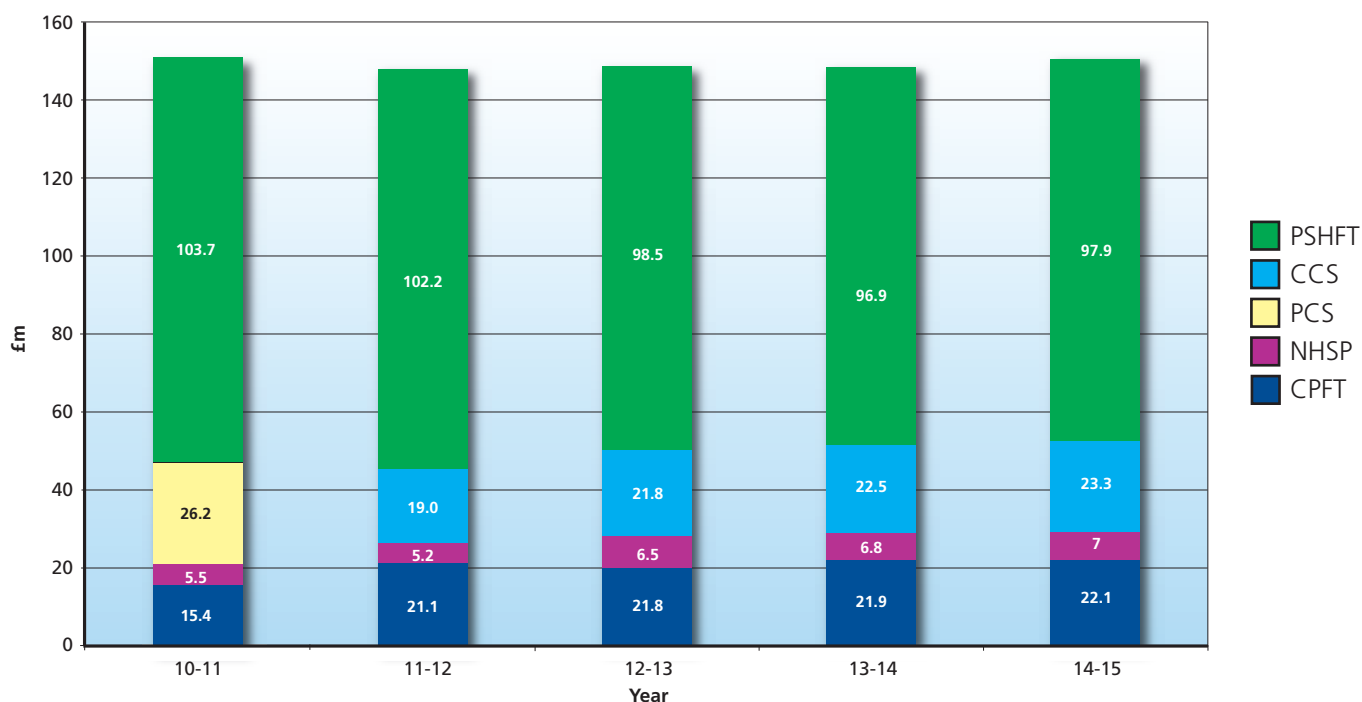
Similarly, the pay bill for mental health services, which are provided by Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) is expected to increase by 43 per cent over the same period and this reflects the transfer of staff from local community providers.

Local NHS employers are ensuring that the skill mix of their workforce is appropriate to meet local service redesign developments. Staff may therefore be supported to develop new skills to reflect care delivered in new ways and also in different settings.

Local NHS employers will manage changes in partnership with local healthcare commissioners.



Peterborough health system pay bill analysis



Ensuring quality

Quality is at the heart of everything we do in healthcare throughout Peterborough. We want to ensure that the services we provide for you have systems in place to ensure that they are continually improving, provide ways of listening to what you say about services and building your comments into any changes.

In Peterborough, improving your experience of health services is a top priority and through these

plans we expect to see improvements over the next four years using your experiences to help drive change. We expect to see you, local people, at the heart of change.

There are key areas for improvement identified by all the healthcare providers in Peterborough and these are set out below:

Peterborough and Stamford Hospitals NHS Foundation Trust plans are about improving quality while reducing cost. It will deliver this by making sure it does the right thing for patients at the right time, improving productivity and changing service delivery where this will improve patient care.

- Outpatient management – reducing outpatient cancellations and making clinics more efficient
- Bed utilisation – improving systems to maximise bed usage and ensure patients get the right care in the right place
- Theatre efficiency – making sure theatres are used effectively
- Pharmacy expenditure – improved working alongside wards.

For Cambridgeshire Community Services NHS Trust (which currently provides adult health and social care services), the focus is on:

- Adult services: supporting people to manage their long term condition; ensuring timely access to unscheduled care and crisis interventions in the community; introducing re-ablement services; and improving end of life care.
- Older people’s homes: implementing a modernisation programme to offer every older person in Peterborough who lives in a care home a better standard of living with modern facilities.
- Learning Disabilities: redesigning services to ensure the needs of this group of service users are met.
- A continued emphasis on personalisation, linked to self directed support and personal health plans.

For Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) which provides mental health services to all age groups and all community services for children:

- Use technology to improve access to care through an advice and brief intervention centre
- Introduce systems that will manage referrals and improve the patient journey through our care
- Redesign community services for people of all ages
- Introduce new health and wellbeing services, with a focus on prevention through the primary care mental health team
- Reduce the number of rehabilitation beds to a number closer to the average across the region, and undertake a number of initiatives to reduce length of stay and improve the efficiency of inpatient wards
- Work with partners to develop better services for life-long conditions such as autism.

Underlying all of these improvements is our belief that patients want to access as wide a range of services as close to home as possible. We are also working to reduce unfairness in the services you receive.

Reform and vision

In Peterborough GPs are also taking on a new leadership role, putting patients at the very heart of developments. GPs in Peterborough and surrounding areas are now actively involved in helping to develop healthcare services for the future.

We have four local clusters:

- Central city healthcare group
- North, central and park commissioning
- Central and north practice based commissioning
- Borderline commissioning.

These four locality clusters are the foundation for the city's new GP sub-committee which is taking the lead on three key areas of buying healthcare services:

- Acute commissioning
- Referral management
- Primary care prescribing.

As part of this work we are looking at how we support GP commissioning as well as reducing our running costs by £4 million by 2013.

We currently have two Foundation Trusts within Peterborough, Cambridgeshire and Peterborough NHS Foundation Trust which provides mental health services and community children's services and Peterborough and Stamford Hospitals NHS Foundation Trust providing acute care at Peterborough City Hospital and Stamford Hospital.

Will I be involved in decisions about the local NHS

NHS Peterborough has a duty to engage and is genuinely committed to involving the local population and ensuring that the patient voice is heard. We will ensure that local people are involved in decision making and are working with

Clinical Commissioning Groups to ensure that this will continue after 2013 when the consortia take over responsibility for budgets and decision making from the NHS Peterborough.

How will I find out what is happening?

We will update our website (www.peterborough.nhs.uk) regularly and inform relevant patient groups and stakeholders when we

look at a particular service for transformation. No decision about me, without me.

NHS Peterborough's QIPP and reform plan is a partnership between:

- NHS Peterborough
- Peterborough City Council
- Cambridgeshire Community Services NHS Trust
- Cambridgeshire and Peterborough NHS Foundation Trust (CPFT)
- Peterborough and Stamford Hospitals NHS Foundation Trust (PSHFT)

How to get in touch

If you have any further queries you can contact the NHS Peterborough Patient Advice and Liaison Service:

How do I contact PALS?

By telephone: Patient Advice and Liaison Helpline 01733 776283. If we are out of the office, or you phone out of office hours, please leave a message on our answer phone. We aim to return calls by the next working day.

In writing: PALS, City Care Centre, Thorpe Road, Peterborough, PE3 6DB

By fax: 01733 776101 (this is not a confidential fax)

By email: PALSTeam@peterboroughpct.nhs.uk

Cover picture: Peterborough City Care Centre

NHS Peterborough – September 2011

