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Report of the Executive Director of Corporate Affairs, Cambridgeshire and Peterborough Clinical Commissioning Group

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CONSULTATION ON PROPOSALS TO IMPROVE OLDER PEOPLE'S HEALTHCARE AND ADULT COMMUNITY SERVICES UPDATE

1. PURPOSE

1.1 To discuss consultation proposals to improve older people's healthcare and adult social community services.

2. **RECOMMENDATIONS**

2.1 For members to give feedback on this consultation and discuss any issues that arise from it.

3. BACKGROUND

3.1 Improving services for people that are frail and elderly is one of Cambridgeshire and Peterborough Clinical Commissioning Group's (CCG) three strategic priorities.

4. KEY ISSUES

4.1 Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) is the organisation responsible for planning, organising and purchasing NHS-funded hospital and community healthcare for residents. We want to improve older people's healthcare and adult community services for residents across Cambridgeshire, Peterborough and those parts of Northamptonshire and Hertfordshire included in the CCG's catchment area.

We have reached a stage in a tendering process, known as the Integrated Older People's Pathway and Adult Community Services procurement, where we have enough detail on the initial proposals a number of organisations have put forward on how services could be delivered differently to achieve the improvements we want.

Why change?

- **Current arrangements are fragmented:** Staff work hard to provide the best possible care, but the way services are organised means that care is not always joined up, and patients do not always get the right care in the right place at the right time.
- The number of older people is increasing: Over a decade (from 2011 to 2021) in Cambridgeshire the number of people aged over 65 is expected to rise by 33% and aged over 85 by 47% and in Peterborough by 23% (over 65s) and 31% (over 85%)
- **Funding:** Only minimal increases in funding are expected in the coming years, so we need to find high quality ways of meeting the needs of a larger group of people within

the budget made available to our area

• **The evidence:** The CCG's programme is informed by a comprehensive assessment of the evidence available which shows better organised and joined-up care leads to better results for patients.

How are services currently organised?

Our local healthcare services for older people are provided by a number of different NHS, voluntary sector and private organisations. Care is provided through community services, hospitals, mental health services, voluntary organisations, GP practices, out of hour's services, ambulance services, pharmacies, specialist equipment services and hospices, The CCG also works with Local Authorities, who are responsible for delivering housing and social care.

Although there are a large number of organisations working in what can be a very complex way, there is no single provider responsible for ensuring that health care for older people and adults with long term conditions is joined up and coordinated.

How can care be improved?

Bidders have made proposals in line with the CCG's **vision** for improving older people's healthcare and adult community services to be better organised around the needs of the patient, There is more information in the main consultation document, but briefly the proposals are for:

- **More joined-up care:** to make sure professionals involved in the care of older patients, or adults with a long term condition, work in joined-up teams.
- **Better planning and communication:** to ensure that patients and their carers are involved in creating their health and care plans, and with consent, for these plans to be available 24/7 to the appropriate professionals.
- **More patients supported to remain independent:** to ensure older people have access to care that allows them to stay independent.
- Improved community and "out of hospital" services with fewer patients admitted to hospital as an emergency: We want to stop people going into hospital unnecessarily (where it can safely be avoided), and make sure older patients and adults with long term conditions can access the right support at home or in their local community, in a timely manner.

In order to deliver these proposals the services below will become the responsibility of a 'Lead Provider' which will directly provide community services and hold the budget for the other services so that care is more joined up and better coordinated.

- Community services for older people and adults
- Unplanned acute hospital care for patients aged 65 and over (A&E, non-specialist services admissions)
- Older People Mental Health Services
- Other services which support the care of older people such as Specialist palliative care services providers and specific voluntary organisations.

Why are we consulting now?

The procurement process that we are following is based on an Outcomes Framework which is designed to encourage innovation in the delivery of services for older people.

Bidders are required to put forward proposals (Solutions) in order to meet the outcomes that we, the CCG want to see as a result of this tendering process.

This means we needed a shortlist of 'Outline Solutions' from the bidders before we had something meaningful for people to give feedback on.

The CCG will take into account the response to consultation, produce a report setting out any changes which are necessary, and require bidders to build these into their final submissions.

Four organisations have been shortlisted in Cambridgeshire and Peterborough CCG's tendering process for improving older people's healthcare and adult community services.

- Accord Health (Interserve with Provide, formerly Central Essex Community Services, and North Essex Partnership Foundation Trust as Mental Health Lead)
- Care for Life (Care UK with Lincolnshire Community Health Services NHS Trust, and Norfolk Community Health & Care NHS Trust)
- Uniting Care Partnership (Cambridgeshire and Peterborough NHS Foundation Trust with Cambridge University Hospitals NHS Foundation Trust)
- Virgin Care Ltd.

5. IMPLICATIONS

A detailed Equality Impact Assessment has been drawn up and will be reviewed regularly by the Older People's Programme Board.

6. ENGAGEMENT AND CONSULTATION

6.1 Cambridgeshire and Peterborough CCG has a statutory duty to involve and consult local people in relation to health service planning and delivery.

The Engagement Team has been engaging with members of the public from 1 February 2013. The purpose of the engagement was to raise awareness, explain the reasons for the need to change and to listen to patient experiences. Cambridgeshire and Peterborough CCG's engagement process included attending patient meetings and meetings of the Patient Reference Group, Healthwatch, the Overview and Scrutiny Committees and the Health and Wellbeing Boards on a formal and informal basis.

The consultation document is attached as **appendix 1**.

The attached consultation process plan attached as **appendix 2** will remain a working document throughout the process and will be reviewed.

A full suite of documents will be available from week commencing 17 March. This will include presentations, Frequently Asked Questions (FAQs) and related news releases which will be available on Cambridgeshire and Peterborough CCG's website. Copies of the consultation documents will be distributed via our networks as outlined in the process plan.

A number of public meetings will be held over the 13 week period along with attendances at patient and other established meetings. (**see appendix 3**)

The key dates are as follows:

- Consultation launch week commencing 17 March 9am
- Consultation ends week commencing 16 June 5pm

An external Market Research company, MRUK, has been commissioned to provide the questions and an independent report on the consultation findings.

7. NEXT STEPS

7.1 The bidders will use the feedback from the public consultation in developing their final proposals. The organisations will now go through to the next stage of the Integrated Older People's Pathway and Adult Community Services procurement process during which they will develop and refine the initial proposals they submitted in January 2014.

The organisation judged to have put forward the best overall proposal will be selected as the preferred bidder in September 2014, with the contract starting in January 2015.

8. APPENDICES

8.1 Appendix 1 – Consultation document Appendix 2 – Consultation process plan Appendix 3 – List of public meetings