

South east London ICS response to the NHS Long Term Plan

Update for OHSEL JHOSC
September 2019



A partnership of NHS providers and Clinical
Commissioning Groups serving the boroughs
of Bexley, Bromley, Greenwich, Lambeth,
Lewisham and Southwark, with NHS England

Introduction

In January 2019, the NHS Long Term Plan (LTP) was published, setting out expectations for the next 10 years to support people in starting well, living well, and ageing well. Whilst refreshing areas such as cancer, mental health and urgent and emergency care, the LTP brings renewed focus to specific major health conditions including cardiovascular disease, stroke, and respiratory disease. In outlining an improved health and care offer for our population, the LTP also emphasises the need to reduce health inequalities, enhance out-of-hospital care, and increase digitally-enabled care.

In responding to the Long Term Plan, the South East London (SEL) ICS is required to produce and submit a narrative plan for delivery between 2019/20 and 2023/24, supported by technical documents on finance, activity, workforce, and performance metrics.

Our plans need to be:

- Clinically led and locally owned
- Financially balanced
- Based on realistic workforce assumptions
- Deliver the entirety of the LTP
- Phase activity over 5 years based on local need

Background 1 of 2 – The NHS Long Term Plan (January 2019)

1

Do things **differently**, through a new service model

2

Take more action on **prevention** and **health inequalities**

3

Improve **care quality** and **outcomes** for major conditions

4

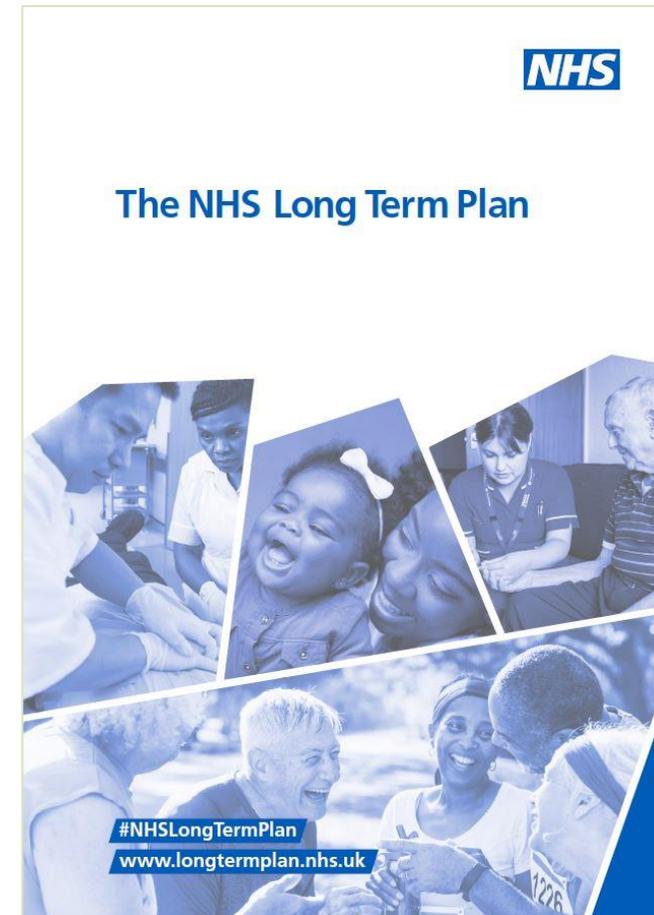
Ensure that **NHS staff** get the backing that they need

5

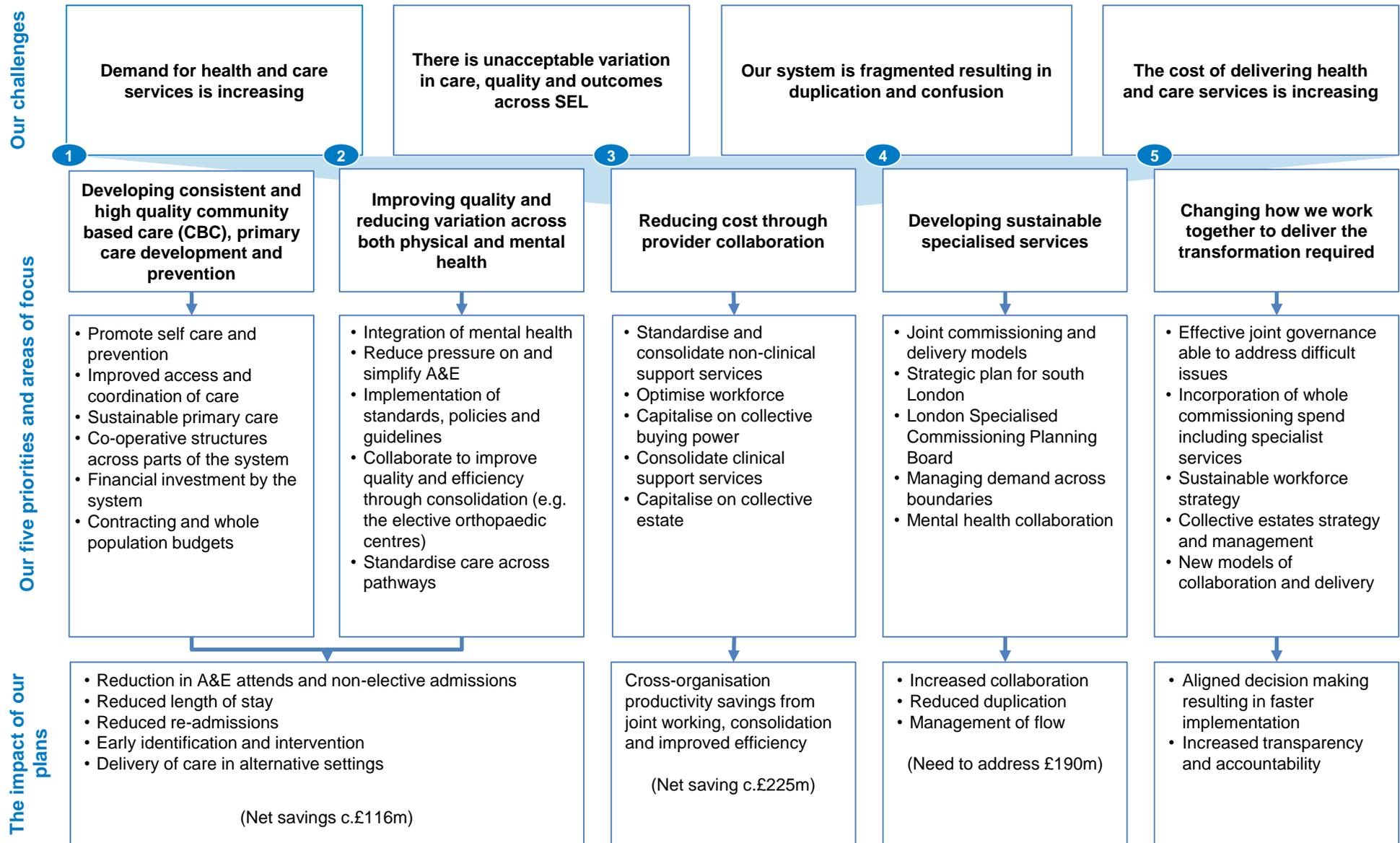
Make better use of **data** and **digital technology**

6

Ensure we get the most out of **taxpayers' investment** in the NHS



Background 2 of 2 – OHSEL Sustainability and Transformation Plan 2016



Our response – ‘Core foundations’ and ‘prioritised commitments’

All STPs and ICSs are required to write a response that sets out how systems will deliver the commitments within the Long Term Plan. To support this a national framework for implementing the LTP was released in June; the framework confirmed key timelines and importantly identified the areas of the plan that are the **‘core foundations’**, the areas that we must have clear plans for delivering on over the next five years.

The framework also outlined a number of areas – **‘prioritised commitments’** – where there is more flexibility for local systems in determining how work is phased over the five year period; ultimately the national deadlines within the LTP must still be met, but systems may prioritise actions required to meet these commitments according to local need:

Core Foundations	Prioritised Commitments
<ul style="list-style-type: none"> • Transformed out-of-hospital care and fully integrated community-based care • Reducing pressure on emergency hospital services • Giving people more control over their own health and more personalised care • Digitally-enabling primary care and outpatient care • Improving cancer outcomes • Improving mental health services • Shorter waits for planned care • Moving to integrated care systems everywhere 	<ul style="list-style-type: none"> • More NHS action on prevention • Maternity and neonatal services • Services for children and young people • Learning disabilities and autism • Cardiovascular disease • Stroke care • Diabetes • Respiratory disease • Research and innovation to drive future outcomes improvement • Genomics • Volunteering • Wider social impact

What our response will cover and how we are developing our response:

System narrative plan	System delivery plan
<ol style="list-style-type: none"> 1. Our ambition for SEL residents and our service delivery vision 2. Understanding our population’s need 3. Service transformation – SEL actions and priorities <i>(including the ‘core foundations’, prevention, and progress on care quality and outcomes)</i> 4. System development – How we will deliver the transformation of our system to deliver our priorities <i>(including our ICS and enablers)</i> 5. Finance <i>(including meeting the five tests)</i> 6. Next steps 	<ul style="list-style-type: none"> • Finance • Activity • Workforce

- In the first instance our draft plans need to be submitted to NHSE&I (London) on **27 September**, before a final submission on **15 November**.
- Given the additional complexity of being part of the wider London system, our response will also **need to align to London-wide priorities**.
- We have undertaken additional **public engagement** to complement the Healthwatch engagement and to ensure our response is fit for purpose.
- The content of our response will build upon previous and current plans and incorporating the outputs of engagement activities.
- Recognising the critical role that they have in our health and care system, we have **continued to engage with our Local Authority partners**, including the Directors of Adult Social Services, the Directors of Public Health, and the Local Authority Chief Executives.
- In building our response we need to ensure that we are delivering the commitments within the LTP whilst also **addressing our financial challenge**.

Our System Improvement Plan commitments – ICS maturity

- In June 2019, SEL developed our System Improvement Plan.
- This made explicit the areas where SEL does not currently meet the standards for a fully mature ICS:
 - We do not consistently meet the NHS Constitutional standards, and performance in some areas is not “consistently improving”;
 - We face a significant challenge in developing and delivering plans to move towards system financial balance; and
 - Further development of system leadership, architecture and partnership working is needed to drive effective collective decision making and ability to carry out decisions that are made.
- The System Improvement Plan sets out a number of actions around performance and finance, and makes a series of commitments to enhance our ICS maturity and system ways of working. The ways of working commitments are:
 1. We will set out the governance and delivery of the ‘System of Systems’, focussing on place-based delivery.
 2. We will redesign how we commission services in south east London.
 3. We will test hospital group model approaches.
 4. We will test integrated care approaches through the development of primary care networks at the core of our delivery model for fully integrated community-based care.
 5. We will explore delegation of specialised services commissioning to the ICS.

System financial challenge

- In order to ensure that we can deliver the aims and visions set out in our five year plan, we recognise the vital need to achieve long term financial sustainability across the South East London system. Our aim to achieve financial balance is predicated on a collective commitment from CCGs and providers to system planning and shared financial risk management, supported by a system control total and system operating plan.
- The LTP sets out the recurrent allocations for each CCG and we are required to produce a financial plan for the ICS which includes five year capital plans at a SEL level; this must demonstrate compliance with the five tests set out in the LTP:
 - Test 1: The NHS (including providers) will return to financial balance
 - Test 2: The NHS will achieve cash-releasing productivity growth of at least 1.1% per year
 - Test 3: The NHS will reduce the growth in demand for care through better integration and prevention
 - Test 4: The NHS will reduce unjustified variation in performance
 - Test 5: The NHS will make better use of capital investment and its existing assets to drive transformation
- As part of this process we will develop SEL wide principles that are agreed across our key stakeholders and which would frame the approach to financial planning and assumptions for the LTP response, building on the approach we adopted to the planning round for 2019/20.

Delivery through our integrated care system



Person



Neighbourhood c.50k



Place c. 250-500k



System c. 1m+

- Both addressing our financial challenge and delivering the commitments of the Long Term Plan can only be achieved through working across the levels within our integrated care system – neighbourhood, place and system.
- At a borough level this will require the development of place-based boards and local care partnerships to design and oversee delivery of integrated health and care for the local population.
- As part of this services will need to work together beyond the scale of the neighbourhood level. For example, primary care networks and community services will need to work together to wrap services around the needs of patients with long term conditions.
- At the same time we will need to deliver personalised care as far as possible, aiming to do what is right for the individual person rather than what is easiest for the system.