



# Urgent and Emergency Care Vanguard Network

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## Summary

- -Urgent and emergency review
- -Background to the Vanguard programme
- -Content of the programme
- -Progress so far and next steps

## Urgent and emergency care review

NHS England review led by Sir Bruce Keogh in 2013/14

Current pattern of emergency services set in 1970s

Since then technology has advanced, public behaviour and expectations have changed and demand has been rising

Public feed back that the system is complex, at times hard to navigate: many people default to attending A&E

Two main conclusions:

- •improve the offer to people outside of hospitals
- •further improve care for people who are seriously ill and need to be admitted to hospital

### Recommendations of the Keogh Review

Provide better support for people to look after their own health, supported by improved care planning and giving people better information

Helping people with urgent care needs to get the right advice in the right place, first time: developing the 111 service to help with this

Providing highly responsive urgent care services outside of hospital so people no longer choose to queue in A&E: general practice, pharmacies and ambulance service have a greater role to play here

Ensuring that those people with more serious or life threatening emergency needs receive treatment in centres with the right facilities and expertise in order to maximise chances of survival and a good recovery

Connecting urgent and emergency care services so the overall system becomes more than just the sum of its parts.

## Vanguards: New Models of Care

Vanguards initiated by the *Five Year Forward View* for the NHS, published in 2014 and are encouraged to develop so called new models of care

Idea behind them is that they lead the way for the rest of the NHS by introducing new ways of working

Vanguards are responsible for developing a plan for the future approach to NHS and care services in certain service areas, including urgent care

West Yorkshire is only one of two Vanguards based on Urgent and Emergency Care (UEC) Networks

UEC Networks were set up across England, 24 in total, to lead work on delivering the Keogh review: Vanguards are expected to deliver sooner and share learning with the rest of the country

Size of network reflects existing systems that provide urgent care

## Further material on the Keogh review

NHS England has published guidance for local communities in *Safer, Faster, Better* on good practice for delivering urgent and emergency care with messages for health and social care services (link at end of slides) Issues covered include:

- improving understanding of capacity and demand
- messages for commissioners
- advice on all parts of the system from primary care through to hospital inpatient services
- importance of addressing mental as well as physical health
- addressing services for all ages of people who need care

## West Yorkshire Vanguard

Based on the West Yorkshire Urgent and Emergency Care Network

Representatives from all parts of West Yorkshire and from different types of services on the leadership team

Involving a wider group of staff in developing its programme

Engagement with citizens, patients and staff is essential

Much of the programme will be delivered locally through Clinical Commissioning Groups working with local authority partners and the providers of services

West Yorkshire dimensions are about getting to a more standard offer and making connections where these are needed

## VanguardWork Streams and Enablers



## What we are trying to achieve

- Increase in the care that can be provided in primary care services across the week with the aim to reduce the numbers of people who feel they need to go to A&E
- Improving the sign posting to services for people with urgent care needs backed up by a clinical advisory service for front line community services
- A more responsive approach to services for people in a mental health crisis with a single operating model across providers
- Further improvements in specialised emergency care through a network of hospitals with common standards
- A consistent approach across West Yorkshire to care records to give better access to staff caring for people
- A better process for contracting for urgent care services within the NHS
- Better recruitment and retention of staff into urgent care services and develop new skills for staff

## Progress so far

Initiated the Vanguard Programme with leadership team including NHS, local government and Healthwatch involvement

Specialist emergency services: discussions with the six acute trusts on issues and how they will develop as a network

Work with CCGs on enhanced general practice developments

Taken stock of current services provided in West Yorkshire

Developed a "Value Proposition" for NHS England: a requirement of all Vanguards and programme has been assessed by NHS England

Value Proposition sets out the initial objectives for the four work streams of the programme

Early progress on new NHS payment models for urgent care

Sub-programme to develop the single operating model for mental health services

## Next steps

Build engagement with public and staff on the programme: starting in early 2016 on primary care, mental health and acute services

Maintain and develop dialogue with Health and Wellbeing Boards and scrutiny committees

Develop the work stream plans

Ensure that the network's plans are informed by local plans and also feeds into the 2016/17 operational planning round for the NHS

NHS England asking local systems to develop overall strategies for the *Five Year Forward View*: the Vanguard work needs to be reflected in them

## Key contacts

#### Chris Dowse

- Chief Officer, North Kirklees CCG
- Chair, West Yorkshire Urgent and Emergency Care Network

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#### **Eric Davies**

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## **Annexes**

Link to the Five Year Forward View: <a href="https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf">https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf</a>

Link to guidance on the Keogh Review "Safer, Faster, Better: <a href="https://www.england.nhs.uk/wp-content/uploads/2015/06/trans-uec.pdf">https://www.england.nhs.uk/wp-content/uploads/2015/06/trans-uec.pdf</a>

On following slides: details of the Vanguard programme's work streams and supporting enablers and feed back from NHS England on the programme and suggestions for future work

#### **Primary Care Work stream**

Vision/Aims/Purpos Vision - ensure no one ends up being seen in A&E because they cannot get access to primary care when it is required (identified through Keogh)

> Aims & Purpose - The clear aspiration for this work-stream is to ensure that Primary Care participates fully in the implementation of the Keogh recommendations and this will be achieved through active engagement across primary care, partner organisations and importantly patients and the general public

> The output will be the development of a consistent offer across West Yorkshire in terms of implementation of the 3 levels of Primary Care. 'Early implementers' will be identified to test out the processes, the implementation, the engagement to help inform roll out in other areas.

**Lead & Support** 

**Clinical Commissioner Lead**: Dr Andy Withers

Commissioner Lead: Carol McKenna Support: Lynne Parkes, Programme Lead

**Progress to date** 

Work-stream group established

Membership of work-stream includes clinicians from all SRG and representatives from key partners

Core aims of the work-stream identified – to be 'tested' with the wider community

Workshop planned to develop thinking further

Meeting to start to develop the engagement plan scheduled

**Next steps** 

Continue to develop work-stream and project structure and process

Secure funding

Complete stakeholder mapping

Communications and engagement planning meeting scheduled for 19.11.2015

Workshop planned for early December to further expand thing re approach – date to be agreed

#### Hear See and Treat Work stream

Vision/Aims/Purp ose	<b>Vision</b> - For the ambulance service provider to become a treatment provider rather than merely a transport provider.
	Aims & Purpose – To develop new ways of working that supports the principle of care closer to home when that is appropriate whilst ensuring that those requiring conveyance for care and treatment are transported in an appropriate time frame in an appropriate way to the most appropriate place to receive that care and treatment
Lead & Support	Commissioner Lead: Jo Webster Clinical Commissioner Lead: Dr Adam Sheppard Provider Lead: Dr Phil Foster Support: Lynne Parkes, Programme Lead John Cartwright, Programme Manager, YAS
Progress to date	Work-stream group established Deliverables in 15/16 and 16/17 identified Project plan in development Executive engagement and support within YAS evident Move towards Joint Commissioning Board for Ambulances Services commenced
Next steps	Continue to develop programme management Secure funding Develop delivery plan Develop communications and engagement plan

## Mental Health Work stream

Vision/Aims/Purpose	Vision-People with Mental Health should have equitable provision for their mental and physical health.  Aims & Purpose- to improve MH provision across West Yorkshire reducing urgent and emergency care demand through the delivery of a collaborative approach to service provision based on best practice and available evidence.
Lead & Support	Lead: Simon Large, CEO Bradford District Care Trust Support: Andrea Willimott, Programme Lead
Progress to date	Leadership group established and held a number of high level meetings.  Agreement on five work programme areas and task and finish groups to support delivery being established. Building on the Crisis Care Concordat partnership work.  Established the West Yorkshire Criminal Justice & Mental Health Forum
Next steps	Three CEO's from the Mental Health Trusts meeting Tuesday 17/11/15  Next MH leadership meeting scheduled for the 25/11/15  Task and finish groups to be in place, met and reviewed KPI's and resources  Nov/ Dec 15  TOR for groups to be drafted and signed off

## Acute Services Work stream

	Vision- all patients with urgent & emergency needs in West Yorkshire will get the right care, in the right place,
Vision/Aims/Purpose	first time every time.
	Aims & Purpose-To utilise the West Yorkshire Association of Acute Trusts to go further and faster together to
	deliver clinically and financially sustainable services.
	To design and deliver an Acute Urgent & Emergency Care system that integrates effectively with the wider health
	and social care system to provide high quality , resilient and sustainable services that deliver the best outcomes
	for patients.
	Build on the West Yorkshire track record to innovate through technology and change the way in which clinical
	resources and expertise is delivered to patients.
	An approach across networks at scale rather than in individual institutions to enhance clinical productivity and
	workflows, the delivery of 7/7 working across a large population driving up quality and experience for patients
	and their families.
Lead & Support	Lead: Chris Dowse, Chief Officer, North Kirklees CCG and Chair of the West Yorkshire Urgent Care Network
	Support: Andrea Willimott, Programme Lead
Progress to date	YHEC Report- Healthy Futures
	10 cc
	Julian Hartley and Clive Professor Kay joined the WY UEC Vanguard Leadership Team
	WYAAT have begun to work together and commence discussions on a number of transformation areas.
	Mid Yorkshire Hospitals NHS Trust- meeting the Challenge
Next steps	Potential programme/project structure
	Roles responsibilities and governance
	Resource requirements
	Support Clinical Reference Group and T&F Groups
	Work across all organisation boundaries to implement change
	Develop project implementation plan
	Supporting implementation of models within Trusts
	Recruit from within providers to maximise benefits

## System Leadership

Vision/Aims/Purpose	To support the Vanguard to deliver its ambitions will require significant determination, leadership and system wide organisational development. We will establish a forum through the leadership group to explore and help understand the challenges ahead and how we can work collaboratively with our strategic partners to meet and address these.
Lead & Support	Lead: Chris Dowse, Chief Officer North Kirklees CCG, Chair West Yorkshire Urgent and Emergency Care Network Support: Eric Davies, Programme Director
Progress to date	Leadership group established and held a number of high level meetings.  West Yorkshire system wide launch event held during September Meetings with all SRGs to understand challenges and priorities Relaunch of the Urgent and Emergency Care Network NHS England Site Visit – Chris Dowse commended for her exemplar leadership  Vanguard Updates discussed at HWB Boards and 10cc
Next steps	Working with OD Specialists we will explore and agree the West Yorkshire way to system leadership. With the support of NHS England we will identify coaching support for the leadership team

#### West Yorkshire Care Record Work stream

#### Vision/Aims/Purp ose

**Vision** – That health and social care professionals will have access to appropriate information required to make correct decisions regards care and treatment at the point of access to care

**Aim & Purpose** - West Yorkshires UEC Vanguards overall aspiration of achieving right care, right time and in right place depends significantly on the ability to share health and social care records at point of care

#### **Lead & Support**

**Commissioner Lead**: Alastair Cartwright

**Clinical Commissioner Lead: TBC** 

Support: Lynne Parkes, Programme Lead

#### **Progress to date**

- Established the work-stream group
- Summarised Vanguard visit by email for Informatics colleagues in other WY CCGs
- Added WY UEC Vanguard as a reference in each of the 11 CCG 'local digital roadmaps' (NHS E October requirement)
- Met with YAS to explore short term opportunities with the Leeds Care Record for this winter (further discussions to take place)
- Very informal discussions on possible short-term people resources with other local organisations
- Input to develop of value proposition

#### Next steps

- Continue to develop project management structure and processes for the work-stream
- Secure funding and associated resources
- Technical fact finding, leading to early view on options
- Develop high level plan including mapping out options (and possible need for business case for capital)

## Workforce Enabling Work stream

Main and Asian ad Property	Vision- To create a framework across West Yorkshire's Health and Social Care partners that seek to encourage
Vision/Aims/Purpose	collaborative approaches to staff pay, education and career development across partner organisations thus reducing
	competition for staff between partners and agency/locum spend
	Aims & Purpose- To promote and market West Yorkshire as the place to work in partnership with care home businesses.
	To understand and articulate the skills and competencies required for a workforce fit for the future and develop those
	people currently in our workforce to deliver these new skills.
	To develop an attractive offer around career development for our workforce to make roles interesting and different from
	elsewhere, including rotational roles and joint appointments between partners.
	Joint appointments across organisations and agencies
	Support for existing staff to work across patient pathways
	Evaluation of new roles and their effectiveness
	System wide workforce planning intelligence
	Talent management
	The Retainer Scheme allows GPs who are only able to work part-time to retain their skills working in an approved practice
	with an Educational Supervision and time for protected learning
	We will work with Local authority colleagues to scope and agree a collaborative offer regarding care home staff and social care staff. Return to Nursing
	The Induction and Refresher Scheme aims to attract UK-qualified GPs back into General Practice who may not currently be
	working in General Practice, and to offer a suitable induction programme to doctors who have not undertaken GP training
	in the UK but who are eligible to work as GPs in the UK, and who would like to continue their GP career in the UK.
Lead & Support	Lead: Nigel Gray, Chief Officer, Leeds North CCG
	Support: Andrea Willimott, Programme Lead
Progress to date	System leaders approached and agreement to work collectively across West Yorkshire, seeking to plan an event, form a
	working group and take this forward.
	Establishing key relationships, gathering intelligence on work undertaken and potential for wider adoption and
	standardised approaches.
Next steps	Potential programme/project structure
	Roles responsibilities and governance
	Resource requirements
	Develop project implementation plan
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## Intelligent Led Priorities

Vision/Aims/Purpose	To support the Vanguard identify its priorities for transformation using an evidence based, best practice approach.  To ensure that we assist our transformational programmes in utilising and evidence based, best practice approach that models the system change, identifies the outcomes and can demonstrate the benefits to patients using our services
Lead & Support	<b>Lead</b> : Dawn Lawson, Chief Executive Academic Health Science Network
Progress to date	Support: Eric Davies, Programme Director  We have commenced work with North England CSU who have been identified to support us with the modelling. We have an analyst working with us to help understand the challenges to help identify the case for change.
Next steps	We will complete our baseline modelling of our transformational work streams by the end of December 2015 and include this in our 2016/17 Value Proposition.

## **New Payment Models**

Vision/Aims/Purpose	Transforming the payment models for urgent and emergency care is a significant part of the system wide development of our urgent and emergency care system. We know that there are significant financial challenges across our health and social care system which require new ways of working.
Lead & Support	Lead: Martin Wright, Chief Finance Officer Leeds North CCG Support: Lynne Parkes Programme Lead Support: Andrea Willimott, Programme Lead
Progress to date	We have held a number of meetings and a workshop with Finance and Commissioning Leads across West Yorkshire. Monitor and NHS England have supported these meetings and recently held a New Payments forum meeting in London where all Vanguards came together.
Next steps	We will work with our transformational work streams to agree service models that will be shadow counted and evaluated during 2016/17. These will be phased in during 2016/17

## **Engagement and Consultation**

Vision/Aims/Purpose	To develop and implement the West Yorkshire approach to how we will engage with staff, patients and carers as part of the West Yorkshire Urgent and Emergency Care vanguard.  To ensure that the views of the people, who use urgent and emergency care services, are properly reflected in any service transformation.
Lead & Support	Lead: Rory Deighton, Chief Executive North Kirklees Health Watch (on behalf of the 5 Health Watch Organisations)  Support: Kirsty Wakeman  Support: Eric Davies, Programme Director
Progress to date	We have developed our draft outline strategy for Engagement and Consultation and commenced work on a stock take of all engagement work that has been completed across West Yorkshire.
Next steps	We will arrange to meet and discuss our plans with Engagement and Consultation leads across West Yorkshire.

## Feedback from Site Visit

NHS England Vanguard team met with the West Yorkshire team on 22 October 2015 and headlines from the feedback are:

Congratulations to the whole team – this is big, complex and exciting

Chris Dowse was highly commended for her leadership

Impressed that mental health is so well integrated into this work

Had all the right partners in the room – balance correct (best they have seen)

Fabulous thinking and progress on developing plan

All work-streams have been identified – fantastic

**Programme Management Office is under resourced currently** 

Acute hospital alliance is great and ambitious but highly appropriate

New payment models for NHS services – we are ahead of the game here

Workforce activity is patient focussed – great

Thinking about future of 111/999 services – all going in the right direction

## What Should we look to strengthen?

Programme Management Office – needs to be bigger – recognise the critical path and define the dependencies of work streams

Workforce – need more work with Health Education England but need to show the difference in two years so it can't all be based on recruitment. – where's the innovation?

Scope – try not to boil the sea – needs further refinement with granular plans for concrete objectives. Consider use of rapid improvement cycles to have quick impact, without over analysis. How to use social movement expertise suitably?

More clarity on the leadership development piece – take care not to over think

Develop basket of indicators across West Yorkshire that looks at the health of the system as well as targets (e.g. 4 hour waits). What can be standardised and what should be localised (e.g. ambulatory care)

Conduct a confirm and challenge on the objectives to ensure that they are suitable and appropriate