

IMPROVING OLDER PEOPLE'S HEALTHCARE AND ADULT COMMUNITY SERVICES

To: **HEALTH COMMITTEE**

Meeting Date: **11 September 2014**

From: **Jessica Bawden, Director of Corporate Affairs and
Matthew Smith, Assistant Director Improving Outcomes,
Cambridgeshire and Peterborough Clinical
Commissioning Group**

Electoral division(s): **ALL**

Forward Plan ref: **Not applicable**

Purpose: **To update members on the progress of the Older People's
Programme**

Recommendation: **Members to consider the report**

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1. BACKGROUND

- 1.1** Improving services for people that are frail and elderly is one of Cambridgeshire and Peterborough Clinical Commissioning Group's (CCG) three strategic priorities. The CCG is nearing the end of a procurement process to find a lead provider of integrated older people's healthcare and adult community services. The new service will integrate and improve physical and mental health services in the community for those aged 65 and over; ensure a better coordinated approach to emergency care for this age group across community and hospital care services; and improve community health services for all adults.

2. MAIN ISSUES

2.1 Procurement

The following bidders submitted their Full Solutions in the final phase of the Integrated Older People's Pathway and Adult Community Services procurement at the end of July 2014:

- 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

The full solutions have been evaluated over the summer by a large team of Assessors drawn from the CCG, Local Commissioning Groups (LCGs), Local Government, patients and carers and others. The Assessors can be broken down into the following categories:

- Clinicians including both GPs and nurses from across the CCG and LCGs (31 Assessors)
- Patient/lay representatives (4 Assessors)
- Subject experts and managers from across the CCG and LCGs in quality, patient engagement, clinical scenarios, mental health, corporate governance, workforce, estates and facilities, Information Management & Technology (IM&T), legal, transition and integration and finance (31 Assessors)
- Local Authority representatives including housing and social care (10 Assessors)
- External Advisors for finance, legal, property and IM&T (4 Assessors).

In September, a board meeting with each bidder will be held as the final part of evaluation where the CCG panel will include representatives from patients, LCGs, the CCG and Local Authorities.

The workstreams will then be brought together at a cross workstream consolidation meeting in September to finalise the evaluation, prior to the recommendation being put forward to the Older People's Programme Board and then to the CCG's Governing Body on 30 September 2014 for consideration of the recommendation and decision.

It is typical that decisions of this nature are made in private sessions and the CCG has a requirement to ensure that bidders are made aware of the decision first, both verbally

and in writing. Therefore this decision will be taken by the Governing Body in private session. Following this procurement protocol, once a decision has been made, the bidders will then be informed. The CCG will announce the Preferred Bidder on 1 October 2014. The Preferred Bidder is expected to start delivering services as of 1 April 2015.

3. SIGNIFICANT IMPLICATIONS

3.1 Resource Implications

The Integrated Older People's Pathway and Adult Community Services contract has a value of around £800m over five years.

The CCG's Programme Budget (and detail of spend) for the Older People's Programme for 2013/14 and the current financial year to date is as follows:

2013/14

Programme Budget: £844k (of which £721k was spent).

2014/15

The Programme Budget for first 6 months: £456k. The estimated spend by end of September 2014 is £441k. This includes completing the evaluation of the final submissions.

Total Cost

The overall cost of the Older People's Programme, since inception, which includes but is not confined to the procurement, is £1.1m. Funding for the Programme Budget is contained within the CCG's running costs budget.

3.2 Statutory, Risk and Legal Implications

The CCG has amended the full service start date to 1 April 2015 to allow more time for mobilisation following the decision on the Preferred Bidder in September 2014. The general feeling following the public consultation was that the original timescale starting in January 2015 was too short. The CCG will work with the Preferred Bidder and incumbent providers to ensure that all necessary steps are taken to secure safe transition, including certainty for transferring staff at the earliest possible date.

3.3 Equality and Diversity Implications

An Equality Impact Assessment is completed as part of the procurement process. This is a live document that is worked on throughout the life of the procurement. The latest published version is available on the CCG's website on the Improving Older People's Healthcare and Adult Community Services consultation page

(<http://www.cambridgeshireandpeterboroughccg.nhs.uk/have-your-say/older-people-and-adult-community-services.htm>) and is attached as Appendix 1.

3.4 Engagement and Consultation Implications

A public consultation was held between 17 March and 16 June 2014. The CCG ran a series of 22 public meetings across the CCG's area at different times of day as well as on Saturdays. The CCG was also asked to speak at around 50 other meetings to discuss the consultation. The format of the public meetings included a presentation and question and answer session. There was also an opportunity to ask one to one

questions at the end of the meetings. The CCG also attended staff briefings for Cambridgeshire Community Services NHS Trust staff to give feedback on the consultation. An external Market Research company (MRUK) was commissioned and provided the independent report on the consultation findings. MRUK also conducted telephone interviews throughout May 2014. The End of Consultation Report and CCG's Response to Consultation, which includes the recommendations made to the bidders following the consultation, can be found on the CCG's website on the Improving Older People's Healthcare and Adult Community Services consultation page: <http://www.cambridgeshireandpeterboroughccg.nhs.uk/have-your-say/older-people-and-adult-community-services.htm>

3.5 Localism and Local Member Involvement

The Invitation to Submit Full Solutions (ISFS) prospectus issued to bidders at the start of the Full Solutions stage of the procurement process included a Local Requirements section (Appendix 2 of the ISFS Prospectus). This can be found on the CCG's website on the Improving Older People's Healthcare and Adult Community Services consultation page. <http://www.cambridgeshireandpeterboroughccg.nhs.uk/have-your-say/older-people-and-adult-community-services.htm>.

3.6 Public Health Implications

One of the domains of the CCG's Outcomes Framework, the framework against which how well the new Lead Provider is delivering services will be measured, is:

Pathway domain 1: Support older people and individuals with long term conditions through early interventions and evidence-based care to improve their health, wellbeing and maintain their independence.

This relates to the Public Health Outcomes Framework Domain 2: People are helped to live healthy lifestyles, make healthy choices and reduce health inequalities.

The CCG's Outcomes Framework for Older People and Adult Community Services to Improve Health, Wellbeing and Maintain Independence can be found on the CCG's website on the Improving Older People's Healthcare and Adult Community Services consultation page. <http://www.cambridgeshireandpeterboroughccg.nhs.uk/have-your-say/older-people-and-adult-community-services.htm>. A summary of the seven domains within the Outcomes Framework is given below:

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| Pathway domain 1 | Support older people and individuals with long term conditions (LTCs) through early interventions and evidence-based care to maintain their health, wellbeing and independence |
| Pathway domain 2 | Support older people and those with a LTC with an acute deterioration in health or inability to cope at home, to reduce avoidable admissions and prevent unnecessary hospital stays |
| Pathway domain 3 | Promote recovery, rehabilitation and sustainability of health and functional status after a period of health or injury, with supported discharge and reduced readmissions |
| Pathway domain 4 | Optimise the experience of care of people approaching the end of their lives (and their carers) in all settings and at all times of the day and night |

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| Overarching domain A | Ensure people have an excellent and equitable experience of care and support with care organised around the patient |
| Overarching domain B | Treat and care for people in a safe environment and protect them from avoidable harm |
| Overarching domain C | Develop an organisational culture of joined-up working, patient centred care, empowering staff and effective information sharing |

| Source Documents | Location |
|---|---|
| Equality Impact Assessment | http://www.cambridgeshireandpeterboroughccg.nhs.uk/have-your-say/older-people-and-adult-community-services.htm |
| End of Consultation Report and Response to Consultation | http://www.cambridgeshireandpeterboroughccg.nhs.uk/have-your-say/older-people-and-adult-community-services.htm |
| Outcomes Framework for Older People and Adult Community Services to improve health, wellbeing and maintain independence | http://www.cambridgeshireandpeterboroughccg.nhs.uk/have-your-say/older-people-and-adult-community-services.htm |