Welcome to Sutton CCG’s Annual General Meeting 2018/19

Dr Jeff Croucher MBBS FRCGP
Clinical Chair

@NHSSuttonCCG
www.suttonccg.nhs.uk
## Agenda

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>2:00pm</td>
<td>Welcome and introductions</td>
<td>Dr Jeff Croucher, Clinical Chair</td>
</tr>
<tr>
<td>2:10pm</td>
<td>Review of the year - Our achievements</td>
<td>Sarah Blow, Accountable Officer</td>
</tr>
<tr>
<td>2:30pm</td>
<td>Making a difference for our patients</td>
<td>Michelle Rahman, Acting Managing Director</td>
</tr>
<tr>
<td>2:30pm</td>
<td>Making a difference for our patients</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Sutton Health and Care Partnership</td>
<td></td>
</tr>
<tr>
<td>3:00pm</td>
<td>Financial Review</td>
<td>Geoff Price, Director of Finance</td>
</tr>
<tr>
<td>3:20pm</td>
<td>Future plans</td>
<td>Sarah Blow</td>
</tr>
<tr>
<td>3:35pm</td>
<td>Summary</td>
<td>Dr Jeff Croucher</td>
</tr>
<tr>
<td>3:45pm</td>
<td>Question and answer session</td>
<td></td>
</tr>
<tr>
<td>4:00pm</td>
<td>Close</td>
<td></td>
</tr>
</tbody>
</table>
Who we are and what we do

- NHS Sutton CCG is a Clinically-led membership organisation
- We are made up of 23 GP practices in Sutton
- We are responsible for the local NHS budget (£305.3 million in 2018/19)
- Our role is to:
  - Make sure that the budget is spent on the right services to meet the health needs of people living in Sutton
  - Commission hospital, community, mental health and primary care services
  - Monitor the quality of local health services
What we set out to do

Our objectives are to:

- Ensure patients are at the heart of decision making
- Commission high quality health services for local people

- Make the best use of our resources, working closely with primary and secondary care
- Work with our local authority to develop an integrated health and care system
Primary care networks

• We are working with our GP membership in Sutton to support the development of primary care networks

• Networks aim to
  – Share best practice more easily
  – reduce bureaucracy
  – help alleviate workload pressures on practices
  – allow GPs to concentrate on the most complex patients.

• Networks in Sutton cover a population of approximately 50,000 patients

• Patients will benefit from
  – improved access to, and an extended range of, services available to them,
  – integration of primary care with wider health and community services
Primary care networks

GP practice sites

Carshalton PCN
1. Faccini House Surgery
2. Bishopsford Road Medical Centre
3. Green Wrythe Surgery
4. Hackbridge Medical Centre
5. Chesser Surgery
6. Wrythe Green Surgery
7. Sutton Medical Centre
8. Carshalton Fields Surgery (*See note below)

Cheam and South Sutton PCN
9. James O’Riordan Medical Centre
10. Cheam GP Centre
11. Cheam Family Practice
12. Benhill and Belmont GP Centre

Central Sutton PCN
13. Robin Hood Lane (Dr Seyan) Practice
14. The Old Court House Surgery
15. The Grove Road Practice
16. Mulgrave Road Surgery

Wallington PCN
17. Beeches Surgery
18. Park Road Medical Centre
19. Manor Practice
20. Maldon Road Surgery
21. Wallington Family Practice
22. Shotfield Medical Practice
23. Wallington Medical Centre

Note:  • The three practices based at the GP Centre in Cheam merged into one practice in April 2019 and are now known as the Cheam GP Centre  • Carshalton Fields patients are allocated to Carshalton Primary Care Network but the practice is not a member of the network.
Our achievements in 2018/19

Sarah Blow
Accountable Officer
<table>
<thead>
<tr>
<th>NHS Constitution performance standard</th>
<th>Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>95% of patients seen in A&amp;E admitted or discharged within 4 hours – 92.1% performance</td>
<td>x</td>
</tr>
<tr>
<td>99% of patients have diagnostic tests within 6 weeks – 98.9% performance</td>
<td>x</td>
</tr>
<tr>
<td>93% of suspected cancer referrals to be seen within 2 weeks of referral – 96.6% performance</td>
<td>✓</td>
</tr>
<tr>
<td>96% of patients waiting no more than 31 days from diagnosis to first definitive treatment for all cancers – 98.0% performance</td>
<td>✓</td>
</tr>
<tr>
<td>50% of people recovering after referral to psychological therapies – 47.7% performance</td>
<td>x</td>
</tr>
<tr>
<td>92% of people to be waiting no more than 18 weeks from referral to first definitive treatment for consultant-led services – 89.9% performance</td>
<td>x</td>
</tr>
<tr>
<td>67% of people with dementia diagnosed – 73.1% performance</td>
<td>✓</td>
</tr>
</tbody>
</table>
Our achievements – some highlights

**Start well: Children and young people’s mental health**

- Working with schools and other partners across south west London to improve mental health and wellbeing for children and young people
- Delivering training and support for children and young people, their families and teachers through a ‘whole school approach’
- School-based support teams are being piloted, led by Greenshaw School, with the aim of including all Sutton schools in the future
- In Sutton, extra project funding will mean
  - Working with further education colleges
  - Mental health early intervention for young people with special educational needs and disabilities in selected special schools
Our achievements – some highlights

**Live well: Long term conditions - patient activation**

- “Patient activation” is the knowledge, skills and confidence a person has in managing their own health and care
- New, locally commissioned service launched in 2019
- When people are supported to become more activated, they benefit from better health outcomes, improved experiences of care and services, and have fewer unplanned care admissions
- Our patient activation programme is delivered in partnership with colleagues across general practice, with a focus on patients with respiratory conditions (COPD)
- Practices will be encouraged to work together to provide community based education and support sessions as well as individual coaching and goal setting for approximately 500 COPD patients across Sutton
Our achievements – some highlights

Age well: Sutton Health and Care at Home

• Partners in Sutton have worked collaboratively to implement a new integrated model of care, *Sutton Health and Care at Home*

• *SHC at Home* went live in July 2018 and delivers better care to local people, as a seamless, single service

• More people are being supported with care in their own homes
  – On average three people per day have not required admission to hospital

• *SHC at Home* is also working with independent sector providers such as care homes and domiciliary care agencies to grow capacity and capability

• Positive feedback received from patients about
  – Quality of care, levels of respect and involvement in decision making and care being more joined up
Sutton Health and Care Partnership
Michelle Rahman
Acting Managing Director
Our ambitions

Partners in Sutton have a commitment to establish an integrated care partnership which will ensure we are providing the right care for people. This will be through the development of an integrated care place with:

One vision
Through the Sutton Plan, and the principles contained within it, integrate health and care services to deliver better outcomes for the people of Sutton

One plan
Through the Sutton Health and Care Plan and the strategic priorities for health and care, maximising use of the Sutton “pound”

One service delivery model
Through the Sutton Health and Care Alliance as the provider that develops and delivers against a service development map that responds to the health and care plan
The Sutton Plan

Sutton Health and Care Plan is a chapter of the Sutton plan
Our aspiration for the people of Sutton is that they *start well, live well* and *age well*. We have identified eight initial priority areas for improvement that we will be jointly addressing over the coming years.

**Start Well**
- improve young people’s mental health
- improve the support provided to parents of children with Special Educational Needs and Disability
- develop the universal offer to make sure all children are ready for school

**Live Well**
- improve specialist care and support for adults with learning disabilities
- encourage adults to make healthy lifestyle choices
- improve support for people with both long term physical and mental health conditions

**Age Well**
- improve how we combat loneliness and social isolation among older people
- improve how we support older people to stay out of hospital
An example of a new Sutton Health and Care Plan initiative

Age Well

• improve how we combat loneliness and social isolation among older people
• improve how we support older people to stay out of hospital

Multidisciplinary team meeting (MDT)

• An MDT is a meeting of professionals from a range of services who make informed decisions together regarding the best support, care and treatment to help support a patient’s health and wellbeing
• MDTs utilise knowledge, skills and best practice from across health, social care, voluntary and private sector services to find solutions to complex situations
• MDTs enable professionals to proactively identify patients and discuss their needs
A case study - Edith

Overview

• Edith is aged 79 and she lives alone. She wants to maintain her independence and continue living at home
• She has five long term conditions and she is becoming increasingly frail and unsteady on her feet
• She has started to have frequent falls
• She is at risk of:
  – Future falls
  – Medication errors
  – Social and emotional isolation
A case study - Edith

Who was involved in Edith’s care?

- GP
- MDT nurse
- Neurologist
- Care of the elderly team from St Helier
- Social services
- Community pharmacist
- Sutton Uplift – Wellbeing team
- Age UK – Befriender service
- Sutton Connect
- Sutton Housing Partnership
What was the result for Edith’s care?

• Better support and management
  – New diagnosis of postural hypotension
• Special equipment provided (pressure relieving cushion and falls sensor in place)
  – No further falls
• Medications reviewed and rationalised
• Reduced social isolation
  – Going out once a week with support
• Additional two hours domestic assistance per week
• Improved communication between professionals has reduced duplication
Review of financial year 2018/19

Geoff Price
Director of Finance
Financial targets

• We met all, but one, of our financial targets in 2018/19
  ✓ We operated within our running cost limit
  ✓ We met our cash targets
  ✓ We operated within our capital limits
  ✓ We met the requirement to pay suppliers (of health and non health services) promptly

• However ……
Financial targets

• We did not meet our financial target to achieve financial balance; instead we incurred a deficit of £3.9 million

• The main reasons for this were
  – Acute hospital expenditure around £5 million higher than plan
  – Continuing Healthcare expenditure around £1.5 million higher than plan
  – Savings targets not achieved - £1.6m ( of £14 m )

• These overspends were partially mitigated through reserves held and savings measures taken in year but not enough to prevent us from incurring a deficit.

• Because we incurred a deficit, and because of the level of risk in the 2019/20 plan, we have formulated a joint financial recovery plan with Epsom St Helier to achieve joint financial balance
Where the money was spent in 2018/19

• Sutton CCG spent £305.3 million in 2018/19. Of this £301.3 million was spent on commissioned health services and £4m (or 1.3% of total resources) on running costs.

• Spend can be analysed as:

<table>
<thead>
<tr>
<th>Service</th>
<th>£m</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute hospital</td>
<td>158.3</td>
<td>51.8%</td>
</tr>
<tr>
<td>Mental health</td>
<td>25.6</td>
<td>8.4%</td>
</tr>
<tr>
<td>Community</td>
<td>47.2</td>
<td>15.5%</td>
</tr>
<tr>
<td>Primary care</td>
<td>31.6</td>
<td>10.4%</td>
</tr>
<tr>
<td>Prescribing</td>
<td>25.3</td>
<td>8.3%</td>
</tr>
<tr>
<td>Running costs</td>
<td>4.0</td>
<td>1.3%</td>
</tr>
<tr>
<td>Other</td>
<td>13.3</td>
<td>4.3%</td>
</tr>
<tr>
<td>Total</td>
<td>305.3</td>
<td>100.0%</td>
</tr>
</tbody>
</table>
2019/20 and beyond

• The NHS continues to face significant financial challenges and this applies to NHS Sutton CCG

• The NHS is working much more as one system – Sutton CCG is working very closely with Epsom St Helier, for example, and a joint financial recovery plan is in place

• We are committed to putting the CCG on a firm financial footing so that we can continue to operate on an affordable and sustainable basis
Our future plans

Sarah Blow
Accountable Officer
Moving forward together

- The six CCGs in south west London have been working together for over a year on new developments.

- Earlier this year the Governing Bodies of the six south west London CCGs all agreed to proceed with discussions to potentially merge into a single CCG for south west London.

- To deliver the ambitions of the NHS Long Term Plan we need to free-up resources so we can invest in the community and mental health services and in new developments such as Primary Care Networks.

- We are discussing the proposed merger at governing body meetings and with our membership and a decision is expected later this year.

- We are also engaging with, staff, local authorities, provider trusts and Healthwatch and other stakeholders.
Epsom and St Helier University Hospitals NHS Trust has faced significant challenges for many years in terms of the suitability of its buildings and how its services are organised. In autumn 2017, the trust set out its own view of these challenges and how it believed commissioners should respond.

NHS Surrey Downs, Sutton and Merton CCGs have developed the *Improving Healthcare Together 2020-2030* programme to look in detail at the challenges and how to best make sure the hospitals continue to deliver high quality, safe and sustainable services. The CCGs have already said that there will continue to be a need for both hospitals.

Since December 2018 we have been working with a wide range of experts, partners, local authority and public health colleagues, clinicians, the public and our regulators to gather research and evidence to help shape our proposals.

No decisions about any changes to services will be made until after a full public consultation has taken place and all of the information has been considered by the CCGs.
Q and A

Dr Jeff Croucher
Clinical Chair