



Report to: East Sussex Better Together (ESBT) Strategic Commissioning Board

Date of meeting: 6 June 2017

By: Director of Adult Social Care and Health, East Sussex County Council
Chief Officer, NHS Hastings and Rother and Eastbourne, Hailsham and Seaford Clinical Commissioning Groups

Title: ESBT Alliance Outcomes Framework

Purpose: To provide the Strategic Commissioning Board with a progress report on the development of the ESBT Alliance Outcomes Framework, and to seek agreement to adopt as a pilot to further test and refine in the 2017/18 test-bed year

RECOMMENDATIONS

- 1) To note progress made towards establishing the pilot ESBT Alliance Outcomes Framework**
 - 2) To agree and adopt the pilot Outcomes Framework to further test and refine during the test-bed year**
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1. Background

1.1. The ESBT Alliance partners, Eastbourne, Hailsham and Seaford (EHS) and Hastings and Rother (HR) Clinical Commissioning Groups (CCGs), East Sussex County Council (ESCC), East Sussex Healthcare NHS Trust (ESHT) and Sussex Partnership NHS Foundation Trust (SPFT) have agreed to a formal Alliance Agreement to underpin our arrangements for 2017/18, allowing room to test to best effect what will be the right solution for the people we serve and deliver the best outcomes for our population.

1.2 The 2017/18 test-bed year is designed to enable oversight of the whole health and care system from both a commissioning and delivery perspective, supporting us to act collectively in a way that delivers improvements for our local population. In addition it also creates a collaborative learning environment in which we can progress the development work to design our final proposed ESBT Alliance system of accountable care.

1.3 Building on our original ESBT work on reporting progress against population health and health inequalities outcomes, this paper provides detail on the proposed integrated Outcomes Framework that we will seek to pilot in 2017/18 to inform our stakeholders about progress made across the health and social care system on delivering improvements to population health and wellbeing, experience, quality and sustainability – including the per capita cost of care.

2. Supporting information

2.1 Our research tells us that understanding the outcomes that are important to local people and providing feedback on how well we are delivering on these, is part of how accountable care models can be incentivised to deliver improvements. For example, in the La Ribera Salud model of accountable care the focus is on a small number of priority outcomes and performance against these is published; enabling the general public, commissioners and others to understand that improvements are being made.

2.2 Accountable care focusses the delivery of health and care services on achieving positive outcomes, or results, for citizens, patients and clients. The health and care system is geared towards keeping people well and promoting independence and wellbeing, while ensuring we have high quality hospital, care and specialist services when people need them. The important difference to current arrangements is that delivery across the system is fully aligned to achieve shared goals.

2.3 In our test-bed year of accountable care in 2017/18, we need a small group of shared system-wide priority outcomes which we can work towards and further test and refine during the year. Whilst this shared Outcomes Framework will not replace the existing performance requirements that each Alliance organisation currently works to, it will enable commissioners, providers and staff working in the system to recognise and use the same Outcomes Framework to guide their work with patients, clients and carers, and see how their activity or part of the care pathway contributes to delivering the outcomes that are meaningful for local people. The Outcomes Framework will also complement the way the Alliance uses our collective business intelligence to understand the performance of the health and care system as a whole.

2.4 Following local engagement in the Autumn of 2016, a data review took place to provide a picture of what is important to local people about their health and care services. The data review brought together the wide range of qualitative information and feedback that is already available across all our organisations and through our engagement events, and which represents the views of thousands of people who are using local health and social care services, both children and adults. The data review helped to identify common themes across all our organisations about what is important to local people, and thematically collated this information to arrive at statements that are common across all services. The full Data Review of What Matters to Local People is attached at Appendix 1.

2.5 Informed by our data review, the local engagement that has taken place, and the nine principles and characteristics we have agreed for designing and implementing accountable care in East Sussex, we have developed four key outcome domains that underpin the development of the ESBT Alliance pilot outcome framework:



2.6 The definitions of these domains and corresponding proposed key strategic objectives are as follows:

Population health and wellbeing: addressing and improving population health and reducing health inequalities. We want to:

- improve health and wellbeing
- reduce inequalities

The experience of local people: the experience people have of their health and care services. We want to:

- put people in control of their health and care

- improve communication and access to information
- deliver services that meet people's needs and support independence

Transforming services for sustainability: the way services work and how effective they are at impacting positively on the people who use them. We want to:

- demonstrate financial and system sustainability
- deliver joined up information technology
- prioritise prevention and early intervention, self care and self management

Quality care and support: making sure we have safe and effective care and support. We want to:

- provide safe, effective and high quality care and support
- deliver person-centred care through integrated and skilled service provision

2.7 Proposed outcomes and key indicators for each domain have now been identified and aligned to support each objective, and performance measures are being finalised in conjunction with the corresponding service area. These measures have been chosen in accordance with what people have told us is important to them, and to provide high level indicators as to how well we are performing as a system. An overview of the current draft framework and how we are proposing to present it is attached at Appendix 2.

3. Next steps

3.1 Subject to feedback from the ESBT Strategic Commissioning Board, the next stage of development will include:

- Finalising baselines, targets and trajectories for each measure – building on the population indicators we have used throughout the ESBT programme (as indicated in item 6 on the agenda for this meeting), the targets in the Outcomes Framework will be established for a 5 year period to align with the Strategic Investment Plan (SIP) planning horizon. This will be subject to adjustment according to the future contractual model agreed for Alliance provision, and the learning generated in the pilot period. The proposed targets and trajectories will be finalised for presentation at the next ESBT Strategic Commissioning Board meeting. We are expecting in-year improvements to performance from working as an Alliance in the test-bed year, and will be able to measure this across many of the indicators in the Outcomes Framework;
- Continuing and strengthening our engagement with local people during 2017/18 to test whether the pilot outcome measures are the right ones. We propose to do this through a range of different targeted engagement activities including exploration of ways to capture real-time feedback from patients and clients in the test-bed year, and an online survey exercise that is accessible to the wider public and staff, using social media to target specific groups;
- Aligning the developing performance reporting frameworks for the Alliance Executive and operational groups across the system with the domains contained within the Outcomes Framework, to deliver a consistent reporting structure across operational performance frameworks and the pilot Outcomes Framework;
- We will aim to publish performance against the measures in our pilot Outcomes Framework in the Autumn of 2017.

3.2 In July 2017, the County Council and CCGs will consider the options for the legal vehicle that will best deliver our new model of accountable care and achieve the ambition of a fully integrated health and care system. In line with this, and taking account of feedback from the continued engagement with local people through the pilot period, we will refresh and make any final changes to the Framework in early 2018, ready for the new arrangements that will be in place in April 2018.

4. Conclusion and reasons for recommendations

4.1 Research and discussions about our new model of accountable care have highlighted the need for a clear Outcomes Framework with which to measure improvements on a system-wide basis and to test how well our system is working. Building on our original ESBT work on reporting progress against population health and health inequalities outcomes, we have developed an integrated pilot Outcomes Framework to inform our stakeholders about progress made across the

health and social care system on delivering improvements to population health and wellbeing, experience, quality and sustainability – including the per capita cost of care.

4.2 A unified Outcomes Framework will also help the Alliance and our stakeholders locally, and nationally in NHSE, NHSI and the CQC, understand the benefits of managing the health and care system collectively through the new Alliance arrangements we have set up. The suggested outcome measures have been tested with key stakeholders and the final draft framework is presented for endorsement by the ESBT Strategic Commissioning Board for piloting in 2017/18.

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