

<b>28 July 2015</b>		<b>ITEM: 9</b>
<b>Health and Wellbeing Overview and Scrutiny Committee</b>		
<b>Success Regime</b>		
<b>Wards and communities affected:</b> All	<b>Key Decision:</b> Note the introduction of the regime	
<b>Report of:</b> Mandy Ansell (Acting) Interim Accountable Officer – NHS Thurrock Clinical Commissioning Group		
<b>Accountable Head of Service:</b> Mandy Ansell (Acting) Interim Accountable Officer – NHS Thurrock Clinical Commissioning Group		
<b>Accountable Director:</b> Mandy Ansell (Acting) Interim Accountable Officer – NHS Thurrock Clinical Commissioning Group		
<b>This report is Public</b>		

### **Executive Summary**

The Essex health and care economy has been selected for the first wave of the newly announced *Success Regime for the* following reasons:

- The operational and quality challenges which present risks to clinical sustainability;
- The financial sustainability challenges across the local health economy;
- The limited success with previous strategic interventions to improve services;
- The workforce challenges across primary and secondary care in the local health economy; and
- The benefit to be gained from using new models of care to deliver services.

The intention is to create a new regime for the most challenged local health and care economies was first set out in the *NHS Five Year Forward View* and is explained further in the joint planning guidance for 2015/16. The aim is to change the way that the system provides challenge and support to local leaders in order to address long-standing and often deep-rooted issues which are affecting the quality and sustainability of services for patients and the public. Unlike previous interventions, this regime will be jointly overseen by our three organisations, NHS England, Monitor and the NHS Trust Development Authority (TDA) at both a regional and a national level. It will focus on whole health and care systems and systemic issues as opposed to individual organisations, and the intention is to continue to work with the selected localities until the solutions to the challenges that we are all facing can be successfully implemented by local leaders.

In doing so, we will build on work carried out as part of the Challenged Local Health Economies (note Mid Essex has been part of this programme) initiative last year. There will also be close links to the Vanguard programme, and thought should be given as to whether any of the new care models set out in the Forward View might be part of the solution to the particular challenges in Essex.

Whilst the regime represents an opportunity to transform the way in which the health economy operates, the process will inevitably be challenging for colleagues. Essex has been working hard to improve the quality and sustainability of the health and care economy, but the necessary scale of improvement has not been made which is why we all need to do something different. The system needs to be clear up-front that, as well as support, we will also be offering considerable challenge and, if necessary, direction. But throughout the process the aim is to support the development of local leaders so that the Essex health and care economy is stronger as a result of having been in the regime, and able to sustain the improvements made for local people.

The regional directors will be in touch shortly to take forward next steps, an important part of which will be the appointment of a Programme Director who will oversee the Success Regime in the Essex local health economy. Initial work will determine the work programme within the Essex local health economy, and the degree of involvement of Thurrock in the regime. It is important to note that Thurrock CCG's regulatory status is not changed as a result of this regime and it is still the CCG's responsibility to deliver the regulatory requirements.

## **1. Recommendation(s)**

### **1.1 The Health Overview and Scrutiny Committee is asked to note the introduction of the regime and any implications that emerge for Thurrock.**

## **2. Introduction and Background**

- 2.1 Work with some of the most challenged health and care economies will start now. The first sites to enter the regime have been chosen by the regional directors from NHS England, Monitor and NHS Trust Development Authority (TDA), and approved by the Board of the seven Chief Executives of the national bodies. Selection decisions have been informed by quantitative – for example, quality metrics and financial performance – and qualitative information.

The attached documents set out the framework for the Success Regimes, these being:

*FIVE YEAR FORWARD VIEW*

*The Success Regime:*

*A whole systems intervention*

and

*FIVE YEAR*

*FORWARD VIEW*

*The Success Regime: A whole systems intervention*

*The First Health and Care Economies (Annex)*

At the time of writing this paper the system is waiting for the announcement of the lead organisation and the appointment of the Project Director. It is expected that once these have been announced a diagnostic phase will commence.

### **3. Issues, Options and Analysis of Options**

- 3.1 It should be noted that organisations are expected to continue with “business as usual” and therefore the work of the CCG and that which is undertaken through our collaborative arrangements with the Council, including the Better Care Fund, will continue as planned.

### **4. Reasons for Recommendation**

- 4.1 This is a national directive.

### **5. Consultation (including Overview and Scrutiny, if applicable)**

- 5.1 None as a direct result of this initiative at the time of writing. Consultation events including routine patient participation and engagement will continue as currently embedded in the CCG’s constitution.

### **6. Impact on corporate policies, priorities, performance and community impact**

- 6.1 N/A

### **7. Implications**

#### **7.1 Financial**

The implications for the Thurrock Health and Social Care economy will emerge following the diagnostic phase it is anticipated.

#### **7.2 Legal**

NA

#### **7.3 Diversity and Equality**

No adverse implications anticipated

### **8. Background papers used in preparing the report**

NA

### **9. Appendices to the report**

*FIVE YEAR FORWARD VIEW*  
*The Success Regime:*

*A whole systems intervention*

and

*FIVE YEAR*

*FORWARD VIEW*

*The Success Regime: A whole systems intervention*

*The First Health and Care Economies (Annex)*