TRAFFORD COUNCIL

Report to: Executive Date: 24th June Report for: Decision

Report of: The Executive Member for Health, Wellbeing and Equalities and

the Corporate Director of Commissioning

Report Title:

Transformation Fund - Redefining and Proposed Investments

Summary:

The purpose of this report is to set out the refresh of Trafford CCG's element of the Transformation Fund and the proposed areas for it to be invested in.

Recommendation(s)

It is recommended that the Executive:

- a) Notes the report
- b) Approves the re-defining of £3.2m of the Transformation Fund
- c) Notes the prioritised list of investments against the redefined and previously repurposed Transformation Funding
- d) Notes the proposed next steps.

Contact person for access to background papers and further information:

Name:Sara Radcliffe Number: 0161 873 6081

Background Papers: None

Relationship to Policy Framework/Corporate Priorities	Value for Money
Relationship to GM Policy or Strategy Framework	Not applicable
Financial	The funding is part of the £22m awarded by the Greater Manchester Health & Social Care Partnership (GMHSCP) to the Trafford Locality in October 2017.
Legal Implications:	None arising out of this report
Equality/Diversity Implications	None arising out of this report
Sustainability Implications	None arising out of this report
Resource Implications e.g. Staffing / ICT / Assets	Not applicable
Risk Management Implications	Not applicable

Health & Wellbeing Implications	This proposal relates to improving health			
	outcomes and reducing variation.			
Health and Safety Implications	Not applicable			

1. INTRODUCTION AND BACKGROUND

- 1.1 The Trafford system was awarded £22m in October 2017 from the Greater Manchester (GM) £450m Transformation Fund (TF) which is delegated to Greater Manchester Heath & Social Care Partnership (GMHSCP) by NHS England.
- 1.2 In March 2019 Executive approved the repurposing of £2.3m of the Transformation Fund assigned to support the delivery of the Primary Care Organisation (PCO) and associated New Models of Care, following the cessation of the PCO.
- 1.3 GMHSCP have agreed that a full refresh of the Trafford CCG element of the Transformation Fund be undertaken to ensure that the investments and benefits match those expected through the delivery of Trafford CCG's 2019/20 Tactical Plan, and 5 Year Sustainability plan.

2. REFRESH OF TRAFFORD CCG TRANSFORMATION FUNDING

- 2.1 The previous repurposing of £2.3m of the transformation funding was approved as follows:
 - £2.1m to be invested in Primary Care and aligned to supporting the development of our Primary Care Neighbourhood Model.
 - Enhancement of the LCA approximately £24k
 - Additional programme management costs of £216k to extend a Transformation Programme Director for an additional 1.5 years and an Administrator for 1 year
- 2.2 A second review in April 2019 has identified £3.2m of Trafford CCG Transformation Funding against which there are no business cases quantifying levels of investment, and the benefits are not reflective of the Trafford CCG Tactical or Sustainability Plan ambitions.
- 2.3 Table 1 below summarises Trafford CCG's element of the transformation programme showing the initial approval, spend to end of March 2019 and those with continued commitment. Remaining funds have been split between repurpose and redefined transformation areas. The detail by schemes is provided in appendix 1.

Table 1: CCG Transformation Programme

	Initial			Balance		
	Approved		Continued	for		
Area	Programme	Expenditure	original	repurpose		
	spend	to 31.03.19	commitment	/ redefine	Repurpose	Redefine
	£'000	£'000	£'000	£'000	£'000	£'000
Preventative	121	0	0	121	0	121
Planned Care	1,548	134	1,414	0	0	0
Urgent/Specialised	1,273	210	320	743	0	743
Domiciliary	2,626	1,475	478	673	0	673
Commissioning	200	0	0	200	0	200
Other Premises Costs	519	50	0	469	469	0
Provider Development	1,958	387	53	1,518	804	714
Integrated Health & Social Care	4,841	1,280	1,759	1,802	1,038	764
Programme Management	1,071	238	833	0	0	0
Total TF Fund Available	14,157	3,774	4,857	5,526	2,311	3,215

3. Investment Areas

- 3.1 The 19/20 Tactical Plan and the 5 Year Sustainability Plan have a number of transformation schemes that require pump priming investment to deliver benefits. These schemes continue to align to the original themes of the transformation fund i.e. urgent, planned and intermediate care therefore the proposal is to re define the schemes and benefits associated with the £3.2m.
- 3.2 In addition, £2.1m of the January 2019 refresh was repurposed for investment into Primary Care Neighbourhood Model. Currently there is no case for change identifying the specific Primary Care Neighbourhood Model schemes to be supported or associated benefits.
- 3.3 Therefore proposed options for investments in Primary Care Neighbourhood Model £2.1m and the redefined allocation of £3.2m are shown in Table 2.
- 3.4 Commissioners have worked with their Finance Business Partners and Clinical Leads to identify the indicative investment requirement for each scheme. It is acknowledged that a full case for change will be required to secure funding and it is proposed that the Primary Care Neighbourhood Model schemes and associated benefits are worked up through Primary Care Networks, working with the Local Care Alliance.
- 3.5 Table 2 identifies £4.4m of investment schemes over 2 years aimed at delivering at least £6.4m of cashable benefits in 19/20 with additional benefits for 19/20 and 20/21 to be determined through scheme based cases for

change. £3.2m is identified for the Primary Care Neighbourhood Model over 2 years.

Table 2: Investment Schemes

Area	Schemes	Scheme Description	Estimated cost 19/20 £'000	Estimated cost 20/21 £'000	Estimated benefits 19/20 £'000
System	A&E Steaming	Streaming to Primary Care at front door A&E	450		700
	Length Of Stay	MFT deflection scheme and future proof Intermediate care provision	100		900
	Rehabilitation *	Community Transition cost for Theme 3 Community Neurological Rehabilitation Therapy	200		
	THRIVE *	Continued contribution to infrastructure contract for 19/20	20		
	Urgent care reform	Minor Injuries Unit top up and reduction of follow up tariffs Acute Medical Receiving Unit, commission Community Intravenous Therapy Service and redesign Walk In Centre	400		2,900
	Sub Total		1,170	0	4,500
	Care Home Local Enhanced Scheme extension (LES)	Bridge to new GP contract	250		160
	Notes storage *	Year 3 of scheme- non recurrent	20		
Primary Care Neighbourhood Model	Primary Care outpatients scheme	MFT Deflection scheme	490	490	1,725
	Place Based Outpatient reform *	Respiratory Diabetes Cardiology Neighbourhood approach	550	550	
	Risk stratification	GP LES for Risk stratification	60	60	25
	GP contract *	£1.5 has to be funded from Transformation fund, as this wasn't included in budget setting	360		
	Sustainability of GP Locally Commissioned Scheme (LCS) for access *	One year continuation of LCS schemes	350		
	Sub Total		2,080	1,100	1,910
Total			3,250	1,100	6,410

^{*} Benefits to be determined

4. Next steps

- 4.1 Work will continue to identify further change schemes and benefits to ensure that the remaining £0.9m of repurposed and redefined transformation funding is fully allocated to pump priming effective change which allows recurrent funding to be identified.
- 4.2 Prior to each scheme progressing a case for change will be developed by Commissioners working with their Clinical leads, Business Partners and Networks which clearly identifies:
 - Need for change
 - Level of investment
 - How investment will be managed recurrently
 - Levels of benefits
- 4.3 This will allow a full refresh of the Investment Agreement by the summer, for submission to GM once it has been approved by all Partners.

5. Other Options

5.1 To declare the funding as not required and to not refresh the transformation fund would not address the need to improve health outcomes, reduce variation and would continue the disconnect between Trafford CCG's Transactional and Sustainability Plans and the transformation fund.

6. Consultation

6.1 This has been discussed widely within the CCG and through Primary Care engagement and there is agreement from the GMHSCP for this to take place.

7. Reasons for Recommendation

7.1 To enable the required transformational changes within the health and social care system to continue by the repurposing and redefining of transformation funding into priority areas.

Key Decision (as defined in the Constitution):	Yes
If Key Decision, has 28-day notice been given?	Yes

Finance Officer Clearance	NB
Legal Officer Clearance	JLF

CORPORATE DIRECTOR'S SIGNATURE

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Appendix 1

Appendix 1 Service Line	Initial Approved Programme spend £	Expenditure to 31.03.19 £	Continued original commitmen t £	Balance for repurpose / redefine £	Repurposed £	Redefine £
Preventative						
LES Payments	49,026	0	0	49,026		49,026
Workstream Administration	71,499	0	0	71,499		71,499
Total Preventative	120,525	0	0	120,525	0	120,525
Planned Care						
Primary Care Mental Health and Wellbeing Serv	936,125	0	936,125	0	0	0
Medicines Optimisation - Pharmacist	507,283	_	373,392	0	0	0
Medicines Optimisation - Technician	105,075	0	105,075	0	0	0
Total Planned Care	1,548,483	133,891	1,414,592	0	0	0
Urgent/Specialised	740.006	_				
Care Workforce - undefined	743,396	0	4.50.000	743,396	0	743,396
Care Workforce - Diabetes	218,380	_	160,000		0	
Care Workforce - Care Navigators Care Workforce - A+E Streaming	115,790 125,614	24,282 86,614	91,508 39,000	0	0	
Care Workforce - Advanced Clinical Practicione		40,834	29,166	0	0	
Total Urgent/Specialised	1,273,180	210,110	319,674	743,396	0	743,396
Domiciliary						
TECHT - Community	2,625,953	1,475,110	0	, , , , , , , , , , , , , , , , , , , ,	0	0
TECHT - Pharmacists			477,740	-477,740	0	673,103
TECHT - GP's			0	0	0	0
Total Domiciliary	2,625,953	1,475,110	477,740	673,103	0	673,103
Commissioning						
Quality Outcomes Framework	200,000	0	0	200,000	0	200,000
Total Commissioning	200,000	0	0	200,000	0	200,000
O						
Overarching Clinical and Change Resource	F10.1F0	40.970	0	460 200	469,280	0
Total Other Premises Costs	519,159 519,159		0	469,280 469,280	469,280 469,280	0 0
Total Other Frenises Costs	313,133	43,073	•	405,200	403,200	U
Provider Development						
Provider Leadership Capacity	226,500	106,838	0	119,662	119,662	
Quality & Outcomes Framework	156,468	12,078	0	144,390		144,390
GP Transitional Relief	183,602		0	183,602	183,602	
New Organisational Form	819,856		1	1	500,753	
Training Costs LCA	571,234	2,040	0	569,194		569,194
Total Provider Development	1,957,660	387,259	52,800	1,517,601	804,017	713,584
	2,000,000		22,000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	32.752.	120,001
Integrated Health & Social Care						
Community Enhanced Care (CEC)	1,037,958	0			1,037,958	
Intermediate Care (Ascot House - 36 Beds)	3,039,118				0	
Home Care	763,677		0	,	1 007 070	763,677
Total Intergrated Health & Social Care	4,840,753	1,279,694	1,759,424	1,801,635	1,037,958	763,677
Programme Management						
New Models of Care	891,291	159,382	731,909	0	0	0
Overall Programme Management	179,699		101,295		0	0
Total Dispensing/Prescribing Drs	1,070,990	237,786	833,204	0	0	0
Total TF Fund Available @01/04/2019	14,156,703	3,773,729	4,857,434	5,525,540	2,311,255	3,214,285