

Workstream 3: Commissioning quality services that are accessible to all when needed

Aim: To support commissioners and service providers to design and implement models of care which promote integration and care that feels coordinated to those using, and delivering, end of life care

Status Update e.g. key success and issues this month		
05/12/2016	<p>Key successes:</p> <ul style="list-style-type: none"> - First of 9 roadshows held, in West Midlands - good attendance and feedback. - The Commissioning for Value Long Term Conditions pack has been published and includes a section on EoLC <p>New issue:</p> <ul style="list-style-type: none"> - None 	<p>Reason for Current RAG Rating</p> <p>Whilst the majority of deliverables within the workstream are on track, there are a number rated Amber with significant issues to resolve before delivery can be considered feasible, most of which also have risks identified below. In particular there are concerns about the ability to collect patient / carer feedback due to the ongoing ONS safeguarding issue and decisions to be made about the future options for collecting feedback which will need to be addressed following receipt of the final report from Ipsos MORI. Progress is also needed with metric development, in particular with securing appropriate metrics within the revised CCG IAF.</p> <p>Actions in place to address RAG rating</p> <p>To sustain and/or improve the RAG rating, mitigating actions should be progressed for the highest rated risks:</p> <ul style="list-style-type: none"> - For current plans to capture patient and carer feedback, NHS England and DH are working with ONS to support the development of a safeguarding policy, providing feedback on draft versions and engaging in regular progress discussions. - For future options around patient and carer feedback, NHS England is trying to identify funding through business planning. - For metric development, options for inclusion in CCG IAF have been developed and will be discussed at the EoLC programme board in December. Aim to propose metrics for inclusion in the January engagement exercise. Metrics working group will reconvene in January to build on this work.
Delivery Confidence (RAG)	<p>Decisions Required for Programme Board:</p> <ul style="list-style-type: none"> - To confirm whether actions to address risks are appropriate - To promote the Commissioning for Value pack, encouraging commissioners to use this to compare their EoLC provision against nearest neighbours 	
This Period	<ul style="list-style-type: none"> - To promote both the Palliative Care Dataset and Specialist Palliative Care currencies, both of which will be published in December and could benefit both providers and commissioners of Specialist Palliative Care 	
A		
Last Period		

Milestones				
Key milestones achieved this period	Milestone Achieved: Y/N	New completion date if required	Key milestones due next period	Expected Completion date
Palliative Care Clinical Dataset for Specialist Palliative Care (PHE & NHSE): Palliative Care Clinical Dataset approvals being sought - will be published in December 2016.	Y	N/A	Palliative Care Clinical Dataset for Specialist Palliative Care (PHE & NHSE): Publication and promotion of the Palliative Care Clinical Dataset to commissioners and providers once published, in December 2016	Dec-16
Metric development (NHSE): Paper on metrics development to be discussed at EoLC programme board in December - shortlist of options for inclusion in the next iteration of the CCG IAF has been developed and plans for longer term metric development suggested.	Y	N/A	Metric development (NHSE): Pursue inclusion of new metrics on EoLC in the CCG IAF; further meetings of the Metrics Working Group to be established and further development work to be taken forward	Mar-17
Spread innovation and best practice (NHSE): - First of 9 roadshows held, in West Midlands - good attendance and feedback.	Y	N/A	Spread innovation and best practice (NHSE): - Details of all roadshows to be finalised and programmes agreed; Minister is attending roadshow in Kent, Surrey & Sussex.	Mar-17
Currencies and guidance for Specialist Palliative Care (NHSE): Further drafts of guidance developed to support publication of the currencies. Attended Hospice UK national conference to present on purpose and potential use of the currencies.	Y	N/A	Currencies and guidance for Specialist Palliative Care (NHSE): Guidance to be published in December. Comms plan being developed in conjunction with Hospice UK and Together For Short Lives.	Dec-16
Children's hospice grant funding (NHSE): Consultation on grant allocation formula to take place following review meeting held with 'Together for Short Lives'. A consultation document has been published with deadline for responses of 6th January 2017	Y	N/A	Children's hospice grant funding (NHSE): Review consultation outcomes in January - allocations for 2017/18 to be agreed by the NHSE Investment Committee in February.	Mar-17
RightCare programme (NHSE): - The Commissioning for Value Long Term Conditions pack has been approved and will be published in December. - The 2 RightCare casebook scenarios are progressing but timescales have slipped due to sickness. The first on Parkinson's is very near completion. Scenario on colon cancer to progress in the new year.	Y	N/A	RightCare programme (NHSE): - Promote and embed the Long Term Conditions Commissioning for Value pack. - Commence the publications process for the Parkinson's casebook and recommence work on the colon cancer casebook.	Mar-17
Patient and carer experience (NHSE): - Meeting will take place between NHSE, DH and CQC once a budget has been agreed to take forward this work.	Y	N/A	Patient and carer experience (NHSE): Interviews to be undertaken; final findings and recommendations to be delivered by Ipsos MORI to NHS England following completion of stakeholder interviews. A meeting will then take place for the health system stakeholders (NHS England, DH, CQC) to discuss and agree future feedback approach.	Dec-16

24/7 access to specialist palliative care (NCPC): A report based on 7 examples of local 24/7 models of care has been drafted - approvals and sign off will be sought shortly.	Y	N/A	Support commissioners with 24/7 access to palliative care (NCPC): Final document to be produced following review by stakeholders. Approval received from Publication Control Committee - next steps will be to proceed with Gateway processes by EoLC team within NHSE.	Dec-16
Health economics (PHE): Review of the health economics evidence base on end of life care complete and tool developed to support local commissioning networks	Y	N/A	Health economics (PHE): Economics tool to be published	Dec-16
Atlas of variation (PHE): Early draft of the Atlas shared with the steering group which met in November - was well received and work continues to develop the 32 indicators.	Y	N/A	Atlas of variation (PHE): Ongoing preparation of the Atlas	Dec-16
NHSE Regional delivery to embed commissioning tools for EoLC: - London: Work has been done to map the location of deaths in London by CCG. Further analysis is being done on these data and consideration given to meaningful presentation and usage for CCGs, along with data on the availability of other elements of EoLC within each CCG; Initial work has been undertaken mapping the EoLC workstreams within each of the five STPs - all include EoLC with a variable emphasis; Presentation to the NWL STP EoLC commissioners on the EoLC commissioners checklist to encourage its use. - Thames Valley: Commissioner forum held with a focus on the urgent and emergency care agenda- following the CCG assurance deep dive, opportunity to share the learning. - Wessex: Reviewed the Dorset and Hampshire and Isle of Wight Sustainability and Transformation Plans (STPs) and established that End of Life Care is a fundamental part of their complex care and integrated care work streams; - East Midlands: Engaged with each of our 5 health communities and is encouraging completion of the Ambitions self-assessment tool developed in Cheshire. Will provide an East Midlands view of progress, gaps and indicate best practice that can be shared; Facilitated a workshop for one health community looking to redesign complex End of Life care provision across multiple providers. Developing a broad service specification for specialist and generalist care across multiple settings.	N/A	N/A	NHSE Regional support to embed commissioning tools for EoLC: - London: Progress mapping of components of EoLC by STP. - Wessex: Scope what commissioners are already doing, including finding out if they are using the commissioner toolkit. - South West: Develop a draft commissioning dashboard for comment and feedback by January 31st 2017. - North West: Continue to work with the STP leads in positioning PEoLC within the STP engagement events planned for October and November; Facilitated engagement events planned for supporting localities undertake Ambitions self-assessment using toolkit. - East of England: Support commissioners to design and implement evidence based models of care; Review 6 STP Plans for any alignment with work programme.	Mar-17

Key Risks

Ref.	Brief Description of Risk/Issue	Impact (1-5)	Likelihood (1-5)	Current RAG	Status and Mitigating Action Progress	Change since previous reporting period
3.1	Patient and carer experience: Funding is not agreed for delivery of the agreed future approach.	5	2	R	NHS England are working with stakeholders to agree an approach in time for business planning. Cost and funding sources will be part of the final decision making discussions.	NO CHANGE
3.2	Patient and carer experience: An appropriate safeguarding policy is not agreed with ONS (holders of the death register which may be required for a survey sample to be drawn) and within a suitable timeframe to enable data to be captured for 16/17	4	4	R	NHS England and DH are working with ONS to support the development of a safeguarding policy, providing feedback on draft versions and engaging in regular progress discussions.	NO CHANGE
3.3	Metric development (NHSE): : Unable to develop sufficiently robust metrics for inclusion in the CCG IAF (including lack of influence in development of national data collections) therefore struggling to deliver one of the commitments within the Choice Review response and unable to measure success of EoLC commitment implementation	4	3	AR	Metric options for inclusion in CCG IAF have been developed for discussion with NHSE colleagues - aiming to be part of the January engagement exercise. Metrics working group to reconvene in January and build on this work and develop metrics for potential inclusion in national data collections	UPDATED WORDING / SAME RAG
3.4	Planning round (NHSE): May be unable to influence planning round sufficiently for EoLC to be visible within key documents such as contracts and the STPs. May limit the priority that local commissioners place on improving EoLC.	4	3	AR	Proposed wording for various planning documents has been suggested. Regional leads trying to influence STPs and analysis of the initial set of STPs will be produced for the EoLC programme board in December.	UPDATED WORDING / SAME RAG
3.5	Children's hospice funding allocation (NHSE): Outcome of consultation may not produce a deliverable change in formula either due to lack of base data - or transition to new formula creates too great a change in annual allocations within recommended time frames.	4	2	A	Options modelling to be undertaken prior to end of consultation to inform consultation views	NO CHANGE