

<b>DECISION-MAKER:</b>	HEALTH AND WELLBEING BOARD		
<b>SUBJECT:</b>	NHS FIVE YEAR FORWARD VIEW: NEW MODELS OF CARE		
<b>DATE OF DECISION:</b>	25 MARCH 2015		
<b>REPORT OF:</b>	CHIEF EXECUTIVE, CLINICAL COMMISSIONING GROUP (CCG)		
<b><u>CONTACT DETAILS</u></b>			
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<b>STATEMENT OF CONFIDENTIALITY</b>			
None			

### **BRIEF SUMMARY**

The NHS Five Year Forward View (FYFV) was published by NHS England and the other national bodies in October 2015. It identifies three themes or gaps that must be addressed and are interlinked:

- Health and wellbeing – requiring a radical upgrade in prevention
- Care and quality – requiring new models of care
- Funding – requiring efficiency and investment

This paper addresses the second theme and provides the Health and Wellbeing Board with an update on development work in Southampton. The expression of interest attached at Appendix 1 was prepared at very short notice and submitted to the national team on 9 February as part of the Vanguard/Forerunners scheme that would have enabled access to a share of the £200M fund announced in NHS England allocations. It was shortlisted and a team from Southampton presented to the final selection panel on 3 March. The proposal describes a City-wide integrated model encompassing primary care, community health services, social services, voluntary sector and mental health services. It does not assume a single organisational entity.

### **RECOMMENDATIONS:**

- (i) Health and Wellbeing Board is invited to discuss the merits and drawbacks of the proposed approach, how it fits with our Better Care vision, and the opportunities and barriers to be managed in moving things forward.
- (ii) The Board is invited to express its support to the partners involved in developing the proposal further.

## REASONS FOR REPORT RECOMMENDATIONS

1. Despite not being selected as one of the nationally funded Vanguards, the proposal is strategically sound and widely supported. The proposals are perfectly aligned with the Board's Better Care Plan and represent an imaginative step forward towards purposeful implementation of a model of provision that will enable delivery at scale and pace, provided that they are wholeheartedly embraced and driven through to realisation

## ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2. The present fragmented range of out of hospital services are a product of history and happenstance. There are gaps and overlaps which militate against the most efficient and effective delivery of joined up care. The proposals represent a collaborative approach to changing provision. The proposals should be viewed alongside alternative organisational approaches under discussion such as the emerging practice federation, options for providing social services, the Foundation Trust programme and so on.

## DETAIL

3. The detail of the proposal is set out in appendix 1

## RESOURCE IMPLICATIONS

### Capital/Revenue

4. None at this stage.

### Property/Other

5. None.

## LEGAL IMPLICATIONS

### Statutory power to undertake proposals in the report:

6. Not required at this stage.

### Other Legal Implications:

7. None

## POLICY FRAMEWORK IMPLICATIONS

8. Align with Health and Wellbeing Strategy and Better Care Plans.

**KEY DECISION?** Yes

**WARDS/COMMUNITIES AFFECTED:**

All

## SUPPORTING DOCUMENTATION

### Appendices

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|----|---|
| 1. | Forward View into Action: expression of interest in the national Vanguard programme |
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**Documents In Members' Rooms**

1.	None
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**Equality Impact Assessment**

Do the implications/subject of the report require an Equality Impact Assessment (EIA) to be carried out.	Yes
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**Other Background Documents**

**Equality Impact Assessment and Other Background documents available for inspection at:**

Title of Background Paper(s)

Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)

1.	None.	
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