

Right Care: Identifying and seizing value opportunities for 2016/17 and beyond

Transformation Board
16th February 2016



North



North East



Oxford City



South East



South West



West

As you know, Oxfordshire health economy is facing significant financial challenges

- By 2012/21 Oxfordshire NHS organisations will need to 'save' £270m (NB This is Oxfordshire's share of NHS £22bn savings target and does not take account of expected cuts to local government/social care)
- Local delivery of the NHS 5-Year Forward view will require a more transformational approach
- We expect 25% of 'savings' to come from traditional Acute operational productivity; and 75% from other areas / approaches including transformational new models of care focused on better value

- *We need to identify savings as part of the work we are about to start*

But how?

The Forward View Challenge

Operational productivity

- Benchmarking
- Workforce productivity
- Approach to procurement
- Estates optimisation
- Leadership

RightCare

- Where to look
- What to change
- How to change

Allocative efficiency & demand

New Models of Care

Vanguard programmes:

- Integrated Primary & Acute Care Systems (PACS)
- Multi-speciality Community Providers (MCP)
- Enhanced Health in Care Homes
- Urgent and Emergency Care
- Acute Care Collaboration

Finance input:

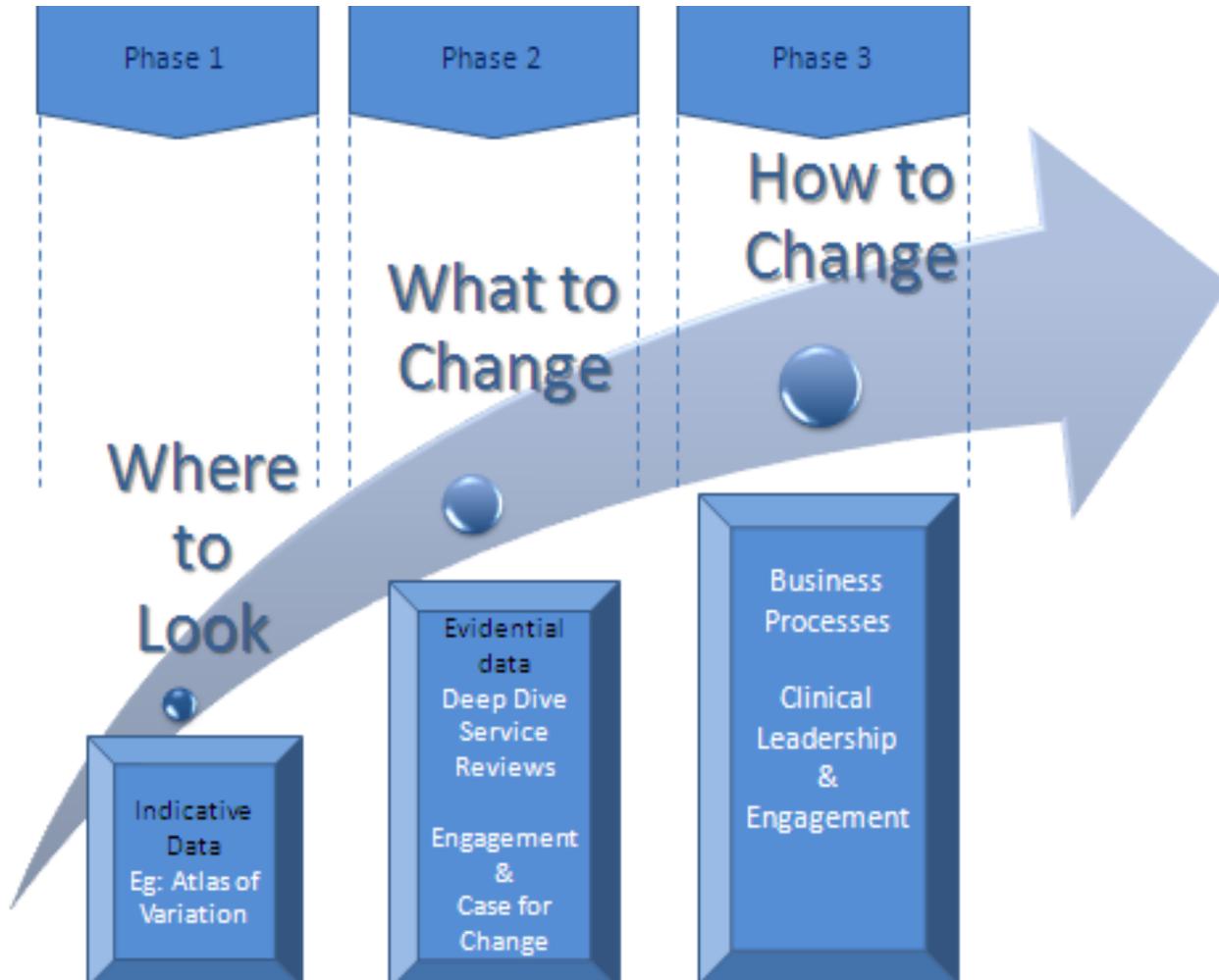
- Business models
- Pricing & payment mechanisms
- Procurement & contracting support
- Cross-sector collaboration

The NHS RightCare approach in a nutshell

1. Helps health economies find where they are wasting money on sub-optimal healthcare.
2. Helps them replace that with optimal healthcare and save money.

1 key objective + 3 key phases + 5 key ingredients =
COMMISSIONING FOR VALUE

OBJECTIVE - Maximise Value (individual and population)



Five Key Ingredients:

1. Clinical Leadership
2. Indicative Data
3. Clinical Engagement
4. Evidential Data
5. Effective processes

Built on basic, simple improvement principles

1. Get everyone talking about the same stuff
 - *Agree what to focus improvement effort on*
2. When talking about it, talk about ‘what is wrong?’ and ‘what will fix it?’, NOT ‘who’s fault is it?’
 - *Design optimal (protocols, pathway and systems)*
3. Build evidence to demonstrate that ‘what will fix it?’ can be done
 - *Assess and make case for viability of impact*
4. (Thanks to above) always talk about implementation from perspective of ‘this is the right thing to do for the population, and it is do-able’
 - *Isolate true reasons for non-delivery*

Inconvenient truths: Leadership behaviour - Not for the fainthearted

- NHS RightCare is designed to:
 - Make you look for problem areas (and face entrenched views)
 - Make you fix them (no matter how hard)
 - Highlight and deal with blocks in progress (including when important people/ stakeholders)
- Doesn't allow you to shy away

Next steps

- ❑ Identify value opportunities: benchmark Oxfordshire against the national Top Quintile
 - ❑ Provide input to service (re-)design workstreams
 - ❑ Adopt 'deep dive'/Rapid Action Teams approach
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