

**THE FORWARD VIEW INTO ACTION:
Urgent and Emergency Care Vanguard Sites**

Transformation Board - Briefing Paper

<p>Background</p>	<p>The 'Five Year Forward View' identified a number of new care models that will help transform the way in which care is delivered across the NHS. 29 areas have now been selected as vanguard sites for three of these models:</p> <ul style="list-style-type: none"> ➤ Multispecialty community providers (MCPs); ➤ Integrated primary and acute care systems (PACS); ➤ Models of enhanced health in care homes; <p>A fourth group – new models of acute care collaboration – is being established and has gone out for expressions of interest.</p> <p>Expressions of interest are now also being invited for organisations and partnerships to become vanguard sites for a further new care model focusing on urgent and emergency care (UEC). The successful applicants will form the fifth group within the overall New Care Models Programme.</p>
<p>Recommendations for the Transformation Board:</p>	<ol style="list-style-type: none"> 1. <i>The Transformation Board is asked to advise whether it wishes to submit a Vanguard proposal for the newly announced Urgent Care New Care Model. In doing so the Transformation Board may also wish to consider whether it would like to submit a joint proposal with NHS Aylesbury CCG. They have indicated an enthusiasm to jointly develop a system-wide bid across TV, probably demonstrating an umbrella network, which may be a reasonable given the currently ongoing 111 procurement.</i> 2. <i>If there is an ambition to apply, Transformation Board is asked to note the requirement to have “A clear and ambitious vision of what they want to achieve and of how the new model will help promote the health and well-being of the population”.</i> <p><i>Clearly Oxfordshire is working towards this position and expects to have high level view in July however; this may be a challenge for us to demonstrate for this bidding process. Therefore, it is asked that the Transformation Board gives any necessary steer on scope for organisations to enact.</i></p> 3. <i>Further, the Transformation Board is asked to consider the requirement that we need to describe our current urgent care network, which is for a minimum 4/5m population.</i> 4. <i>Please note that the closing date for applications is Friday 15 July 2015.</i>
<p>The Vision</p>	<p>Through the national Urgent and Emergency Care Review, a clear vision for the future has emerged, including;</p> <ul style="list-style-type: none"> • for those people with urgent care needs, including people experiencing mental health crisis, we should provide a highly responsive service that delivers care as close to home as possible, minimising disruption and inconvenience for patients and their families; • For those people with more serious or life threatening emergency care needs, we should ensure they are treated in centres with the very best expertise and facilities in order to maximise the chances of survival

	and a good recovery.
The Vanguard Sites will be expected to:	<p>Create and implement urgent and emergency care models. They will be expected to commit to increasing their ambition and accelerating their intended pace of change.</p> <ul style="list-style-type: none"> • Do the ‘right things right’, no reinventing wheels or doing ‘quick fixes’ or ‘easy wins’ that are only likely to make marginal quality improvements. There will be explicit requirements on implementing best practice and national policy expectations; • Support and empower their System Resilience Groups (SRGs) and Urgent and Emergency Care Networks to set standards and establish new ways of working; • Develop and test new system-wide outcome indicators; and • Work as a group, to learn from each other.
At a minimum, applicants are expected to already have in place:	<ul style="list-style-type: none"> • A clear and ambitious vision of what they want to achieve and of how the new model will help promote the health and well-being of the population, increase the quality and person-centeredness of care for their patients, and improve efficiency for the taxpayer within available resources; • A commitment to making swift progress in the development of the new model; • Effective managerial and clinical leadership, including leadership for engagement, and the capacity and capability to succeed. <p>Applicants will also need to show:</p> <ul style="list-style-type: none"> • an appetite to engage intensively with other sites across the country, and with national bodies, in a co-designed and structured programme of support aimed at: <ul style="list-style-type: none"> ○ identifying, prioritising and tackling national barriers experienced locally; ○ Developing common rather than unique local solutions that can easily be replicated by subsequent sites; and ○ Assessing progress, through a staged development and assurance process. • A commitment to test local and national metrics and to demonstrate progress against them, including real-time monitoring and evaluation of health and care quality outcomes, the costs of change, and the benefits that accrue; • A willingness to share data as required to support the development and operation of the new model; • Test new payment models and funding flows; and • If a subset of a UEC network, the explicit backing of their network.

