BCF Temperature check template

| Area Team Name Devon, Cornwall and Isles of S | icill Name of area being assessed Plymouth | Date 06-Aug-14 |
|---|--|--|
| Assessment questions | Assessment answer Select from the drop-down menu | Any other comments Free text |
| NATIONAL BCF CONDITIONS Are you confide | nt the your BCF plan will be able to meet the following six national (| conditions? |
| Condition | How confident are you that the condition will be met? | Comments |
| Seven day health and care services: to ensure that people can access the care they need when they need it | Moderate confidence | Some 7DS are already in place and further scaling up and testing is planned during Winter 2014/15 to |
| Data sharing, including the use of digital care plans and NHS number so people don't endlessly repeat their story and professionals spend less time filling out paperwork | Moderate confidence | Coverage of NHS number is reasonably good in social care. Improved joint working around the Care Coordination Team has ensured improvements in data sharing |
| Joint assessments so that services can work together to assess and meet people's holistic needs | Moderate confidence | Some joint assessments already in place with scaling up by April 2015 when full integration of health and social care is planned |
| An accountable professional who can join up services around individuals and prevent them from falling through gaps | Moderate confidence | See above - part of planned integration of health and social care |
| Protecting social care to ensure that people can still access the services they need | Moderate confidence | Increasing financial pressure in NEW Devon CCG and Plymouth City Council reduction in funding will increase the risk across the whole health and social care system |
| Agreed impact on acute care sector to prevent people reaching crisis point and reducing the pressures on A&E | Low confidence | In Q1 2014/15 NEW Devon CCG has seen an increase of 10% in ED attendances and a 5% increase in emergency admissions which is potentially associated to changes of patient accessing Urgent Care (using A&E rather than OOH following introduction of NHS 111) There are mitigating actions which we hope will reverse this trend to the planned activity upon which the baseline for Emergency Admission reduction would be based. |

| PART 1: PROCESS | | |
|--|--|---|
| THE ASK: Is the ask on local areas completely clear? | Yes | We understand the process and have put in some local resource already to help coordinate the completion of the templates and coordinate the process as NEW Devon is very complex due its large size, 2 H&WB, and multiple providers. The learning from the Financially Challlenged Economy work has been the requirement to have additional resource to coordinate and draw together the various partners to ensure consistency |
| GUIDANCE: Do you fully understand the guidance? | No | Further clarification required on the baseline for emergency admissions (also around what does total emergency a0dmissions) is required particularly around whether the baseline could be revised in response to any dramatic actual change in activity as seen above in line 24 |
| PART 2: STRUCTURAL ENABLERS | | |
| PARTNERSHIP WORKING: What level of support would the area need in order to unite CCGs and Local Authority colleagues around a shared vision? | Would benefit from central information to help understand what good looks like and suggest areas for potential improvement | We have good relationships across the CCG and Local Authority around shared vision and have put in some local resource already to help coordinate the completion of the templates and coordinate the process as NEW Devon is very complex due its large size, 2 H&WB, Multiple providers. The learning from the Financially Challenged Economy work has been the requirement to have additional resource to coordinate and draw together the various partners to ensure consistency of approach |
| SYSTEM-WIDE APPROACH: What level of support would the area need to engage the local health economy, patients, service users and the public and bring them together in support of this vision? | Would benefit from some coordination support locally to run events / reiterate / communicate the vision | The complexity of the system with 4 NHS Trusts and FTs as well as many out of hospital providers requires coordination and we have already put in some local management resource since the guidance came out to help coordinate and support the HWB and CCG in this process |
| GOVERNANCE: What level of support would the area need to embed effective governance mechanisms that facilitate joint working | Would benefit from central information to help understand what good looks like and suggest areas for potential improvement | Governance models have been produced and agreed but external scrutiny and guidance on these will be valuable |

PROVIDER PLAN ALIGNMENT: What level of support is needed to ensure provider 5 year plans are reflective BCF plans

Would benefit from dedicated support in understanding and applying risk sharing mechanisms with the provider landscape

As previously mentioned there are 4 Acute Providers with 4 System resilience plans and this adds a level of complexity in producing an aggregate NEW Devon wide plan which required dedicated support and coordination

PART 3: TECHNICAL CAPABILITIES

DATA AND ANALYTICS: What level of support would the area need to provide the requisite level of data interpretation and analysis?

EVIDENCE-BASED PLANNING: What level of support would the

FINANCIAL PLANNING: What level of support would the area need in order to develop sufficiently robust financial plans that correctly describe the impact of activity changes, and the investments required?

BENEFITS MANAGEMENT: What level of support would the area need to effectively map the benefits of their BCF strategy to ensure a coherent programme the delivers at the scheme level and in aggregate?

OTHER AREAS FOR DEVELOPMENT: Are there any other areas where further development or support is needed?

Would benefit from guidance and an expert point of contact to support improved data understanding and analysis

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Would need a relatively focused training session and some follow-up sessions to help address local financial analysis needs

Cannot complete the task without a dedicated benefits mapping project being run with external help / resource

Need clarity on the potential impact of each of the schemes that will contribute to the reduction in emergency admissions and to assess what is a realistic level of improvement that can be achieved.

Understanding of best practice schemes that have been

We have good relationships across the CCG with the Local Authority around shared vision and are working towards integration with PCC which adds additional complexity into the system. The learning from the Financially Challlenged Economy work will also impact on the ability to develop sufficiently robust financial plans, an the timelines might not run in parallel.

NEW Devon has already recongised the need for this dedicated resource and has already put management support in place - this requires resourcing

Please add any comments here