

Bradford District & Craven: Overview of place and plans

Bradford District and Craven has a large geographic footprint incorporating significant deprivation, some affluence, urban, rural and city living. Our population is one of the most diverse nationally and significant health inequalities still exist across the different areas of the district. People, especially women, live a significant proportion of their lives in poor health and more than 33,000 children live in relative poverty. The District is known nationally for its work in digital healthcare in particular providing 24/7 face to face video consultation.

High level overview of plans

- Prevention and early intervention at the first point of contact with a specific focus on children, obesity, type 2 diabetes, CVD, cancer, respiratory and mental wellbeing
- Creating sustainable, high impact primary care through our primary medical care commissioning strategies and commissioning social prescribing interventions
- Supported self-care and prevention by maximising our community assets to support individuals and train our workforce to empower and facilitate independence
- Provision of high quality specialist mental health services for all ages and early intervention mental wellbeing support services.
- Delivering population health outcomes and person centred care through new contracting, payment and incentives in line with accountable care models elsewhere. This includes specific interventions that transform services to address the physical, psychological and social needs of our population, reducing inequalities and addressing the wider determinants of health.
- Developing a sustainable model for 24/7 urgent and emergency care services and planned care.

Bradford District & Craven: The triple aim

Health and Wellbeing

By 2020/21 we will:

- Reduce childhood obesity by 5%
- Reduce smoking prevalence by 5%
- Train 10% of the workforce to support people to better self-care
- Prevent cardiovascular events for 600 people
- Screen an additional 5500 women for breast cancer
- Screen an additional 1500 people for bowel cancer
- Screen an additional 500 women for cervical cancer
- Recognise and value peoples mental wellbeing and take an early action to maintain their mental health (indicators as per the mental wellbeing strategy 2016-2021).

Care and Quality

By 2020/21 we will:

- Save 150 lives by reducing variation in care
- Reduce non-elective admissions by 4%
- Develop a sustainable care market and create a sustainable model of planned and emergency/urgent care that meets clinical and constitutional standards including seven day services in the 4 priority areas as a minimum.
- Commission primary medical care that ensures seven day access achieved for 100% of population
- Have all-age MH liaison teams in place in all acute providers and meet the "Core 24" standards
- 90% of people who access Psychological Therapies will engage through direct self-referral.
- Ensure 70% of people with diabetes experience the 8 care processes

Finance and efficiency (subject to confirmation of treatment of risk and assumptions)

By 2020/21 we will have implemented plans to close the £221m gap as follows:

- £106.7m of provider and commissioner efficiencies, transforming care programmes in acute and community service areas
- Utilising £18.1m of Sustainability and Transformation Funding (STF)
- Creating the opportunity to shift additional resources into primary care (£1.8m by 2018/19)
- £46.1m of efficiencies through further work on clinical thresholds, procedures of limited clinical value, reducing unwarranted variation and further West Yorkshire opportunities

Through our transforming care programmes we will seek to mitigate the £50m pressure in social care.

Bradford District & Craven: Progress and next steps

Progress so far

- In 2016/17 we established provider alliances, including primary medical care at scale, and together with the commissioner alliance are progressing to our ambition of improving population health outcomes and person centred care.
- Addressing the holistic needs of patients with multiple comorbidities through complex care models across the patch. AWC is a pioneer site and has seen a 2% reduction in non-elective admissions. We are a Vanguard site (Enhancing Health in Care Homes) and are evaluating video consultation in care homes and the Gold Line service for patients at the end of life.
- Developing our first population health outcomes type of contract for Bradford ; accountable care accelerator programme in AWC designing new contracting models .
- Aligned our three CCGs under single accountable officer and chief finance officer with further shared arrangements over the next twelve months.
- Ensured the shift of secondary to primary care activity over the last ten years have been mainstreamed through the PMS review alongside improvements in primary care access .
- Our crisis care concordat and first response services have received national recognition and we have had no mental health out of area placements in over a year.
- We have a nationally recognised digital shared care record across health and social care.
- We have a big lottery funded programme Better Start Bradford aimed at improving life chances for children through a comprehensive programme of interventions and activities which will improve outcomes.

Next steps

- Building on the transformation of complex and enhanced primary care programme, AWC will move to a shadow accountable care system in April 2017 with a 'go live' aim of April 2018.
- Structured collaboration for Bradford out of hospital clinical and social care model commences in September 2016 with intention to create a new contracting model in 2017.
- Procurement of a new model of care for diabetes awarding one outcomes-based accountable care contract in April 2017.
- We aim for a total population coverage of accountable care by 2021.
- Sign off of our mental wellbeing strategy including the Children and Young People's Mental Health Transformation Plans implementation 2016/17 and 2017/18.
- Develop a sustainable care market and a sustainable model of planned and emergency/urgent care that meets clinical and constitutional standards including seven day services in the four priority areas as a minimum for Bradford and Craven that takes account of the West Yorkshire acute sustainability work, workforce challenges and quality standards. Programme scope agreed by Autumn 2017.
- Review investment in Public Health expenditure by December 2016 for implementation with effect from March 2017
- Workforce strategy for the health and care system by December 2016.
- As part of the one public estate programme we will have an estates strategy for the health and care system by March 2017.
- Digital technology strategy for the health and care system by June 2017.