



*Somerset
Clinical Commissioning Group*



**Somerset CCG
Annual Review 2015/2016**

Working Together to Improve Health and Wellbeing

Our Vision

Our vision for health and social care in Somerset is that:

People in Somerset will be encouraged to stay healthy and well through a focus on healthy lifestyle choices and self-care through:

- ▶ building support for people in our local communities and neighbourhoods;
- ▶ supporting healthy lifestyle choices to be the easier choices; and
- ▶ supporting people to self-care and be actively engaged in managing their condition.

When people need to access care or support, this will be through joined up health, social care and wellbeing services.

The result will be a healthier population with access to high quality care that is affordable and sustainable.



Chairman's introduction

I am pleased to report that this year has been characterised by ever closer working and collaboration between Somerset Clinical Commissioning Group (CCG), Somerset County Council, family doctor services, the county's NHS Foundation Trusts, patient representatives and the many community stakeholders. It is only through partnership working that we can expect to solve the problems that face the health and social care system.

Somerset CCG ended the 2015/16 financial year with a budget surplus. This was achieved despite ever increasing demand for services.

This demand is putting pressure on every part of the health and social care system. Somerset's hospitals have struggled to balance their budgets and sustain the national 18 week waiting time standards in some medical specialities, such as hip and knee replacements. The discharge of patients from hospital has been made more challenging by the difficulty recruiting and retaining social care staff to deliver timely care packages to patients.

Family doctor services have also struggled to manage demand, made harder by the difficulty recruiting GP and primary care staff. However, GP practices are adapting and embracing new ways of working, including employing pharmacists and paramedics to support their nursing teams.

The best hope for managing patient demand and balancing NHS budgets is by joining up the delivery of health and social care services and providing more care in the community or the patient's own home.

**GP Practices
are adapting and
embracing new
ways of working**



To support this goal, the Somerset health and social care community have developed an Outcomes Based Commissioning programme known as 'Somerset Together'. Over the next five years this new system will place the emphasis upon keeping patients healthy and use financial incentives to reward local hospital and community service trusts for delivering high quality services and a good experience of care for patients.

Somerset Together will be the vehicle for delivering Somerset's Sustainability and Transformation Plan (STP), the local blueprint required by NHS England to show how the national policy objectives set out in the NHS Five Year Forward View will be delivered locally.

Finally, I would like to thank our staff, clinical colleagues and the many partner organisations whose continued support and commitment is so critical to our current and future success.

Dr Ed Ford
Interim Chairman
Somerset Clinical
Commissioning Group



Who we are

Somerset Clinical Commissioning Group (CCG) is the GP led organisation responsible for the planning and funding of Somerset health services.

We commission health services in collaboration with many partner organisations and ask patients, carers and the public to tell us what they want from their local health services.

Somerset CCG is a membership organisation consisting of all 74 GP practices across the county. The CCG is led by a Governing Body. Its members are responsible for ensuring that the CCG works in the best interests of the local community and spends its £706 million annual budget (2015/16) in a way which delivers high quality services for the best value for money.

A full copy of Somerset CCG's Annual Report and Summary Financial Accounts for 2015/16 can be downloaded from the website at:

www.somersetccg.nhs.uk

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GP Commissioning Localities

Somerset has nine GP Commissioning Localities.

Each locality has a nominated GP who sits on the Somerset CCG

Clinical Operations Group (COG).

The Clinical Operations Group is the 'engine room' for clinical commissioning in Somerset.

Its members act as a clinical advisory group to Somerset CCG and focus on designing programmes and pathways to deliver better services for patients.

GP Commissioning Localities have been at the forefront of designing and testing out new collaborative, person-centred models of care in the South Somerset, Taunton Deane and Mendip areas.

Part of this work involves providing more coordinated care to people with chronic ill health. By providing support to people living with more than one chronic health condition, such as heart and lung disease, diabetes and cancer, they not only improve the quality of life for such patients but also reduce the number of costly and preventable admissions to hospital.

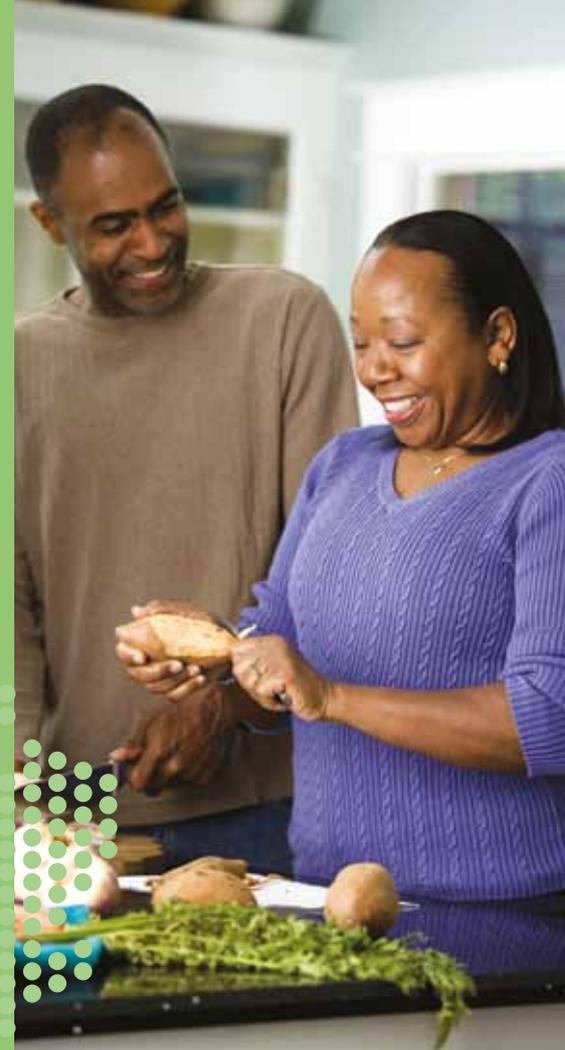
Health in Somerset

Overall life expectancy for people living in Somerset is higher than the national average and deaths from heart disease and cancer are lower than the national average.

Somerset has more elderly people than the rest of the South West region with more than one in five people being over the age of 65. This rises to nearly one in three people in West Somerset. As people live longer so we can expect them to need more support from health and social care services.

If the NHS is to manage the demand for its services people need to take responsibility for their health and do more to treat themselves when they have minor illness or ailments. We also need to close the gap that exists between the health of the wealthiest and the poorest people in the county.

**People need to
take responsibility
for their health**



Our Achievements 2015/2016

2015/16 was a year of significant achievement for Somerset Clinical Commissioning Group (CCG), our partners and service providers.

- We worked collaboratively in order to deliver joined-up health and social care services.
- We developed community health services and community hospitals so they deliver more care in the community and in the patient's own home.
- We developed more integrated urgent, emergency care and GP out-of-hours services.
- We improved access to district hospital services.
- We reduced the length of time patients wait for routine hospital treatment.
- We improved patients' experience of services and reduced the risk of preventable harm.

Here are some examples of our achievements during 2015/16.

- High levels of patient satisfaction were maintained throughout the healthcare system. Friends and Family Test results are now helping to drive up quality standards and are showing those areas of service where improvement is necessary.
- Out-of-Hours Urgent Care services and the free telephone helpline, NHS 111, were re-commissioned with Somerset Doctors Urgent Care taking over the contract in July 2015. The integrated service has improved performance and increased patient satisfaction.



→ Extensive patient and public engagement was undertaken to prepare the vision and business case for a new Health and Wellbeing Campus for Shepton Mallet. The scheme is intended to bring together the services of the community hospital, Shepton Mallet Treatment Centre and a relocated Grove House Medical Centre onto the community hospital site. The planned scheme is developing well with the expectation that the business case and funding will be progressed in 2016.

→ Somerset's two district hospitals, Musgrove Park Hospital and Yeovil District Hospital, performed well against the maximum four hour Accident and Emergency waiting time standard. This was despite high demand last winter and a general rise in the number of patients attending Accident and Emergency.

→ South Somerset's Symphony scheme was one of only 29 schemes to achieve first wave 'Vanguard' status and is testing new models of care to support patients with multiple long-term health conditions.

→ Test and Learn pilot schemes are also testing new models of care for the people of Taunton Deane and Mendip.



High levels of patient satisfaction were maintained throughout the healthcare system

→ We have started a significant programme of engagement around the 'Somerset Together' programme. The views of patients and the public were gathered in order to understand what positive 'outcomes' in patient care would look like and what sort of change would be needed to existing health service configuration to make this possible. This work will continue to gather pace in 2016/17.

→ Once again Somerset CCG achieved financial surplus by the end of the 2015/16 financial year. This amounted to £6,484,000 and was in line with the CCG's plans.

More comprehensive details of these and other important Somerset CCG achievements can be found in the 2015/16 annual report. This is available to view or download from:

www.somersetccg.nhs.uk/publications/annual-report/



Mental Health and Learning Disability Services

This year Somerset's Child and Adolescent Mental Health Services (CAMHS) transformation plan was published. The plan describes the development of increased services for the emotional wellbeing of children and young people. This includes investment in specialist eating disorder services, support to 'looked after children', support to schools, services for survivors of sexual abuse, the development of a single point of access to services, improved websites and materials for children and young people as well as dedicated commissioning capacity for CAMHS.

Somerset CCG has continued to lead the response to the Mental Health Crisis Care Concordat with its multi-agency partners. The concordat is a national agreement that sets out how organisations will work more effectively together to make sure that people get the help they need when they are having a mental health crisis.

Extra money has been spent on hospital care to ensure that people experiencing a mental health crisis are never inappropriately placed in a police cell as a 'place of safety'.

There has been a continued focus on dementia and encouraging early diagnosis of the disease. The CCG also consulted widely to develop a refreshed dementia strategy for 2016/17.

The CCG, in partnership with Somerset County Council, has led the development of a transformation plan for learning disability services. The focus is upon ensuring people with a learning disability are cared for as close to home as possible. Hospital care should only be an option in the most challenging circumstances. People with learning disabilities should be empowered and in control of all the support that they receive.

At the same time Somerset County Council and Somerset CCG established a joint project board to recommission the existing "in-house services" for people with a learning disability. This work is on target to deliver a new model of care in 2016/17.

Urgent and Emergency Care

Somerset's urgent and emergency care services are continuing to see a steady rise in demand across every part of the health and social care system. On two occasions this year the health and social care system, which includes district hospitals, community

health services, GP practices, the ambulance service and social care services, experienced exceptionally high levels of demand.

Working together, all partner organisations took immediate action that successfully overcame the peak in demand. A range of schemes were put in place over the winter period to manage the increased demand. These included:

- An Older People's Assessment and Liaison Service was created at Musgrove Park Hospital, acute medical care beds were reconfigured and neuro-rehabilitation patients transferred to Dene Barton Community Hospital.
- More hospital beds were put in place at Yeovil District Hospital.
- More services to support patients were put in place by Somerset County Council's Adult Social Care service.



Treatment Waiting Times

Delivering the national 18 week waiting time standard for patients is important. Most Somerset patients waiting for routine hospital treatment were seen within 18 weeks of being placed on a hospital consultant's waiting list. However, in 2015/16 some



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patients waiting to have eye surgery, hip replacement surgery and the diagnosis and treatment of skin conditions took longer than 18 weeks. Somerset CCG has been working with local hospitals to ensure low waiting times are sustained.



Early Diagnosis of Cancer

More people now survive cancer, but many more could live longer if they had an earlier diagnosis and treatment of the disease. Somerset GPs and hospital specialists agreed a county wide plan to enable more patients to be diagnosed earlier and therefore improve outcomes.

Two practice nurses completed the Macmillan Cancer Support funded training in cancer nursing. They visited practices across Somerset to advise on cancer related issues. Since October 2015 they have visited 22 practices and are increasing the cancer nursing expertise for patients in primary care.



Friends and Family Test

Somerset CCG has continued to use feedback from patients as an indicator of the quality of the services we have commissioned.

The Friends and Family Test (FFT) asks patients if they are satisfied with the service



holistic

*joined-up
care*

*near to
home*

*quick
courteous
responsive
compassionate*

treatment from the NHS 111 or GP out-of-hours urgent care service. Complaints were also received about end-of-life care and the difficulties experienced by families when applying for NHS continuing healthcare funding.

Patients and their relatives also provide complimentary feedback when they have had a good experience of care. Patients said they valued compassionate, responsive, quick, courteous, holistic, joined-up care, delivered as near to home as possible.

they have used and if they would recommend it to a friend or family member. We review this FFT feedback, particularly in relation to patients attending hospital A&E, outpatient and maternity services. By bringing feedback together from other sources, including patient surveys, Healthwatch Somerset, Patient Participation Groups, complaints, the Patient Advice and Liaison Service (PALS), GPs and the voluntary sector, we get a clearer picture of service quality.

The key themes arising from FFT data and wider patient experiences are discussed with local hospital and community health service providers. Learning points are identified and acted upon.



Complaints

We recognise that people who complain need clear answers to their concerns and we strive to provide a personal service when handling each person's complaint. As part of the All Party Parliamentary Group (APPG) review of complaints handling in the NHS the Patient's Association highlighted Somerset CCG as an exemplar of the way complaints should be managed in the NHS.

We value all the feedback received from complaints as an important source of understanding what aspects of service need to be improved. The most common complaints related to delays in receiving



Harm Free Care

Somerset CCG supports the national 'Sign Up to Safety' campaign. The campaign aims to reduce preventable injury or harm from:

- ➔ Pressure ulcers
- ➔ Falls
- ➔ Acute kidney injury
- ➔ Sepsis
- ➔ Information sharing
- ➔ Medication safety

We have extended the campaign to help people understand how to make sure their healthcare is safe. This information is now

being shown on video screens in GP waiting rooms. The accompanying leaflet is available on the CCG's website:

www.somersetccg.nhs.uk/publications/patient-information/

Care Home Medicines Review Project

Somerset CCG has some of the most cost effective and safe prescribing in the country. During 2015/16 we expanded the number of GP practices using the Eclipse Live Safe Prescribing Alert System and continued working with GPs to ensure 25% of Somerset patients in care homes had a specialist review of their prescribed medicines by a pharmacist. Somerset CCG also continued to work with GP practices and patient groups to empower patients so they are more able to care for their minor ailments rather than expecting their GP to write them a prescription.

Safeguarding Children

NHS organisations in Somerset collaborate closely with the Somerset Safeguarding Children Board to improve the quality of safeguarding by:

- ➔ hearing the voice of the child to inform practice improvements;

- ➔ adopting the 'Think Family' approach to identify hidden harm to children and young people; and
- ➔ embedding the 'Thresholds Guidance' for assessment, thereby prompting early help rather than referral to children services.

Healthcare acquired infections

All providers of healthcare have to show that they meet infection prevention and control standards and take steps to continuously reduce hospital acquired infection rates. Somerset CCG works with our hospital and community service Trusts to ensure any lapses in infection prevention and control are identified and lessons learned to reduce the risk of infection occurring again. The position in 2015/16 for healthcare acquired infections in Somerset was as below:

MRSA

- ➔ Five cases of MRSA (antibiotic resistant bacteria) were reported to Somerset CCG, and three were found to be unavoidable following post infection review.

Clostridium Difficile

- ➔ All NHS Trusts were set very challenging targets for reducing Clostridium Difficile.



All NHS Trusts were set very challenging targets for reducing Clostridium Difficile

By the end of 2015/16 Somerset CCG recorded a total number of 159 cases against a target of 131 cases for the year.



We are helping more women to stop smoking in pregnancy



End of Life Care

A key feature of the new National Institute for Health and Care Excellence (NICE) guideline on care of dying adults in the last days of life is shared decision making. Somerset CCG continues to promote this

approach through the work of the End of Life Care Programme Board, an updated End of Life Care Strategy for the county and the ongoing quality improvement project widening the reach and effectiveness of Advance Care Planning.



Maternity

The quality of maternity services is overseen by Somerset's Maternity Services Liaison committee (MSLC). The committee includes representatives from midwifery services, public health, medical staff and local mothers.

As part of the Somerset MSLC work programme we have committed to implementing the objectives set out in NHS England's strategy document, 'Saving Babies Lives'. This approach is designed to reduce stillbirth and early neonatal death. Taunton's Musgrove Park Hospital is committed to being an early implementer of the 'Care Bundle' and started this work in April 2015. We have focused on helping women to stop smoking in pregnancy.

More pregnant women have set quit smoking dates in Somerset than anywhere else in the region in the first half of the year.

Our priorities next year include improving the continuity of midwife care in the antenatal and postnatal period. Feedback from our Friends and Family Test indicate lower levels of satisfaction with postnatal care. The CCG also wants to ensure there are appropriate services for women who experience mental health problems during and after their pregnancy.

Somerset CCG is committed to promoting equality throughout the NHS and enabling patients, carers, NHS staff and the public to influence the development of our strategic plans and services. This is a legal responsibility under the Equality Act 2010.

Our work is driven by our commitment to commission the right services that meet the needs of our population in Somerset.

We continue to listen to the views of patients and service providers through local Health Forums, Patient Participation Groups (PPG), the PPG Chairs Network and the Somerset Engagement Advisory Group.

Promoting **Equality** and **Engaging** with Patients

Patient representatives have contributed to the development of the Somerset CCG Five Year Strategy, the county's Community Services Review, the Somerset Together programme and the content and use of the Somerset Choices social care website.

The Equality Act describes nine protected characteristics. The CCG has demonstrated specific improvements for people of different ages and disabled people, for example,

by delivering personalised care planning for people with chronic health conditions.

As an employer, Somerset CCG has continued to prioritise equality and diversity within our workforce. Our corporate equality objectives are published as part of our four-year Equality, Diversity and Patient Engagement Strategy (2016-2020) at: www.somersetccg.nhs.uk/about-us/how-we-do-things/equality-and-diversity/



How we Spend **Your Money**

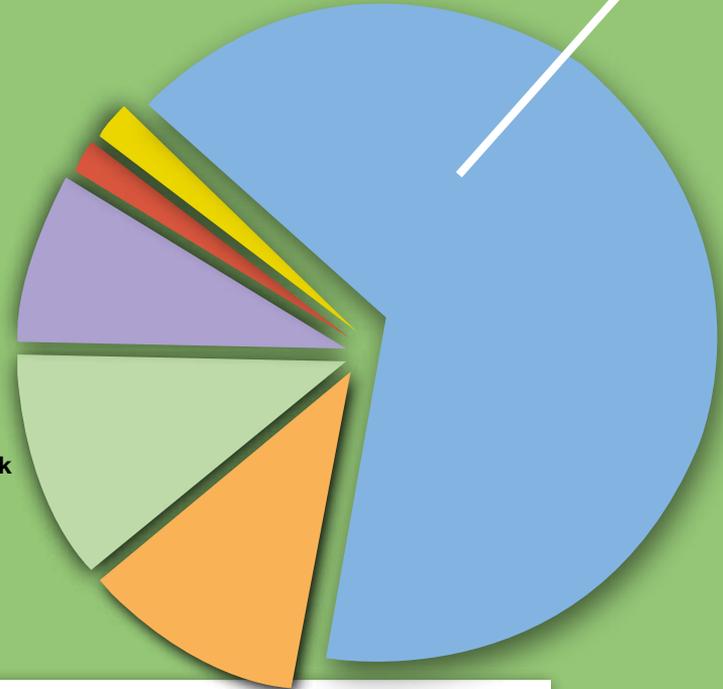
Somerset CCG's budget for 2015/16 was £705,664,000.

This pie chart sets out how Somerset CCG spent its budget during 2015-16:

Our financial plans for 2015/16 included a planned budget underspend. This budget surplus amounted to £6.484 million.

There is more detailed information about how Somerset CCG spent its budget in the 2015/16 annual report.

This is available on the Somerset CCG website: www.somersetccg.nhs.uk



Secondary Care Commissioning

£467,026,000



Primary Care Prescribing

£78,669,000



Community Services

£76,928,000



Continuing Care & Funded Nursing Care

£58,141,000



Other Programmes

£13,069,000



Running Costs

£11,831,000

Total = £705,664,000

KEY

● Secondary Care Commissioning

● Primary Care Prescribing

● Community Services

● Continuing Care & Funded Nursing Care

● Other Programmes

● Running Costs

A photograph of a field filled with numerous golden haystacks, likely made of straw or hay, arranged in rows. The haystacks are tall and conical, with some showing the texture of the dried grass. The background shows a line of green trees under a bright sky. A blue text box is overlaid in the top right corner.

**Somerset CCG's
budget for 2015/16
was £705,664,000**

Our **Five Year Plan**

In October 2014 NHS England published its national plan called the “Five Year Forward View”. The plan aims to encourage people to look after their health, and also aims to develop new models of care which are expected to relieve demand upon hospital and community health services by delivering more health care in the community and even in the patient’s own home.

Somerset CCG’s Five Year Plan 2014/19 shares the same aims as the national “Five Year Forward View”. It too sets out plans aimed at preventing ill health by encouraging

Health and social care services in Somerset need to become more joined-up





people in Somerset to stay healthy. It is only by reducing the level of chronic illness, mostly caused by a lifetime of unhealthy diet and lifestyle, that we can hope to reduce future demand upon the NHS.

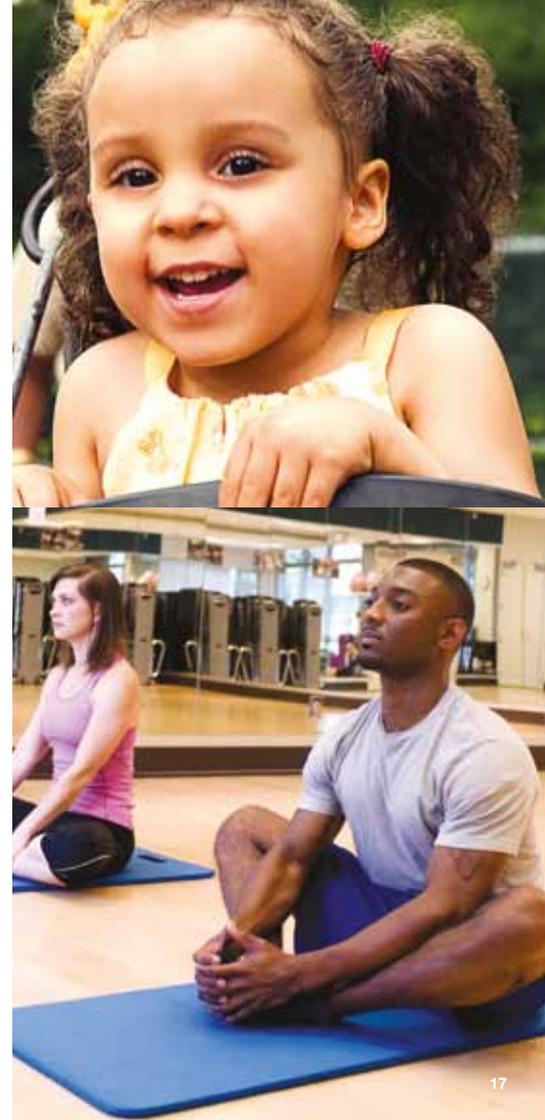
To deliver real service change we have to think about the whole health and social care system and take steps to ensure this works in a more joined-up way.

The NHS continues to receive a 'real terms' increase in its annual budget (£705m). This is not sufficient to meet the growing level of patient demand for health and social care. Somerset has a rapidly ageing population who will need more health care as they get older. Health and social care services in Somerset need to become more joined-up and focused upon meeting the individual needs of patients if they are going to satisfy this demand.

More care will need to be provided in the community or the patient's own home if Somerset CCG is going to make the required cost efficiency saving of £40 million pounds a year.

You can read our five year strategy at:

[www.somersetccg.nhs.uk/
publications/strategies-and-plans/](http://www.somersetccg.nhs.uk/publications/strategies-and-plans/)



The Future Shape of Health and Social Care



The NHS needs to change if it is to be sustainable and financially affordable in future years.

Demand upon the NHS is caused by a number of different factors. The number of

**...help people
become more
confident to
manage their
own health...**

older people living with chronic health problems is rising and this is placing more demand upon local health services. Somerset is also facing a serious shortage of GPs, hospital doctors, nurses and therapists.

A third of GPs in Somerset will be able to retire in three to five years' time and this shortage could mean patients will need to see a specialist nurse or therapist when they visit their GP surgery rather than a GP. Somerset CCG continues to receive a small increase in its funding each year but this is not enough to keep up with the rising level of demand.

In response to these challenges Somerset CCG is working with all its health and social care partners to develop a sustainable model of service for the future. It is called "Somerset Together".

The Somerset Together programme aims to help people become more confident to manage their own health, thereby relieving demand upon GP and hospital services. It also plans to introduce a different way of funding local hospital and community health services, called "Outcome Based Commissioning". This will provide hospital and community health Trusts with more

financial stability as they move away from annual health contracts to 'capitated' budgets. This is a way of funding services based upon the care provided to a specified population.

Over the past year, Somerset CCG and Somerset County Council have been working together with health, social care and voluntary sector providers to develop a clear vision which supports a move to joined-up, integrated health and social care services for people.

Somerset CCG's Governing Body approved the business case for the Somerset Together programme of work in July 2015.

Somerset CCG is now entering the next phase of the programme to work to:

- ➔ develop the financial framework;
- ➔ assess the capability of local NHS Trusts;
- ➔ develop new contractual agreements; and
- ➔ continue to engage with the public and NHS hospital and community health Trusts to support the move to an outcome based commissioning model.

Somerset Sustainability and Transformation Plan

In Somerset the CCG, local authority, NHS Trusts, primary care and patient representatives are developing a local, system wide, five year health and social care plan, called the Sustainability and Transformation Plan (STP). It is a local blueprint to deliver the national policy objectives set out in the Five Year Forward View.

For the NHS to meet the future needs of patients in a sustainable way, we need to close the gaps in health, finance and quality of care between where we are now and where we need to be in 2020/21. The Somerset STP will be addressing these issues in 2016/17.



This guide can also be provided in Braille, audio cassette disk, large print or other languages on request by phoning 01935 385240

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Эта листовка доступна в русском языке, по телефону **01935 385240**

为这个通报在广东电话 **01935 385240**

Get Involved

If you would like to know more about the work of Somerset Clinical Commissioning Group or find out how you can get involved and shape your local health services contact:

**NHS Somerset CCG
Wynford House
Lufton Way
Yeovil
Somerset BA22 8HR**

T 01935 384000

E enquiries@somersetccg.nhs.uk

www.somersetccg.nhs.uk

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