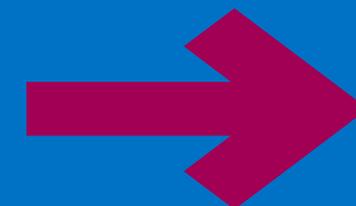# Developing Accountable Care Systems in England

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NHS England

November 2017

The Five Year Forward View identified three gaps to securing long-term sustainability for the NHS in England

Health and Well-Being Gap

"If the nation fails to get serious about prevention then recent progress in healthy life expectancies will stall, health inequalities will widen"

Care and Quality Gap

"Unless we reshape care delivery, harness technology, and drive down variations in quality and safety of care, then patients' changing needs will go unmet"

Funding and Efficiency Gap

"If we fail to [deliver]… system efficiencies, the result will be some combination of worse services, fewer staff, deficits, and restrictions on new treatments.

We are delivering the Forward View by supporting new care models and implementing clinical strategies

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New Care Models enhanced collaborations between providers and care settings

- 50 Vanguards; 5 care models
  - Multispecialty Community Providers
  - Primary and Acute Care Systems
  - Enhanced Health in Care Homes
  - Acute Care Collaborations
  - Urgent and Emergency Care
- 25 Integrated Care Pioneers
- 22 Acute Medical Model District General Hospitals
- 15 Primary Care Homes

Clinical strategies provided detailed implementation plans in priority areas

- Urgent and Emergency Care Review
- Mental Health Forward View
- Cancer Task Force
- General Practice Forward View
- Maternity Forward View

Closing the three gaps, supporting new care models and implementing clinical strategies all require partnerships to address systemic problems

What do new care models mean for patients?

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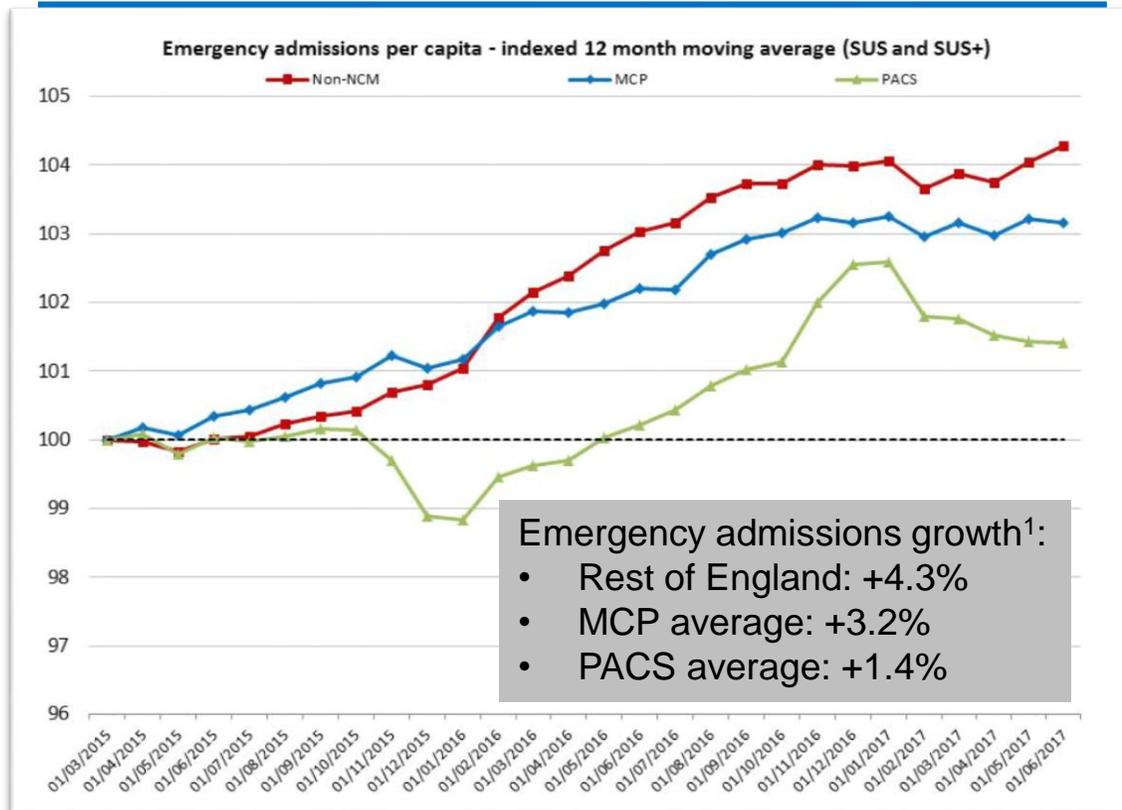| Better case management	• Mid-Nottinghamshire: Alliance of 13 health, social care and voluntary sector organisations • Professionals work together in newly formed integrated teams to support patients experiencing complex conditions. Patients are, on average, spending less time in hospital (bed days), generating £20m in recurrent annual savings to the local health and social care system.
Specialist care closer to home	• Foundation Health Group (Guy's and St Thomas' and Dartford and Gravesham NHS Trusts) alliance. • Provides specialist services closer to where people live. 300+ ultrasound angiology diagnostic scans provided at Darent Valley Hospital (June 2016-April 2017), saving around 14,000 patient travel miles.
Flexible access to specialist support	• Morecambe Bay integrated primary and acute care system. • Electronic advice and guidance system available across 16 specialities enabled patients to seek specialist support without being referred to secondary care (1,668 referrals avoided).

What do new care models mean for the healthcare system?

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PACS and MCPs have seen slower growth in emergency admissions…

Emergency admissions per capita - indexed 12 month moving average (SUS and SUS+)

Legend: Non-NCM, MCP, PACS

Emergency admissions growth[1]:
- Rest of England: +4.3%
- MCP average: +3.2%
- PACS average: +1.4%

…and EHCHs have seen *reduced* admissions

Emergency admissions growth from care home residents[2]:
- Rest of England: +5.3%
- EHCH Vanguards: -0.9%

1. For the 12 months to Q1 2017/18, compared to the base-line year 2014/15. 2. For the 12 months to Q1 2017-18, compared to a baseline period of Q3 2014-15 to Q2 2015-16.

National priorities: Progress and next steps

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Cancer	Mental health	Urgent and Emergency Care	Primary Care

Progress

7000+ more people surviving cancer	2/3 country covered by criminal justice liaison	23 million patient visits to A&E in 16/17	Service for GPs suffering mental ill health
Fast track cancer drug fund	3x fall in use of police cells as places of safety	NHS 111 takes 15 million calls each year	Modernising GP buildings and IT
1.7 million urgent referrals from GPs	2/3 increase in Dementia diagnosis rate	Expanded 'head and treat' & see and treat ambulance service	Funding up by 8% over the past 3 years

Next steps

Speed up & improve diagnosis	60,000 more people with access to therapies	Free up 2-3,000 hospital beds	Access to evening & weekend appoints by Q4 18/19
5,000 more people to survive cancer over the next two years	280,000 extra health checks	Roll out standardised UTC	By 2020/21 5,000 more doctors
Largest radiotherapy equipment update in 15 years	24 hour MH liaison teams availablele in more A&Es	Increase number of clinically assessed 111 calls	Six million patients to benefit from locating pharmacies with GPs

Sustainability and Transformation Partnerships aim to spread new ways of working to the rest of England

44 Sustainability and Transformation Partnerships (STPs) bring commissioners and providers together to improve services within their share of the budget.
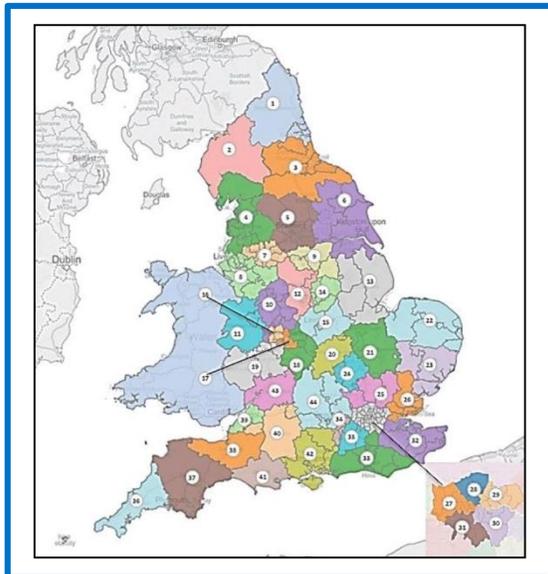
What is a STP?
- Formed by NHS commissioners and providers in their area (including primary care), local government, and third sector organisations
- Not a new statutory body, but enhances joint working between existing organisations
- Serves a population ranging from 0.3 to 2.8 million
- Has a single named leader in a place

What will STPs provide?
- A cultural shift towards systems leadership
- A platform for providers and professionals in a region to begin working together

How will we assess the progress of STPs?

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STP areas will have the following responsibilities:

Health and wellbeing gap	• Radically upgrade prevention and patient activation • Improve choice and control • Improve community engagement
Care and quality gap	• Develop or expand new care models • Improve performance against clinical priorities • Roll out digital care delivery
Finance and efficiency gap	• Achieve financial balance across the local health system • Improve the efficiency of NHS services

STPs provide a view to the public about how health and social care services in their area are performing

- Proposals need to be locally owned, clinically led and publicly supported

- STP leadership teams are accountable to their population for the performance of the local system

- The public will have the opportunity to engage and provide feedback on STP plans

- The STP progress dashboard provides a baseline view of the progress of every STP to date, tracking hospital performance, patient-focused change and transformation

STP progress dashboard - baseline view

- Category 1: outstanding
- Category 2: advanced
- Category 3: making progress
- Category 4: needs most improvement

There is considerable variation and complexity between STPs. We are delivering targeted support to all systems.

We are moving some areas of the country to population-based models of care faster

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- Accountable Care Systems (ACS) are:
  - A more formal approach to collaboration between providers in their area
  - Embedding system accountability for population health
  - Taking on greater control over the allocation of resources in their area

The 8 ACS and 2 devolution areas have demonstrated:
- *Effective leadership and relationships*
- *Track record of delivery*
- *Strong financial management*
- *Coherently defined population*
- *Focus on care redesign*

Accountable Care Systems across England

Key
1. South Yorkshire and Bassetlaw
2. Frimley Health
3. Dorset
4. Milton Keynes, Bedfordshire and Luton
5. Nottinghamshire
6. Blackpool and Fylde Coast
7. West Berkshire
8. Buckinghamshire

Devolved areas
9. Greater Manchester
10. Surrey Heartlands

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Built using data from ONS geoportal
For further information contact the england.fiveyearview@nhs.net or Aidan.Mundy@nhs.net

9+ million people

We will add to the cohort of ACSs as more STPs, or parts of STPs, become ready to take on more accountability

Accountable Care Systems will have greater freedom, in exchange for enhanced accountability

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Accountable Care Systems will:

1. Accelerate the delivery of national priorities;
2. Develop a population-based model of healthcare, backed by rigorous analytical capability;
3. Operate within a shared system control total, with greater flexibility over the allocation of funding;
4. Create an effective collective decision making and governance structure;
5. Establish clear mechanisms for patient choice.

The NHS national bodies will :

1. Devolve a transformation funding package;
2. Create a single 'one stop shop' regulatory relationship with NHS England and NHS Improvement;
3. Enable the ability to redeploy staff from NHS England and NHS Improvement to support the work of the ACS.

Accountable Care Systems will deliver national priorities

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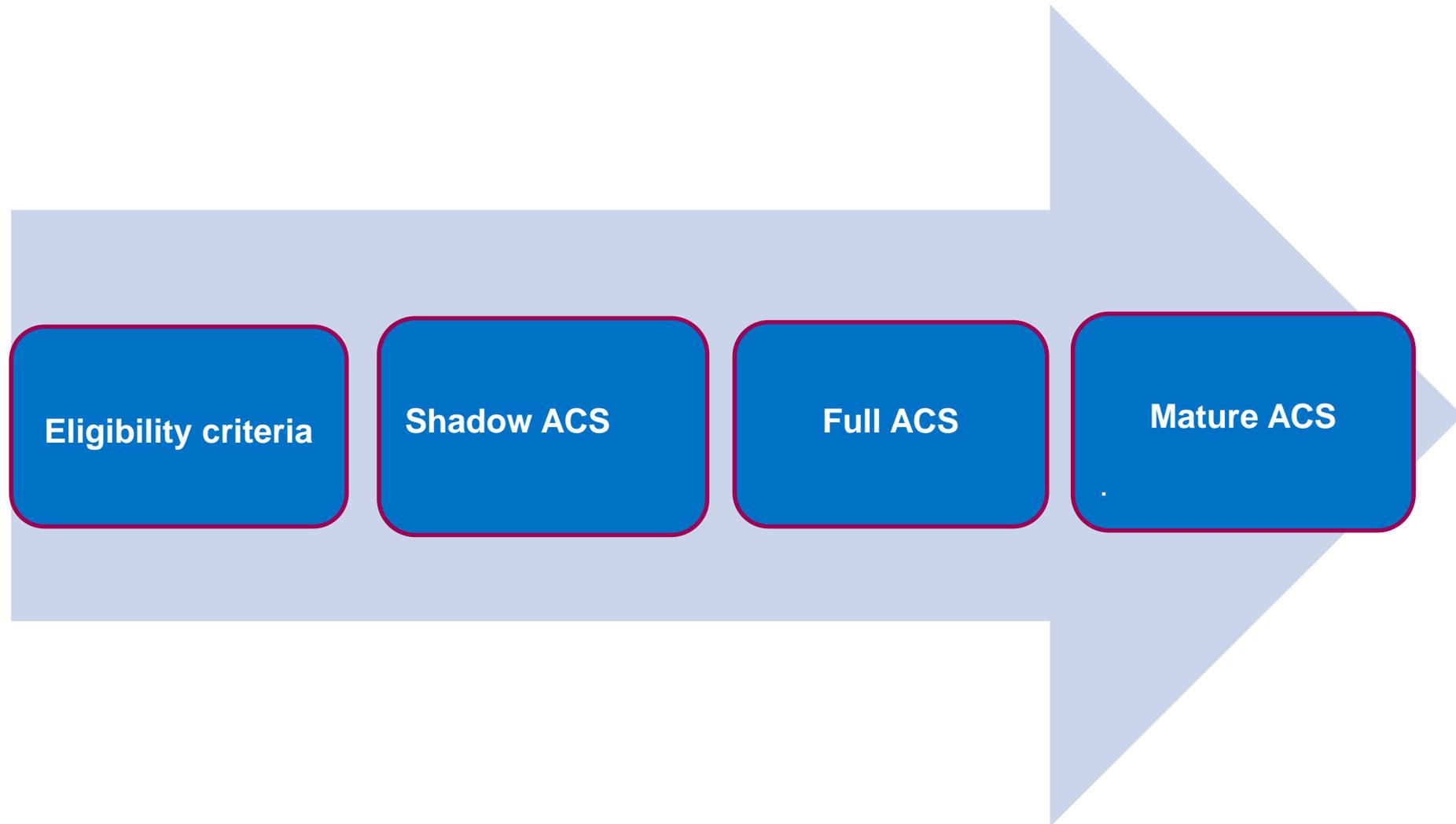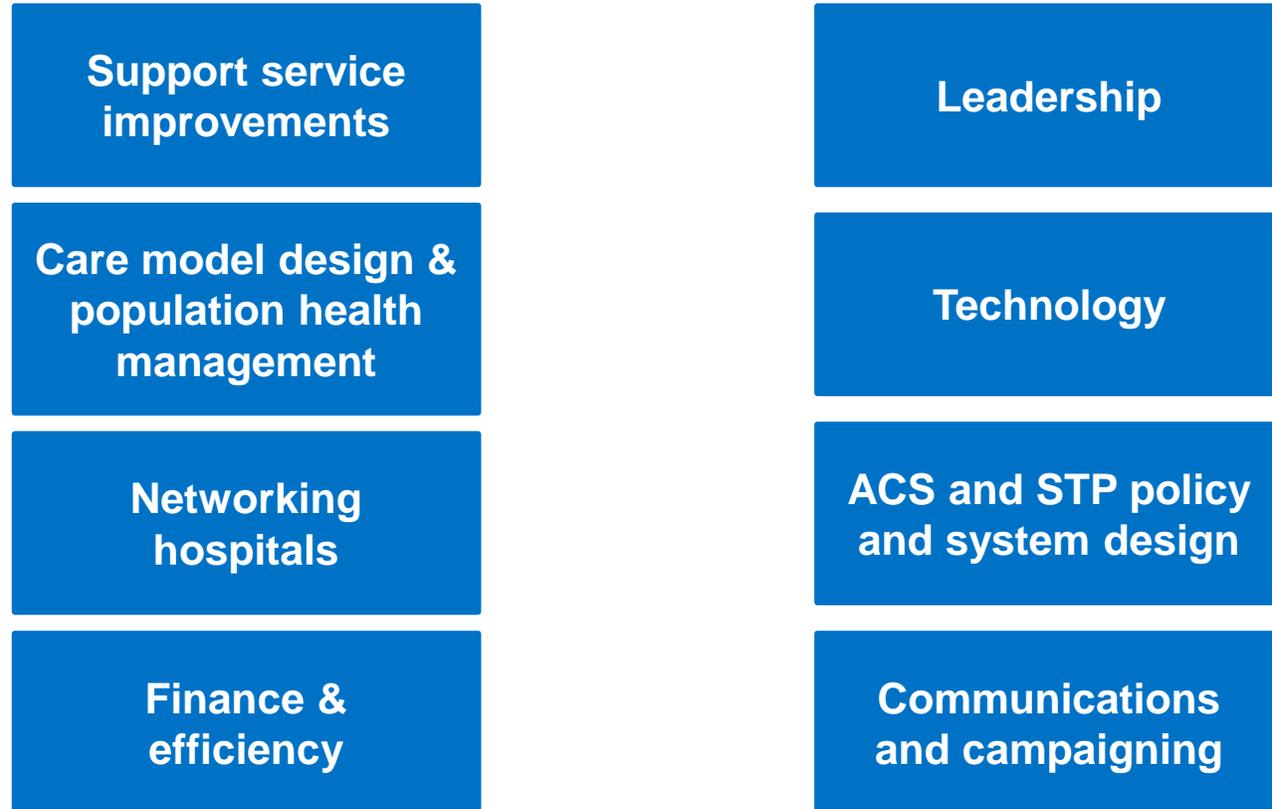| Urgent and emergency care	• Improve access to urgent treatment centres • Greater co-ordination with social care to improve discharge
Primary Care	• Form primary care networks that share workforce, infrastructure and pool responsibility for urgent care and extended access • Increase use of integrated, multidisciplinary teams in primary care
Mental Health	• Improve access to psychological therapies, including for children and young people • Develop 24/7 community crisis response and home treatment teams • Increase physical health checks for people with severe mental illness • Improve early diagnosis with new screening technologies and programmes • Develop specialist perinatal mental health provision
Cancer	• Increasing survival rates, expanding screening and faster treatment • Improving patient experience and quality-of-life following cancer diagnosis and treatment

Systems are on a journey

Eligibility criteria → Shadow ACS → Full ACS → Mature ACS

Support is for Accountable Care Systems is focused on six key areas

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Support service improvements	Leadership
Care model design & population health management	Technology
Networking hospitals	ACS and STP policy and system design
Finance & efficiency	Communications and campaigning

All workstreams are co-led by ACS sites, NHS England and NHS Improvement