



MSECC Community Services

Demonstrating our Impact, Productivity & Value

MSECC Joint Committee

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The Impact, Productivity & Value of Community Services Context

'The health and care system in England must shift its focus away from hospital care to primary and community services if it is to be effective and sustainable'*

'Community providers, and their staff, will be instrumental in creating a meaningful shift towards delivering more care close to home....it will mean building on the impressive work being done by community providers and ensuring that this is underpinned by the right national funding, staffing and data'**



The Impact, Productivity & Value of Community Services

Context cont'ed

- Systems that invested more in community care saw 15% lower non-elective admission rates and 10% lower ambulance conv. rates (statistically significant)***
- Currently no relationship between the amount invested by NHS organisations in community care and their population community care needs***
- Current lack of national guidance/prioritisation on
 - Core service offer and investment shift expectations
 - System impact measures, productivity or value quantification of community services
- New MSECC contract reference, but no agreed mechanism for investment shift
- Longer term need for Strategic Review of MSE wide need and model of community services



The Impact, Productivity & Value of Community Services MSECC

- Development of single document, aiming to:
 - Demonstrate our system impact and productivity
 - Demonstrate value (productivity + impact = value)
 - Demonstrate delivery on our contributions to system financial recovery
 - Presents impact on quality
- Internal and external purpose incl. Accountability Framework (AF) review meetings
- Key metrics in relation to
 - Community & stroke beds, Virtual Wards, Urgent Community Response Team and community nursing
- Presents a single currency model (Occupied Bed Days saved)
- Data updated on a monthly basis, aligned to the AF reporting cycle.
- Active developing document, with further planned iterations to follow

MSECC
Impact, Productivity &
Value Report

Version 4a



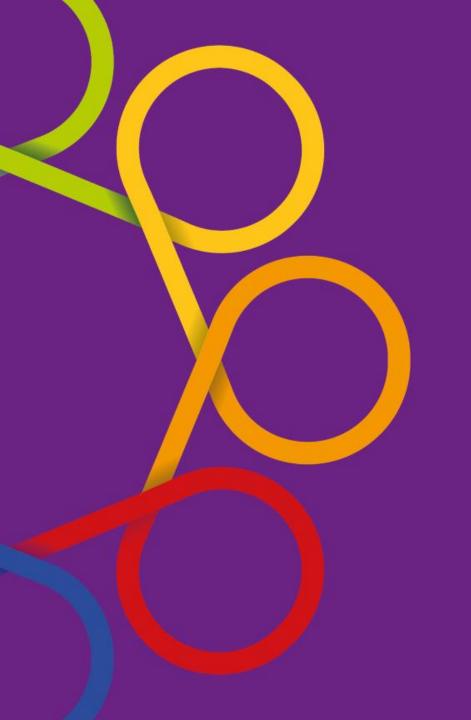
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The Impact, Productivity & Value of Community Services

Next steps

- Seeking system support
 - Feedback from internal and ICB colleagues
 - Socialise report at variety of internal and system forums
 - Agree modelling with ICB
- Understanding national agenda
 - Quarterly meetings with NHSE's national team (post PC Innovator Scheme)
 - Kawan Patel Dep Dir Provider Collaboratives and Provider Policy, NHSE
 - Paul Myatt Strategy & Policy Lead NHSE
 - National Community provider network
 - Collaboration with North Central London
- Further development of the document
- Agree next steps with ICB to facilitate left shift





Questions