West Lancashire CCG

Local Delivery Plan presentation to Health and Well Being Board

20th March

Paul Kingan, Chief Finance Officer / Deputy Chief Officer

12,000 population

8 GP practices

hree eighbourhoods:

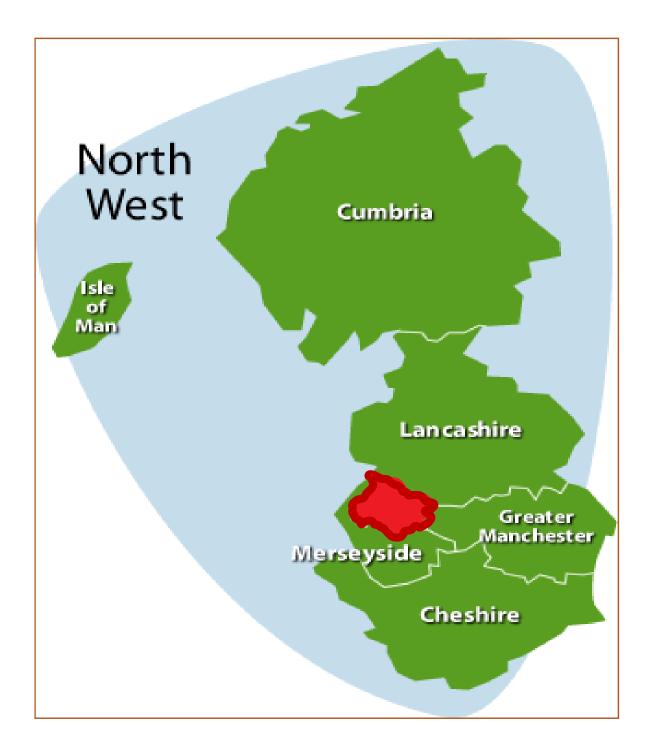
rmskirk and ughton

kelmersdale

urscough and lorthern parishes

163m Funding Ilocation

1,455 per person



Merseyside from a West Lancs perspective

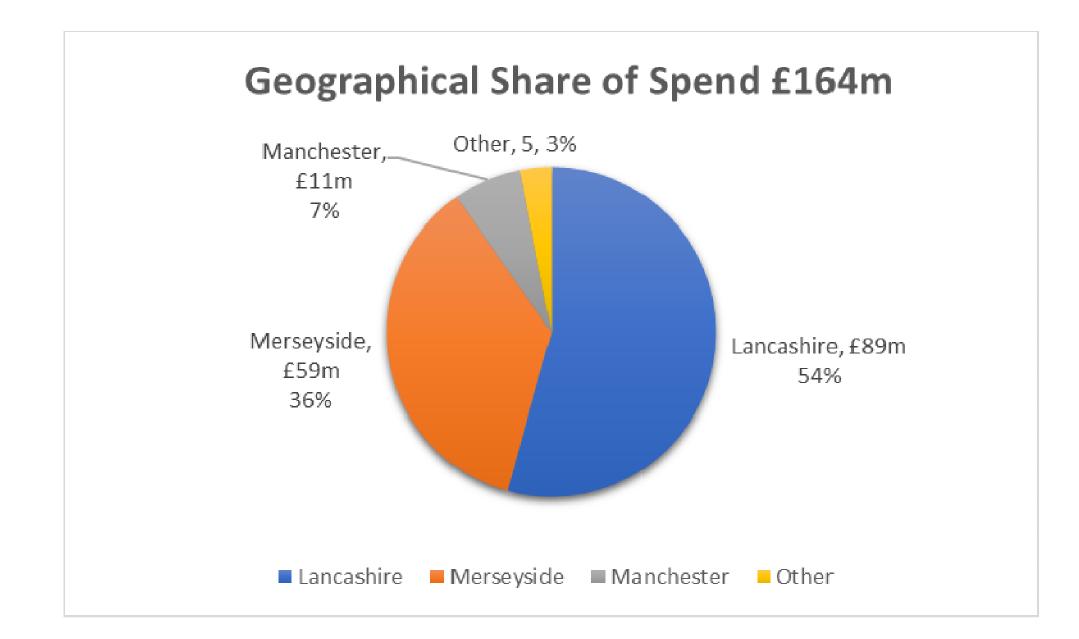


- Acute patient flows are largely towards Merseyside (Southport Hospital) - but also Greater Manchester (Wigan)
- Urgent Care Board (A&E and Emergency Care) is North Mersey
- Cancer and end of life care
- Maternity and children's vanguard

Lancashire from a West Lancs perspective



- County and district councils
- Public health and social care
- Third sector network
- Mental health, largely in Lancashire
- Community health services
- GPs in Lancashire
- Regulated care sector in Lancashire
- Out of Hours GP and Walk in Centres
- Ormskirk site in Lancashire
- Edge Hill University

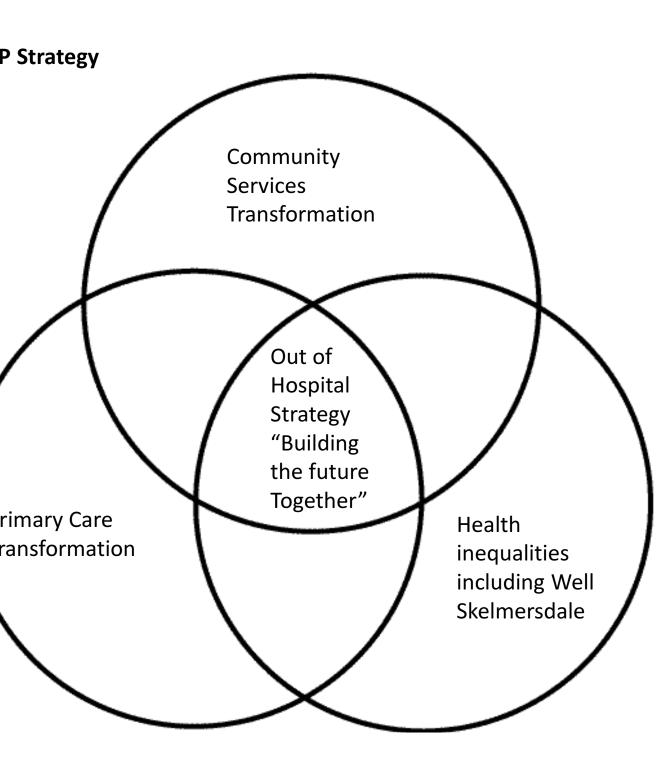


Our key focus is the Out of Hospital strategy

"Health is a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity" World Health Organisation 1948

$Our\ {\rm population}$





Features :

Integrated Services Neighbourhood teams Single point of Access Wider determinants of ill health Prevention and social prescribing e.g Active Ageing Alliand

Early years health Health, Social care and multi-agency Strong third sector involvement Wellness as well as ill health Community resilience and asset utilisation Mental health parity with physical health Targeting hotspot areas and health inequalities Risk Stratification

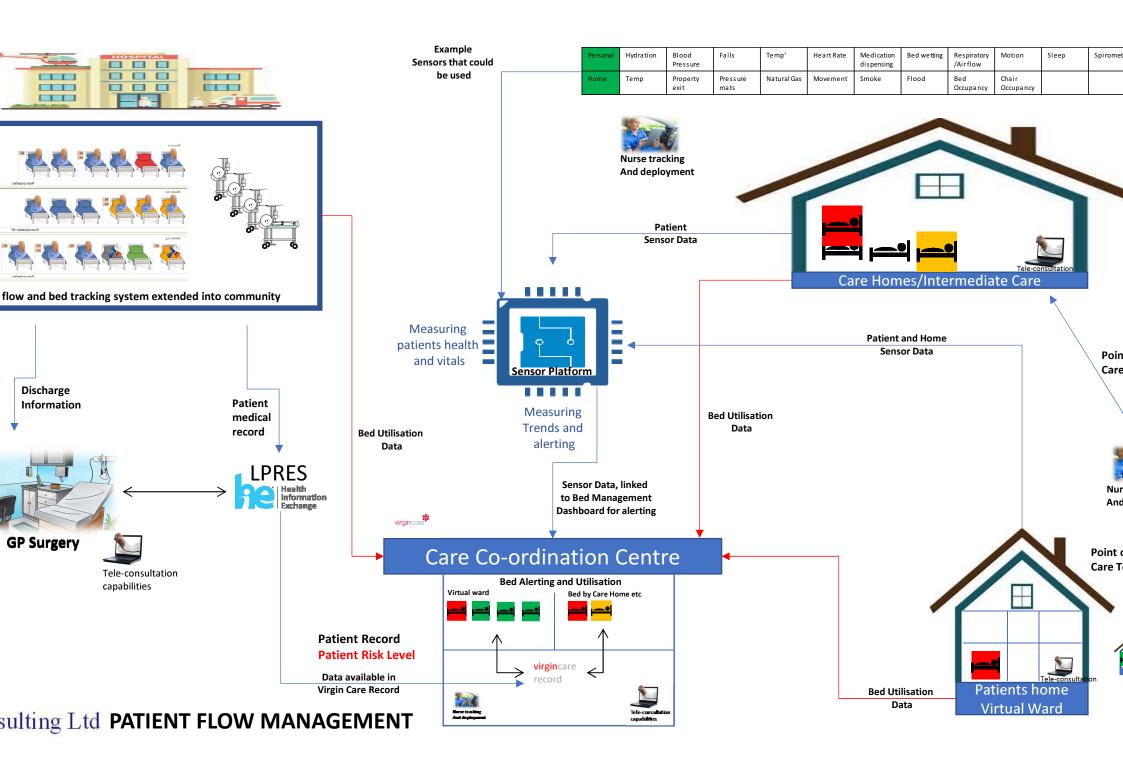
Flexible workforce

Catalysts:

- New Community provider -
- New buildings for co-location of services
- Well Skelmersdale
- GP Federation
- Technology

KP(1 Kingan Paul (WLCCG), 23/02/17

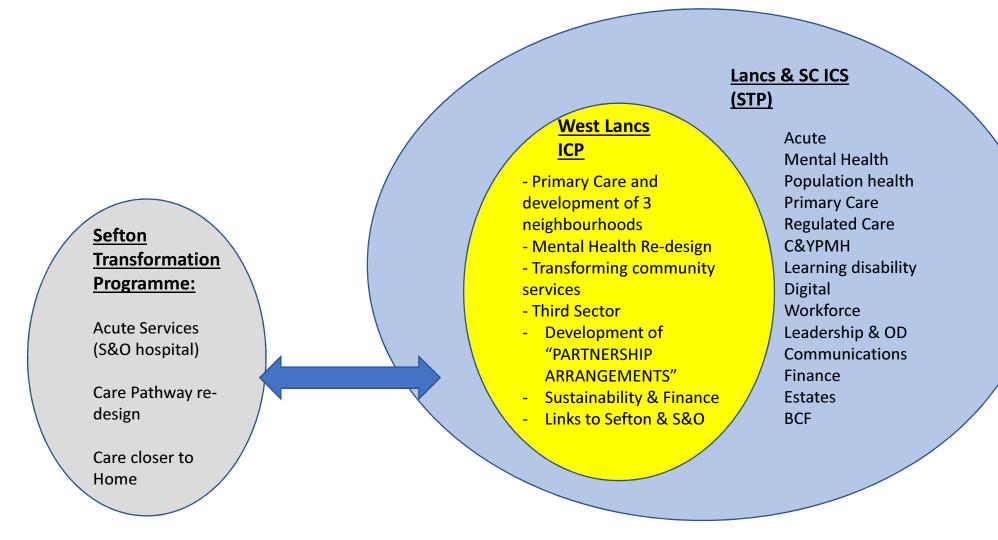
Performance Area	Current status	On-going Progress
Hospital Admissions	Emergency and Elective Admissions are flattening	Development of community alternatives are reducing hospital episodes
Health inequalities	Big differences across the patch in life expectancy	Well Skelmersdale project
Waiting times (RTT & 4 hour, Ambulance Waits)	Top performer in country re average elective waiting times. 4 hour A&E target deteriorated over winter . Ambulance waits poor – geography a problem.	New Musculoskeletal Service big success. Joining up out of hospital for emergency care (e.g CERT) Alternatives to ambulance – falls car
Cancer	One year survival good, 62 day requires improvement	Improvements in earlier diagnostics e.g Lung Cancer
Mental Health	High performer for dementia and meeting IAPT	Re-designing Services, pilot in new ways of working for Lancs
Learning disability	Significant discharges into community	Managing patients safely in community , remaining patients discharged
Primary Care	Extended Access - well advanced and across the patch, Active federation working	Active workforce models in operation e.g ANP's, physician associates, clinical pharmacists



Estate strategy implementation

- ETTF requested in 19/18 for £15m
- Outline PIDs submitted for Skelmersdale and Ormskirk 3000m2 schemes
- Both approved to next stage and enhanced PID being produced
- Revenue support allocated to support bid development
- Project team established with council to progress joint leisure and health development in both towns
- Initial scoping exercise nearing completion including site option appraisals and functional contents
- Scheme plans to include provision of leisure centres at Skelmersdale and Ormskirk with enhanced leisure services and potentially out of hours health services, GP practices and community services
- Major opportunity for colocation of leisure and health and every opportunity will be explored
- Further bids to be completed by June
- Council and CCG striving actively to make progress but early days

Cross-boundary working & inter-relationships



Strengthening Joint approaches across Lancashire

- Digital (e.g LPRES and data exchange)
- Estates (SEG development)
- Finance policy formulation (and income generation?)
- Sharing best practice e.g neighbourhood teams (and terminology!)
- Better Care Fund & Third sector partnerships e.g Active Ageing Alliance
- Integrated teams e.g Business Intelligence

Thank You

Any questions?