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20 February 2017

Dear John,

PO30 5XW

Isle of Wight - My Life a Full Life (MLAFL) Vanguard 2017-18

Following your conversation with Jacob West, Ian Dodge, National Director for Commissioning Strategy has asked me to write to you confirming the level of national funding for your vanguard in 2017-18, and our associated expectations.

NHS England has been encouraged by the initial progress made by the primary and acute care systems (PACS) vanguards. For the last year of the programme we want to see the vanguards across the country implementing a recognisably common model, based on the PACS framework. We expect the most advanced sites to be contracting for this model during 2017/18, and for all sites to have a plan to move to a new contractual arrangement in 2018/19. We are encouraged by the number of STPs that describe their plans to implement PACS-type models. A significant part of your role this year will be to support the spread and replication of this model locally and nationally.

In rolling out the programme, we will also be seeking to show that dedicated investment in transformation pays a clear and timely financial as well as quality dividend. We will be looking in particular at the impact you have achieved on reducing non-elective hospital admissions and bed days, as well as the other measures you are tracking locally.

In 2017/18 the NHS needs the PACS vanguards to mature fully into being visible exemplar systems, to become the source book of operational know how for the rest of England, and to bring your energies to bear in catalysing wider spread.

When considering your bid for 2017-18 funding NHS England and NHS Improvement had concerns about the pace of delivery and alignment of the vanguard plans with the wider STP. Following your conversation with Jacob West, I am pleased to confirm that we have provisionally allocated £1.685m of transformation funding for My Life a Full Life for quarters 1 and 2 of 2017/18. Towards the end of this period there will be a review point upon which allocation of quarters 3 and 4 funding is dependent. The release of the first quarter of this funding will be subject to the completion of three conditions:

Our values: clinical engagement, patient involvement, local ownership, national support

- 1. That by 28 February 2017 the Isle of Wight Local Delivery System communicates the high-level approach and milestones towards the production of a system-wide transformation plan that aligns with the STP vision.
- 2. That to maintain momentum while the detailed system wide plan is developed, by 28 February 2017 the vanguard will describe the monthly milestones and deliverables for Quarter 1 and Quarter 2 2017/18. This should focus on priorities that are clearly part of the long term plan e.g. full mobilisation of the locality integrated health and care teams. This submission should include:
 - a. Monthly milestones for each deliverable;
 - b. Planned impact on care activity (acute, community, primary, local authority etc.) and other measures, for each deliverable.
- 3. That by June 2017 this system-wide transformation plan is produced.

In addition, in common with all other PACS vanguards My Life a Full Life vanguard, is commissioned to achieve the following four objectives:

- 1. My Life a Full Life vanguard will have systematically implemented the published national framework in a consistent and sustainable way, by the end of the third quarter of the financial year, and thereby achieved sufficient quantified benefits in My Life a Full Life to have justified national and local investment. As you know, there will be no additional national funding for existing vanguards beyond March 2018, and so we are expecting you to have embedded the new care model within your local commissioning and funding arrangements.
- 2. With the other PACS vanguards, and the national support team, My Life a Full Life vanguard will have collectively developed and adopted standard operational methods for all the core components of the framework, which the rest of the country can then adopt or adapt rather than have to reinvent. Without standard operational methods, replication across the country will be far less successful. Jacob will be in touch with you separately on the detail of this, but suggests that there is strong potential, in particular, for your vanguard to co-produce material on:
 - a. Whole population supporting self-care and patient activation
 - b. Urgent care needs a proactive community based approach to urgent care (including the learning from the IOW integrated hub)
- 3. My Life a Full Life vanguard will have provided local peer assistance and leadership in helping spread the implementation of the model across the Hampshire and Isle of Wight STP and potentially beyond. We are therefore requiring 10% of the national funding to be dedicated by the My Life a Full Life vanguard explicitly to support the wider work of the STP in spreading the model across the rest of Hampshire and the Isle of Wight. Release of this spread "bond" will be subject to the agreement of Richard Samuel, as STP chair, to whom I am also copying this letter.

4. My Life a Full Life vanguard will have made a visible positive contribution to wider national learning, through a variety of means including published evaluation material, case studies, operational methods, speaking at regional and national seminars and events, etc. Effective local evaluation and real time intelligence against key metrics remains critical. The new care models programme will write to you separately to confirm arrangements for local evaluation.

As with previous years, national transformation funding may only be spent on delivery of new models of care, and not on core ongoing business, wider provider development or for any other purpose. National funding may only be used to fund programme management costs up to a maximum of 10% of total programme value, unless agreed explicitly with Jacob West.

Funding will be conditional on meeting these conditions. Your progress against the conditions above will be subject to formal quarterly review of progress by Jacob West and Dominic Hardy.

Separately, NHS England has written to local commissioners in transformation to confirm an allocation of £1.50 per registered patient population in 2016-17 to prepare delivery of extended General Practice access "at scale". For 2017-18, commissioners must demonstrate how they will meet national core requirements in order to secure additional funding of £6 per weighted head of population from 1 April 2017 with the expectation that all transformation areas will commence delivery between April and September 2017. Vanguards will wish to discuss with commissioners how they can help them deliver extended access.

I am copying this letter Jacob West, care model lead for the PACS programme; Helen Shields, the Accountable Officer for Isle of Wight CCG; Richard Samuel, Hampshire and Isle of Wight STP lead; Jennifer Howells and Anne Eden, the South regional directors at NHS England and NHS Improvement; Dominic Hardy, Director of Commissioning Operations and Penny Emerit, Director of Improvement and Delivery NHSI.

Let me close by thanking you and your teams, on behalf of NHS England, for what My Life a Full Life vanguard has already achieved. 2017/18 is now the critical year for you to complete the job, and do full justice to what you have started.

With very best wishes,

Sannaha Jo-

SAMANTHA JONES
Director –New Care Models

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