

NHS Portsmouth CCG 2013/14 Contract Agreements Summary

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May 2013



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Summary of Contracts

Provider	£m
Portsmouth Hospitals NHS Trust*	£102.9
Solent NHS Trust*	£48.7
Southern Health NHS FT*	£0.3
South Central Ambulance NHS FT	£7.0
University Hospitals Southampton NHS FT	£1.9
St Marys Treatment Centre (Care UK)	£4.7
Continuing Care***	£11.5
Other NHS Trusts (in contract)	£1.5



Portsmouth Hospitals

- **Approach & Process**

- NHS Portsmouth CCG co-ordinating Commissioner
- Structure in place for contract negotiations
- Clinical input to sub-groups
- Clinical leadership in Executive Contract meetings

- **Principles**

- Payment by Results contract (all penalties and incentives apply)
- Forecast outturn, plus allowance for growth (see table 1 below)
- Updated local prices
- Counting & Coding changes agreed (see list in table 2)
- Referral to treatment times, some changes agreed with £3.5m risk pool (system wide) pending further review
- An estimate for penalties and contract levers built into baseline
- Quality Innovation Productivity and Prevention (QIPP) – 3 categories; category 1 built into contract (£1.6m); category 2&3 (circa £1m) to be varied into contract in year when finalised and agreed with PHT
- CQUIN – principles agreed for local schemes
- Maximum take activity transferred to Wessex Area Team (£5.6m), final agreement to values to be confirmed



Portsmouth Hospitals

2013/14 Opening Contract Value:

Point of Delivery (POD)	Activity*	£'000
Non Elective	20,796	34,873
Electives	15,801	19,803
Accident and Emergency	41,735	4,715
Outpatients	150,861	18,123
Direct Access	1,719,623	4,388
Maternity Pathway	8,402	10,464
Regular Day Attendances	341	152
ITU	1,660	2,467
Rehabilitation/Disablement Services	16,869	2,356
Drugs and Devices		4,169
Patient Transport		1,196
Contract Levers & Penalties		
Paediatrics Zero Length of Stay		-227
Readmissions		-1,015
New to Follow-up ratio		-162
Non-Elective Threshold		-12
CQUIN		2,532
Maternity Pathway Adjustment		-353
Contract Challenges		-458
Contract Penalties		-107
Total 13/14 Contract		£102,904

*Activity = Spells; Attendances; Outpatient first/follow-up; ward attenders
 Occupied bed days etc depending on POD



Portsmouth Hospitals

- Growth



Table 1 : Point of Delivery (POD)	Growth Rate	Portsmouth £000
Non-Elective	2.0%	£706
A&E	5.0%	234
Diagnostic Imaging	3.0%	44
Radiology Direct Access	2.0%	8
Maternity Pathway	1.5%	183
Drugs	10.0%	407

- Counting and Coding Agreed



Table 2 : Counting and Coding	PHT Total Value £000	Portsmouth £000
Best Practice Tariff - Diabetes	£653	£207
Best Practice Tariff - Epilepsy	£92	£39
Best Practice Tariff - OP Procedures	-£79	-£28
Best Practice Tariff - Rheumatology	£50	£16
Multi Disciplinary Outpatients	£47	£17
Advice & Guidance	£100	£77
Telephone Advice	£177	£57
Transport	£331	£89

- Counting and Coding Clinical Review required:



Table 2 Counting and Coding	PHT Total Value £000	Portsmouth £000
Sentinal Node	£210	£55
Vacuum Assited Biopsy	£110	£39
MoHS	£199	£59



Local CQUIN - PHT Focus

Effective Provision of Care for Patients with Dementia

Targeting dementia patients within PHT to so support a pull model back into the community - with the target for the community being the same as the targets set for PHT in terms of times (reduce LOS down to 4 days or less)

Effective Utilisation of Community Care

Identification of medically fit, clinically stable patients at PHT that can be discharged to a community setting- reducing by 90% by the end of March 2014 (so that there will only be 10% of patients in the Trust at any one time that are medically fit)

Reduction in Non Elective Admissions

Delivery of ECIST action plan to be pre-requisite to release of any CQUIN payment for Solent and Southern

Management of ACS conditions within the community – and reduction in ACS admissions

Establishment of 4 integrated care pilots, two in South East Hampshire and 2 in Fareham and Gosport

National CQUIN - PHT Focus

Digital First

SMS Appointment Reminders

Patient Self Check In

Electronic pre-Operative Assessment

Remote Delivery of Negative Test Results

Assistive Technologies (3 million lives) - Cardiac Telemetry

Intra-Operative Fluid Management (See Appendix 1)

To deliver individualised Goal Directed Fluid Therapy

Friends and Family Test

Friends and Family Test - Phased expansion

Friends and Family Test - Increased Response Rate

Friends and Family Test - Improved Performance on the Staff Friends and Family Test

NHS Safety Thermometer - Improvement

Delivery of an agreed Whole Health System Improvement Plan

Reduction in the prevalence or Incidence of new pressure ulcers

Dementia

Dementia - Find, Assess, Investigate and Refer

Dementia - Clinical Leadership

Dementia - Supporting Carers of People with Dementia

VTE

VTE Risk Assessment

VTE Root Cause Analyses

Portsmouth Hospitals

Risks	Actions	Mitigation
RTT risk pool	Further work on modelling to agree	Share of risk pool (circa £1.2m) set aside
QIPP – Category 2&3	Continue to develop schemes and agree variation to contract	If not successful – use contingency
Maximum take value not agreed	Continue to work with Wessex Area Team to finalise value	Changes – use contingency
Foundation Trust Application	Understand potential implications (if any) with PHT	Agree approach with local system



- **Approach & Process**

- NHS Portsmouth CCG Co-ordinating Commissioner
- Structure in place for contract negotiations
- Clinical input to sub-groups

- **Principles**

- Mainly 'block' type contract
- £750k Community Investment – to support unscheduled care redesign
- Rebasing Exercise to be completed by Quarter 1
- QIPP - All schemes built into contract
- CQUIN – principles agreed for local schemes
- Maximum take activity transferred to Wessex Area Team, final agreement to values to be confirmed



Community Contract - post Public Health & Specialised service transfers

	£'000
2012/13 Contract value (inc SAVO's excluding CQUIN)	£24,588
Disinvestments - Joint Equipment Store	-£1,121
Non Recurring - Joint Equipment Store	£280
2013/14 Tariff Uplift	£614
2013/14 Efficiency	-£908
CQUIN	£586
Total Community Contract 2013/14	£24,039

Mental Health Contract - post Public Health & Specialised service transfers

	£'000
2012/13 Contract value (inc SAVO's excluding CQUIN)	£27,168
Disinvestments & QIPP	
Baytrees	-£507
IDTS Kingston Prison	-£65
Hamble House	-£392
Exbury reprovion	-£814
Deprivation of Liberty	-£4
Thomas Parr	-£363
Early onset Demetia	-£94
Lowry Treatment Centre	-£456
Non Recurring	
Early onset Demetia	£47
Lowry Treatment Centre	£342
2013/14 Tariff Uplift	£661
2013/14 Efficiency	-£978
CQUIN	£614
Total Mental Health Contract 2013/14	£25,159



Local CQUIN - Solent Focus

Pre-Qualification CQUINs

Enhance the delivery of care to patients with effective use of telehealth

Child in a chair in a day

Digital First

International & Commercial activity

Local CQUINs

Effective Provision of Care for Patients with Dementia

Adult Mental Health CQUIN

Effective Utilisation of Community Care

Reduction in Non- Elective (NEL) Admissions

National CQUIN - Solent Focus

National CQUINs:

Safety Thermometer

Friends & Family



Risk	Action	Mitigation
Rebasing Exercise – finalisation by Q1	Lead rebasing exercise to conclusion by Q1	Agree transition as necessary – use contingency
Estate Costs – Property Co charges impact on contract value	Ensure impact of baseline transfers understood by all organisations	Use of contingency
Any Qualified Provider – areas not defined and agreed	Agree with Solent values within contract relating to AQP areas	Renegotiate contract value and/or use of contingency
Foundation Trust	Understand potential implications (if any) with Solent	Agree approach with local system (including Southampton CCG)
Supporting Unscheduled Care re-design	Review proposals from providers and establish if ‘pump-priming’ required	Use of 2% non-recurrent funding

- **Approach**

- Fareham & Gosport CCG Co-ordinating Commissioner
- Regular meetings with feedback

- **Contract**

- 13/14 Opening contract value £6.7m
- Continuation of PbR
- Growth agreed at 4% (Hear & Treat; See & Treat at 55% marginal rate)
- Marginal rates for under/over performance revised
- Handover penalties – to be charged outside of contract, funded via penalty levied by CCG to Providers (PHT)
- CQUIN – local aligned to system changes



Local CQUIN - SCAS Focus

Pre-Qualification CQUINs

Digital First – Increased usage of special patient notes

Commercial Intellectual Property – Rollout and usage of falls triage tool

Local CQUINs

Training programme for electronic patient record (1%)

System enablement – supporting integrated care (0.6%)

Care in most appropriate setting – reducing number of conveyed to acute Hospital (0.7%)

Improve pre hospital care for mental health and learning disabilities (0.2%)

