



MEETING TITLE Trust Board in Public		MEETING DATE 24/11/2015	
TITLE of PAPER	The Vanguard Programme - update	PAPER REF	6.2
STRATEGIC OBJECTIVE	To provide services which exceed patient and commissioner expectations To develop culture, systems and processes to support continuous improvement and innovation To create, attract and retain an enhanced and skilled workforce to meet service needs now and in the future		
PURPOSE OF THE PAPER	The purpose of the paper is to maintain oversight on progress of the Vanguard Programme.		
For Approval	<input type="checkbox"/>	For Assurance	<input checked="" type="checkbox"/>
For Decision	<input type="checkbox"/>	Discussion/Information	<input type="checkbox"/>
AUTHOR / LEAD	John Cartwright, Vanguard Programme Manager,	ACCOUNTABLE DIRECTOR	Julian Mark, Executive Medical Director
DISCUSSED AT / INFORMED BY – include date(s) as appropriate (free text – i.e. please provide an audit trail of the development(s)/proposal(s) subject of this paper): Review by Clinical Directorate 17/11/2015			
PREVIOUSLY AGREED AT:	Committee/Group:	Date:	
RECOMMENDATION	It is recommended that the Board are assured of the progress that has been made on the programme to date.		
RISK ASSESSMENT		Yes	No
Corporate Risk Register and/or Board Assurance Framework amended <i>If 'Yes' – expand in Section 4. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify) <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Equality and Diversity Implications <i>If 'Yes' – please attach to the back of this paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Registration Outcome(s)		6: Cooperating with other providers 13: Staffing 16: Assessing and monitoring the quality of service provision	
NHSLA Risk Management Standards for Ambulance Trusts		1: Governance 2: Learning from Experience 3: Competent & Capable Workforce	

1. Purpose

- 1.1 The purpose of the paper is to inform the board of progress to date with the Vanguard Programme.

2. Background

- 2.1 *Please also see “The Vanguard Programme” (October 2015) which provides a detailed overview of the Programme.*
- 2.2 The West Yorkshire Urgent and Emergency Care Network, of which YAS is a member, has been chosen to spearhead the development of Urgent and Emergency Care initiatives.
- 2.3 The aim of the Vanguard Programme is to support, across a number of sites, new models of urgent care which can be replicated throughout the country. The ultimate aim is to produce models of care that will ensure appropriate patient pathways away from the Emergency Services.
- 2.3 For YAS, this means developing “Hear, See and Treat” in line with the nine high impact interventions, which is the cornerstone of the YAS element of the Vanguard Programme.

3. Proposal

- 3.1 The proposal outlines the plan for “Hear, See and Treat.” This includes;
 - “Hear and advise” - The development of a Clinical Advisory Service; this is a Clinical Hub to provide specialist clinical advice to 111, 999 and healthcare professionals. This includes care coordination to signpost and book patients into primary care, and community pathways, Mental and alternative pathways.
 - “See and Treat” – continued development of a range of services to see and treat patients nearer home. This includes Urgent Care Practitioners, Frequent Callers, Falls response, Urgent Care Transport and Mental Health crisis response. Urgent Care Centres need to be aligned to the hospital reconfiguration and emergency departments and emergency services.

4. Progress to date

The programme is in its development stage, which is focusing on engagement and scoping of the workstreams within it. For YAS, this primarily focuses on Hear, See and Treat, but also includes significant input into the Mental Health Workstream.

The key milestones within the last two months include:

- WY Vanguard Launch Event – 25 September; this event was to officially launch the Vanguard Programme, but also to communicate and seek feedback on the aims and objectives of the workstreams.
- Site Visit by the national team – 22 October (See appendix two for headline feedback); the National Vanguard Team, including ECIST and NHS England came to review progress and programme governance as a step towards developing the value proposition, i.e. the programme business case.
- Scoping out the resource requirements for the programme; aiming to feed into the value proposition, the resources, based on current plans, have been identified.

- YAS Programme Governance Structure drafted (See appendix one); the initial governance structure has been drafted to feed into the programme governance. Two additional roles have been identified which will be identified for funding in the Value Proposition.
- The Team attended the South Yorkshire and Bassetlaw Urgent Care Network launch event. The North Yorkshire one was cancelled. The team also attended a Yorkshire and Humber wide event on developing Urgent and Emergency Care Networks.
- Initial Draft of the “Hear, See and Treat” Stock-Take, which is the document that feeds into the Value Proposition (2015/16). This draft is being worked on by the Leadership team on the 18 November.
- Site visit by Russell Emeny (ECIST) – 16 November 2015; an informal, supporting discussion and challenge from Russell Emeny on the plans for the Hear, See and Treat model. Feedback pending.
- There have been a number of internal meetings and conversations to seek wider input and understanding of the programme.

5. Actions within the next period

- Completion of the Vanguard Value Proposition (2015/16): a high level business case to obtain funding for the programme management (YAS and Programme Wide) and for the pilots this financial year.
- Draft of the Vanguard Value Proposition (2016/17): A detailed business case for 2016/17 with more of a focus on implementing the Vanguard proposal.

6. Risk Assessment

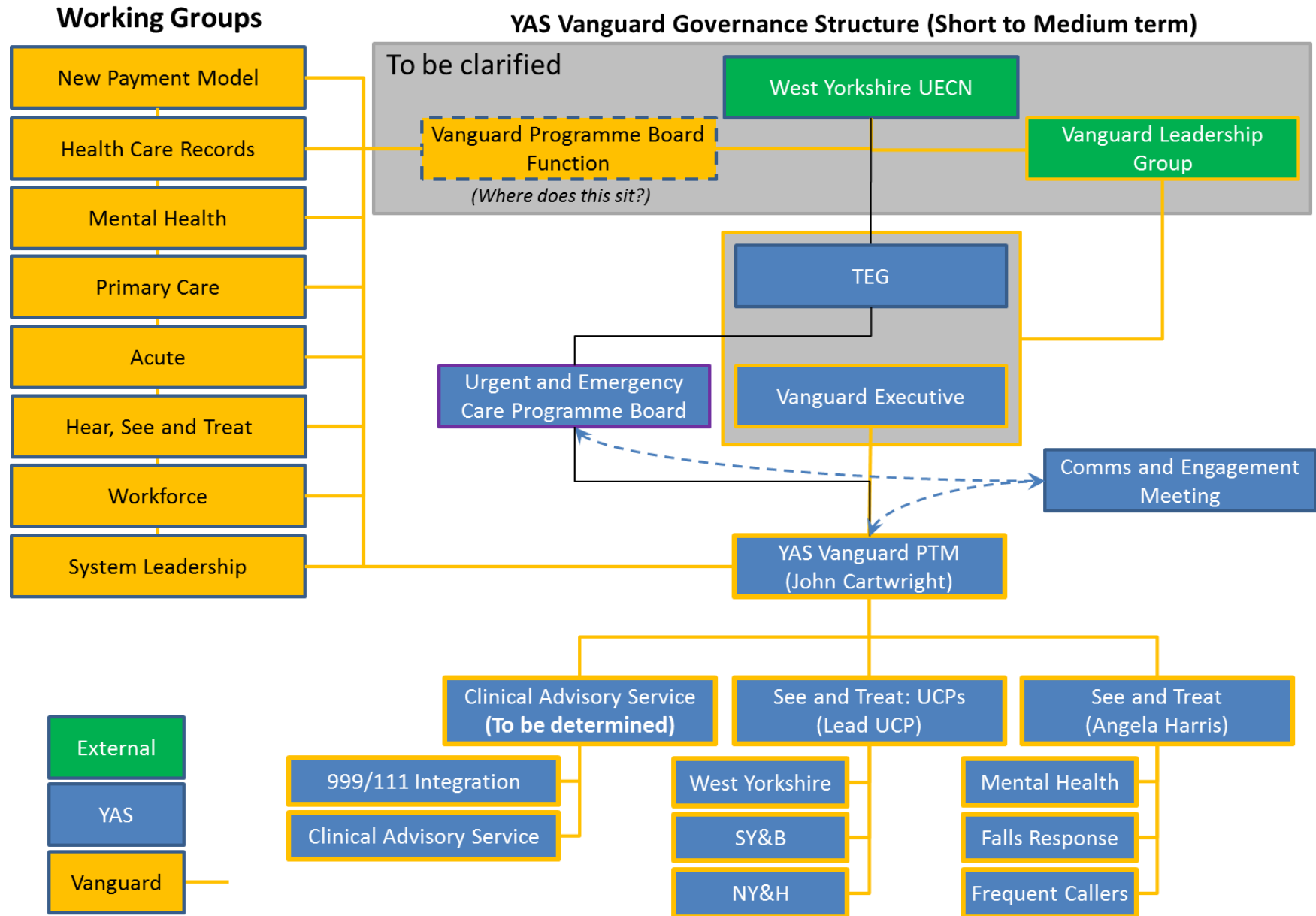
- 6.1 Risks have been identified on the Urgent Care risk register, including identification of mitigations, and will be monitored in the Urgent and Emergency Care Steering Board.

7. Recommendations

It is recommended that the Board are assured of the progress that has been made on the programme to date.

Please note: additional Vanguard Literature has been included in Appendix Three for information to provide an additional overview of the programme.

Appendix One: Programme Governance (Draft)



Appendix Two: Site Visit Feedback

Headlines from the Site Visit

- Congratulations to the whole team – this is big, complex and exciting,
- Chris Dowse was highly commended for her leadership,
- Impressed that MH is so well integrated into this work,
- Had all the right partners in the room – balance correct (best they have seen)
- Fabulous thinking and progress on logic models (best in class!)
- All work-streams have been identified – fantastic
- PMO is under resourced currently
- Acute alliance is great and ambitious but highly appropriate
- NPM –we are ahead of the game here
- Workforce activity is patient focussed – great
- 111/999 –all going in the right direction

What should we look to strengthen?

- PMO – needs to be bigger – recognise the critical path and define the dependencies of work streams,
- Workforce – need more work with HEE but need to show the difference in 2yrs so it can't all be based on recruitment – where's the innovation?
- Scope – try not to boil the sea – needs further refinement with granular plans for concrete objectives. Consider use of rapid improvement cycles to have quick impact, without over analysis. How to use social movement expertise suitably?
- More clarity on the leadership development piece – take care not to over think,
- Develop basket of indicators across West Yorkshire that keeps the system safe while avoiding chasing targets (e.g. 4 hour waits). What can be standardised and what should be localised (e.g. ambulatory care),
- Conduct a confirm and challenge on the objectives to ensure that they are suitable and appropriate.

Appendix Three: WY Vanguard Overview for Information (Not Inc. Acute and Primary Care)



WORKSTREAM	SYSTEM LEADERSHIP
COMMISSIONER LEAD	CHRIS DOWSE
SUBJECT MATTER EXPERTS	TBC
MEMBERSHIP	PROFESSOR CLIVE KAY MERRAN MCRAE STRUAN COAD

THEMES TO COVER

1. **Introductions if new people have joined the session who were not part of the plenary**
2. **State the objective of the breakout session:**
 - To explore in depth a subject specific element of the vanguard proposal (say what this is e.g. workforce/leadership/payment systems/ value propositions)
 - To identify key barriers and support requirements associated with this element of the vanguard's plans
3. **The vanguard team begins by talking through or presenting in some detail their current ideas and plans in this respect**
4. **A discussion about what this means – exploring and probing the detail of the proposal adding ideas, challenging gaps or unrealistic proposals, identifying barriers to delivery**

Questions could include:

 - Tell us about your specific plans and ambitions currently in this regard?
 - What have you achieved so far?
 - What barriers or challenges do you see ahead that may hinder delivery?
 - What ideas do you have for overcoming these?
 - Have you considered.... (contribute ideas and share best practice from elsewhere)
 - What sort of support do you think is required to enable delivery – national or local expertise, financial, other resource?

Many more questions are provided towards the end of this pack.

5. **Reflect and sum up and agree outputs for feedback to plenary capturing key aspects of plans and support requirements.**

We will provide as far as possible a note taker for these sessions so that SMEs can focus on the discussion.

These notes will help inform the collated site visit capture document that we will produce following the visit.



WORKSTREAM	WORKFORCE
COMMISSIONER LEAD	NIGEL GRAY
SUBJECT MATTER EXPERTS	JOHNATHAN BROWN
MEMBERSHIP	ANGELA HARRIS CAROLINE GRIFFITHS JAIN CAMFIELD

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WORKSTREAM	FINANCE AND NEW PAYMENT MODELS
COMMISSIONER LEAD	MARTIN WRIGHT
SUBJECT MATTER EXPERTS	LILY TANG MATTHEW MARSH
MEMBERSHIP	ERIC DAVIES AMY WHITAKER

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WORKSTREAM	INTELLIGENCE & TECHNOLOGY (SHARED RECORDS)
COMMISSIONER LEAD	ALISTAIR CARTWRIGHT
SUBJECT MATTER EXPERTS	MATTHEW STIBBS
MEMBERSHIP	ROD BARNES, RICHARD MAIN TRUDIE DAVIES, REBECCA NICHELLS DR THOMAS MASON AND PHIL BARRETT

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WORKSTREAM	MENTAL HEALTH
PROVIDER LEAD	SIMON LARGE
SUBJECT MATTER EXPERTS	BOBBY PRATAP
MEMBERSHIP	RORY DEIGHTON, STEPHEN STERICKER ANDREA WILLIMOTT, DR GUY BROOKES DEBRA GILDERDALE, KELLY BARKER MARK TREWIN, WAYNE HORNER AND CHRIS KIRBY

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WORKSTREAM	HEAR, SEE AND TREAT
COMMISSIONER LEAD	DR PHIL FOSTER
SUBJECT MATTER EXPERTS	KEITH WILLETT AND NICK HALL
MEMBERSHIP	ANDY WITHERS, DR ADAM SHEPHARD, LYNNE PARKES, JOHN CARTWRIGHT AND JO WEBSTER

THEMES TO COVER

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