Our Vision and Strategy for Planned Care
Our Vision for Planned Care
People in CIOS will be offered safe, high quality planned care, in the right place, at a time which is right for them.

Our philosophy
means good planned care will obviate the need for much urgent and emergency care - getting it right first time, in time is our goal.

Our Principles will drive our strategy

Our Success
will be measured by the achievement of NHS standards, improved outcomes, excellent staff and patient feedback, elimination of risk of harm due to delay
Our ambition for a future model of care

- Person centric pathways, time is our currency
- Placed based, out of hospital care and support
- ‘Choice’ meaning informed decision making, secondary care referrals only where necessary
- Combined workforce strategy, developing our collective skills and capacity
- Digitally enabled transformation
- All providers invited to be part of Cornwall and IOS Clinical Practice Groups – (Primary, Community, Secondary)
- Facilities used inline with pathways and whole system ‘blue print’
- New business model, new contract mechanisms, potential for devolved budgets
- Research active, leveraging investment
Elements of Planned Care – Ambition and Delivery

System priorities:
• Achieve standards across all elements 2019/20
• Eliminate 52 week waits
• Protect capacity in winter
• New pathways to drive more prevention and less intervention

Critical to Success
Locality leadership for new service models
New digital opportunities
GP/Consultant engagement
Development of our joint workforce
Provider co-operation

Transformation Programmes

Outpatients
Manage demand
Transform Delivery;
Promote self care

System Pathways
Musculo-Skeletal
Cardiovascular Disease
Falls and Frailty

Delivery
Reducing delay
e.g. theatres, booking scheduling, flow,
Cancer

Elective blueprint
Hot/cold sites
OP distribution
Locality delivery workforce
Simple guiding principles to be adopted for clinically led redesign of planned care

- Improve safety, quality, access and attain best value in the use of resources
- Educate and support patients through times of changing practice, ‘no decision about me without me’
- Encourage prevention, self care, and primary/community support
- Refer for specialist care / intervention by exception
- Think Digital first - use technology to enable care out of hospital
- Be creative about the workforce – re-design roles, allow staff to act top of skill set, and
- Adopt transparent, evidence based change
Illustration of Vision and Strategy applied to Outpatient Programme
Our Draft Strategy for Outpatient Care

‘Patients receive innovative care and information, in the right place and within 14 days of referral’

Put patients first - patient led pathway redesign, and self care

Grow a skilled, caring workforce with the capacity to meet people's needs

Work in partnership - across health, care and voluntary sectors

Offer care closer to home through digital innovation and new care models

Plan ahead to have the right facilities, right capacity, and budget to meet changing demand

We value patients time