"The financial challenges of major health system reform and the role of diagnostic services"

Simon Worthington

Finance Director & Deputy CEO – Bolton NHS Foundation Trust

#### I will cover

- The financial challenge in health
- The law of unintended consequences
- Case study GM & Pathology

#### Ever increasing cost of health care

- Cost inflation 2% to 3% per year
- Demographic change 2% to 3%
- Can do more things 1%
- Say 6% .... Or £30bn over five years
- If economic growth is only 2% ......

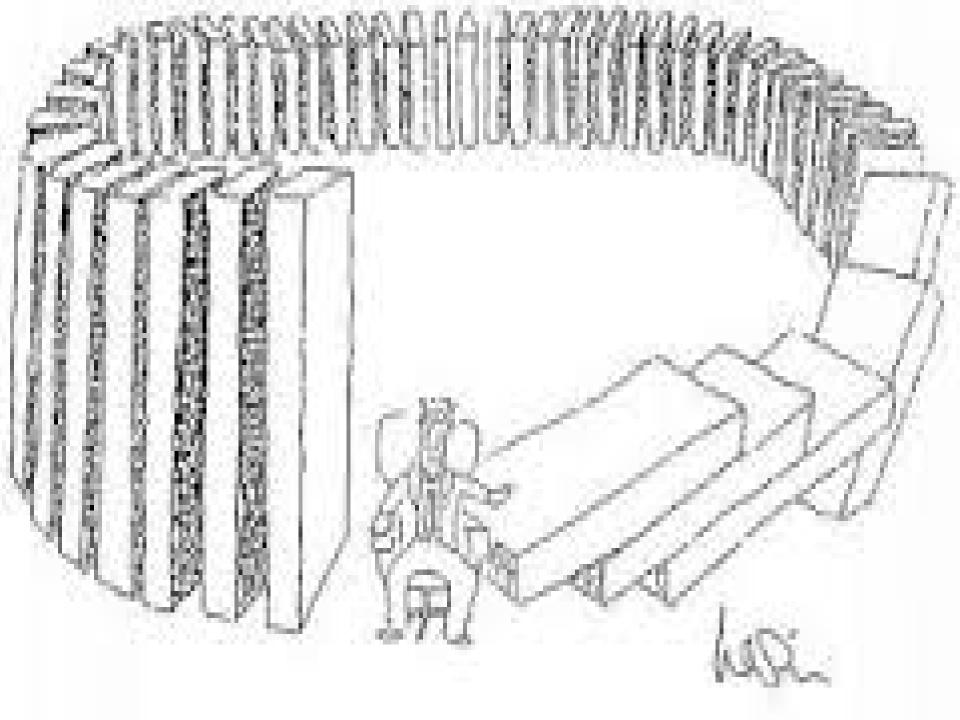




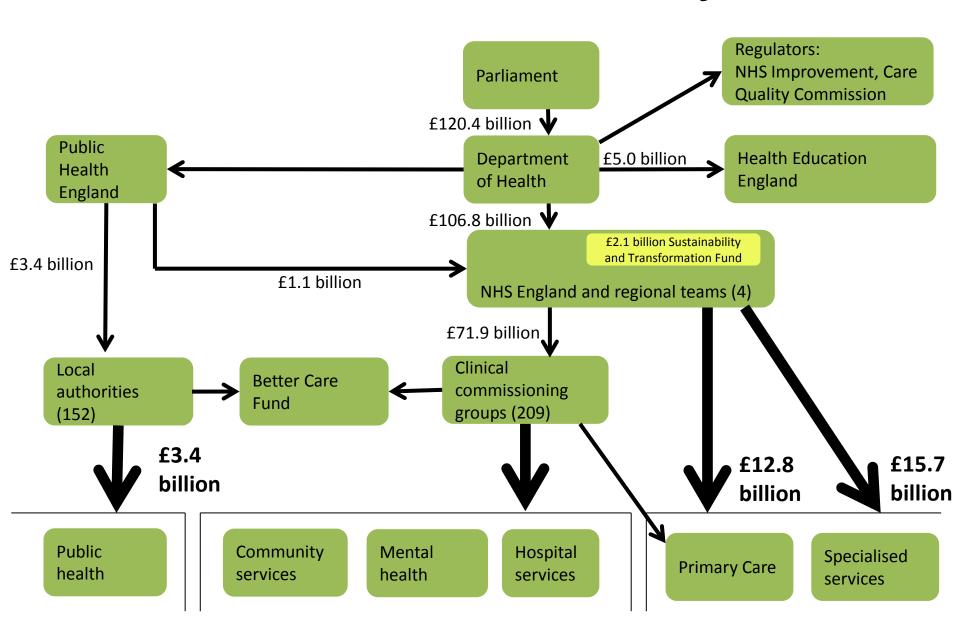
## Five year forward view

- £30bn problem
- Please give £8bn
- We will save £22bn





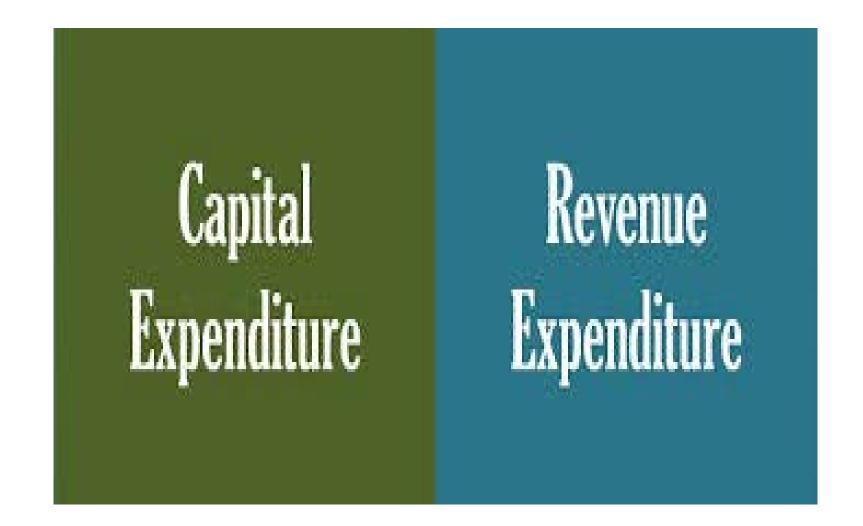
# The new NHS: how the money flows













#### **Provider reimbursement**

Traditionally Commissioners use three main payment currencies to pay providers, however new types of contracts are emerging

# National tariff (PbR)

- Activity-based funding
- Volume and type of care (casemix)
- Schedule of national prices for specific procedures
- Elective, nonelective, OP, A&E and some critical care
- Some exclusions

#### **Local tariff**

- For some services that are out of scope of PbR, e.g. Specialist acute services with low volumes
- Increasingly common for local tariff negotiation

#### **Block contracts**

- Simple a fee for a given level of capacity
- Sophisticated minimum and maximum activity levels defined
- Cost & volume –
   fixed payment
   for provision of
   capacity and
   separate
   payment for
   each patient
   treated

# Alternative Contracts

- Outcome based contracts
- Aligned incentive Contracts





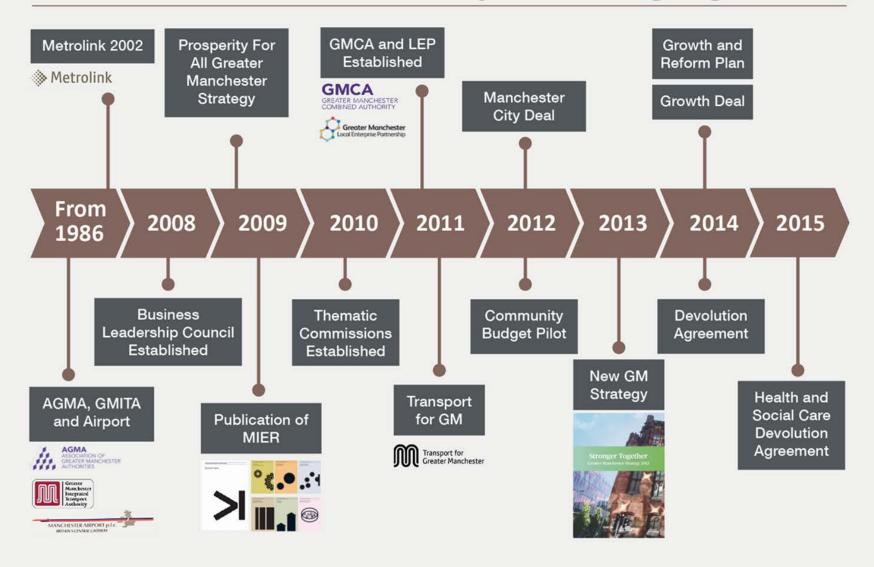








### Greater Manchester: a history of working together



# We're Shifting the Balance of Spending, Focusing Resources on Early Intervention and Prevention

Working in collaboration → to support GM residents → and improve outcomes

Local Government

Health services

Police

Fire & Rescue

Housing







- Thinking about cumulative impact rather than single service planning
- Identifying and addressing demand before it escalates
- Supporting individuals and families collaboratively, working across organisational boundaries
- Reducing demand on expensive, reactive services



#### Our Governance

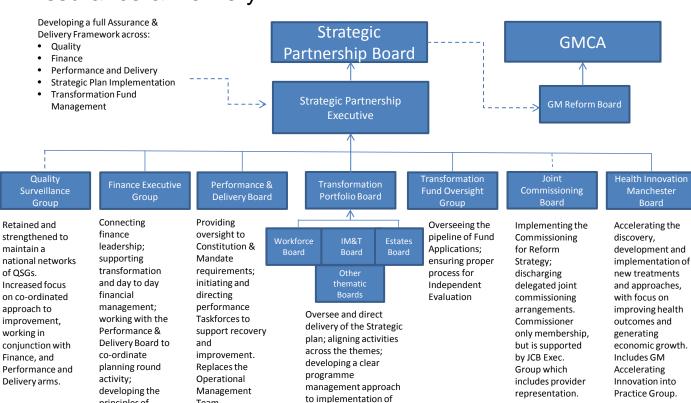
#### Assurance & Delivery

principles of

totals.

system control

Team.



the Plan.

Replaces the

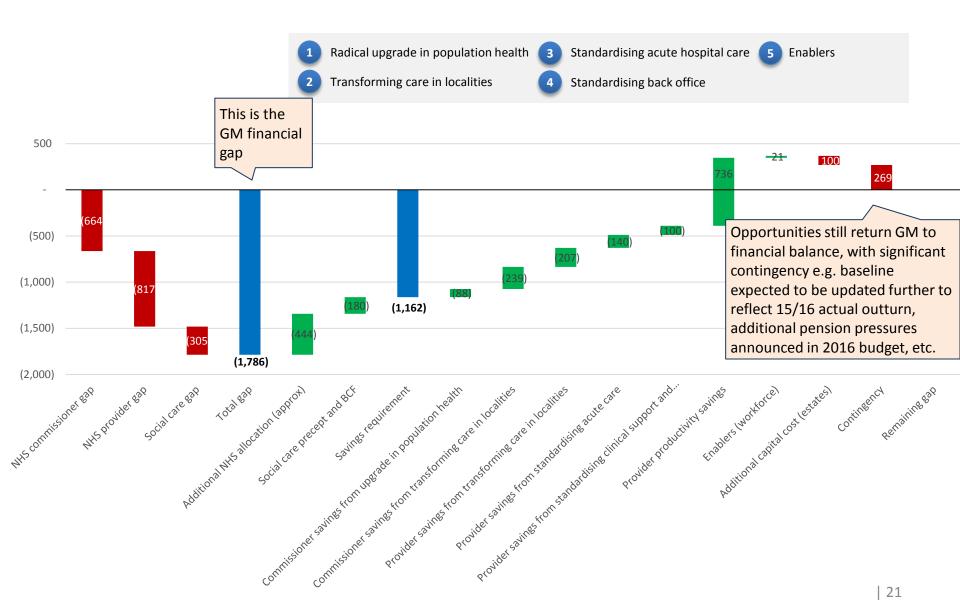
Implementation Working Group.

## **Finance**

#### We have:

- Established Transformation Fund access and assessment process and made several awards
- Created a fund to support development of Transformation Fund proposals across the transformation portfolio, and made two awards
- All ten localities have set out five-year finance and activity plans 'roll-ups' to ensure a 'bottom-up' financial model for Greater Manchester.
- Updated our financial plan based on the most up-to-date information
- Made a clear evidence-based case to Government of the need for an increase in access to finance for social care in 2017/18.

# The bridge has now been updated to reflect changes to assumptions, and recut to show the transformation themes



# Lord Carter





# **Project Objective**

Creating world class pathology services across Greater Manchester.

#### World class:

- Quality & Performance
- Workforce
- Efficiency and effectiveness
- Sustainability

## Gain share agreement



#### **GM** Principles agreed

- Transparency
- Big gain and all will gain
- Any financial risk shared
- Quality and performance will improve for all
- Robust governance

#### Transformation fund



- £450m revenue over 5 years
- No capital .....
- GM looking at ways of getting capital

# Project resources









"The financial challenges of major health system reform and the role of diagnostic services"

Questions?