

Draft Terms of Reference for a Single Member Study in measuring savings achieved by the Community Independence Service (CIS) in keeping Westminster older people out of Hospital.

To identify what benefits, financial and other, the Community Independence Service is bringing to the system and the patient. In particular to identify:

- Savings forecast and achieved
- The high level KPI's identified by the service/contract
- An assessment (with Healthwatch) of whether these sufficiently cover patient experience/quality of service including mental and emotional well-being.
- Risks endogenous and exogenous to the system

The domains to be examined include:

Financial savings- how they were modelled and how sustainable are they

System transformation around the user

Patient satisfaction

Proportion of potential beneficiaries who used the service each year

What happened to those who didn't?

Best practice from elsewhere

Lessons learnt from the first year commissioned service

Modelling used to make predictions/set targets- how were the predictions arrived at

Incentives for each agency/sector

Preparedness for Accountable Care Partnerships¹ of the provider network

Methodology

The review will be carried out by:

1. The September meeting of the AH &PP Committee agreeing the scope and commissioning the study
2. Conducting a desk top review of available documentation including the Business Case for CIS
3. Arranging meetings with key people in the CCG (the Commissioner) , Imperial (the initial provider) and the new Provider
4. Track performance against high level KPI's on an ongoing basis
5. Reporting back to the Committee at regular intervals/by x date

¹Accountable Care Partnerships are new organisational forms which integrate care around patients - and are accountable for the delivery and quality of that care. This means a range of providers working together to develop new ways of integrated working.