

<b>Topic:</b>	<b>Statutory Duty: Assessment of Commissioning Intentions</b>
<b>Meeting Date:</b>	<b>10 July 2014</b>
<b>Authors:</b>	<b>Denise Vittorino &amp; Peter McKenzie</b>

<b>For Decision</b>	<b>For discussion</b>	<b>For endorsement</b>	<b>For Information</b>
		√	

## **1. Introduction**

- 1.1. The Health and Wellbeing Board has a number of statutory duties that are set out in the Health and Social Act 2012, including the development of the Joint Health and Wellbeing Strategy and promoting integrated commissioning.
- 1.2. To support the discharge of these key duties, the locally determined terms of reference include reference to the Board assessing how the commissioning intentions of each of the organisations that are members of the Board align with the priorities of the strategy. The Board has begun this process by assessing the intentions of the statutory members of the Board, the County Council, Clinical Commissioning Groups (CCGs) and the Local Area Team of NHS England

## **2. Recommendation**

- 2.1. That the Board notes the alignment of the Commissioning intentions of Staffordshire County Council, Cannock Chase CCG, East Staffordshire CCG, North Staffordshire CCG, South East Staffordshire and Seisdon Peninsula CCG, Stafford and Surrounds CCG and the NHS England Local Area team with the Staffordshire Joint Health and Wellbeing Strategy.

## **3. Background**

- 3.1. In order to assess how their commissioning intentions fitted with the strategic, the Board asked each of the organisations listed above to present details of their plans at Board workshop sessions during May and June. The Board then acted as peer reviewers and critical friends to explore the following issues: in further detail:-
  - Whether the plan contributes to the delivery of the Staffordshire Health and Wellbeing Strategy?
  - What evidence is there in the plans of patient, user, public and stakeholder involvement and engagement?
  - How will delivery of these plans achieve the core principles of the Health and Wellbeing Strategy?
  - What Outcomes and Priorities are to be achieved and by when?
  - How does the plan demonstrate how integration will be achieved?
- 3.2. Following these sessions, the Board has been assured that the plans of all of the constituent organisations are aligned with the strategy. Each organisation was able to clearly demonstrate how the strategy and its overarching priorities were embedded within their planning and operational priorities. Appendix 1 provides a summary of the content of each of the plans that was presented to the workshop sessions.

## Staffordshire County Council

- The Council's Strategic Plan 'Leading for a Connected Staffordshire' was outlined, providing context around the Council's structure, budget and democratic character.
- The Council is focussed on three strategic priorities to achieve the vision that residents would have the opportunity to prosper, be healthy and happy and this fed into seven key areas of work to achieve this.
- Within these seven key themes there is critical immediate focus on supporting the economy and infrastructure of the County, education and skills, integration across the health economy and work to develop locality based ways of working.
- Some of this work was still at an early stage of development, particularly moving to a locality based approach, and there will be flexibility to meet the expectations and needs of residents and partners dependent on the issue considered.
- As a political organisation, the agenda and focus of the Council is set by a number of drivers, led by elected Members but also including customer insight and wider national developments.

## Cannock Chase and Stafford and Surrounds CCGs

- These CCGs, share a senior management team but their operational plans focussed on the health needs of their local populations and they have distinct approaches in each area.
- In **Stafford and Surrounds**, key issues include the transition of services from Mid Staffs NHS Foundation Trust, issues with urgent care pathways and addressing demand management. In **Cannock Chase** there are issues with specific health outcomes around chronic ambulatory conditions, A&E attendances and admissions and high levels of referrals for particular services. Across both areas there is a shared need to balance health needs within the available financial resources.
- In the longer term the CCGs are focussed on addressing issues with the ageing population and lifestyle choices as well as responding to national drivers such as moving towards 7 day working.
- The operational plans have clear alignment with the health and wellbeing strategy through focus on particular priorities including ageing and ending well. Specific operational priorities include disinvestment in services of limited clinical value and reconfiguring services and pathways to support a reduction in avoidable and unnecessary admissions.

## East Staffordshire CCG

- Details of how the CCG's planning processes were aligned with the Health and Wellbeing strategy was presented, which highlighted the context in which the CCG operated, including the population served, staffing levels and budgetary allocation.
- The CCG is the lead commissioner for Burton Hospitals Trust and has collaborative arrangements in place with other CCGs on issues including mental health services, learning disabilities and children's services.
- Key priorities include intermediate care and patients with long term conditions as well as focus on integration with adult social care, benchmarking services against other area and the sustainability of local acute services.

- Details were given of some of the services planned to meet these priorities, including close alignment with the Health and Wellbeing Strategy outcomes to support patient empowerment through outcome based prime commissioning and pioneering the use of new technology.
- Other work includes support for integrated commissioning through the governing body and contributing to wider system leadership through the board and supporting the local acute trust. New approaches to work included releasing funding from existing contracts with the Partnership Trust.
- The CCG demonstrated that the strategy was embedded into their plans, driving their approach to achieving fundamental outcomes.

### **North Staffordshire CCG**

- The CCG's presentation highlighted the overall planning context for the CCG, including the wider unit of planning strategy, targets set out in the NHS constitution and external drivers such as the Francis report and the Better Care Fund.
- Key issues for the CCG identified from the JSNA provide a particular focus on urgent care, including a range of local issues such as A&E attendance, step up and down facilities and developing community care services.
- Work is underway to redesign urgent care pathways at both the front and back end to ensure appropriate services were in place at home, in the community and in acute settings when required. This included working in an integrated fashion with partners, including through mechanisms such as the Better Care Fund.
- The CCG is seeking to move away from a traditional contracting model to a prime contract approach with an alliance of providers focussed on delivering outcomes rather than services.
- Due to the geography of the CCG there is a close working relationship with Stoke-on-Trent CCG and linkages with Stafford and Surrounds CCG are being developed in response to the TSA recommendations around Stafford Hospital.

### **South East Staffordshire and Seisdon Peninsula CCG**

- Details of the CCG's operational plan were presented, highlighting the key focus on quality throughout the organisation.
- The CCG is committed to transformational change built on principles outlined in the Health and Wellbeing Strategy including partnership working and prevention. The strategy has been used to refine the CCG plan and local engagement around the priority areas to develop key themes for work which have clear, clinical leadership within the organisation's change programme.
- Examples were given of work to move towards a new model of care, 'general practice plus' that focuses on coordination of care holistically through a range of interlinked services working together.
- Robust processes are in place to deliver change, focussed on achieving the aims in the health and wellbeing strategy which is embedded through the organisation, evidenced by board papers being marked to demonstrate how they contributed to the strategy.

## **NHS England Area Team**

- The area team outlined their draft strategy, as individual CCG plans would feed in to the overall strategy. Details of the specific responsibilities of the team around primary care and specialised commissioning were highlighted.
- The area team's key area of spending is primary care, the majority of which is committed on GP contracts, this means the amount available to provide flexibility is relatively small. It is possible that GP contracts would be reviewed, however this had recently been undertaken in Staffordshire.
- One of the key issues the team are working on is addressing capacity in primary care, which is facing an increasing workload through demographic factors combined with issues with recruiting primary care staff.
- Work to actively promote recruitment in primary care is underway, both with the local training deanery and in partnership towards co-commissioning with CCGs.
- This work includes promoting the number of training practices in the area, with local medical schools to promote careers in medicine to local residents and consideration of a wider role for pharmacists in primary care settings.
- The team is also working with Healthwatch, in particular to encourage the sharing of best practice and focus on patient journey.