

MEETING:	HEALTH AND WELLBEING BOARD
DATE:	18 SEPTEMBER 2012
TITLE OF REPORT:	DEVELOPING A CLINICAL COMMISSIONING STRATEGY

Wards Affected

County-wide

Purpose

The purpose of this report is:

- To update the Board on the development of, and rationale behind Herefordshire's Clinical Commissioning strategy
- To engage and consult on the current version of the strategy
- To outline how this work is contributing to the development of the Clinical Commissioning Group's (CCGs) commissioning intentions for 2013/14
- To describe how this strategy and associate plans link and will contribute to the delivery of the Health and Wellbeing boards priorities and principles

Recommendation(s)

THAT the Board:

- (a) **endorses the principle and rationale behind the Clinical Strategy;**
- (b) **engages and contributes to the development of the strategy and further iterations are presented and discussed at future HWBB sessions; and**
- (c) **notes the timetable and process for development and agreement of the CCGs Commissioning intentions,**

Key Points Summary

- With the deteriorating position of Wye Valley Trust financially Herefordshire Clinical Commissioning Group with Wye Valley Trust clinicians and Herefordshire Council have been rethinking the clinical strategies that need to be employed over the next five years to ensure that the challenges identified within the Integrated Needs Assessment are systematically dealt with.

Further information on the subject of this report is available from
Mike Emery, Head of Business Development – 01432 260618

- Midlands and East SHA have also requested that the CCG lead the development of a clinically lead commissioning strategy for Herefordshire that focuses on transformation change in the County. The SHA have asked for a narrative concerning the strategy and its development to be provided by early September.
- To this end an initial draft strategy document has been produced [attached] that outlines the challenges faced by Herefordshire and the processes that will be followed to move this work forward. The strategy notes Herefordshire faces a number of specific health challenges related to a largely rural, sparsely populated geography and a relatively underdeveloped provider market. Transforming the Herefordshire Local Health Economy to put the patient and the public at the centre will therefore depend on realising efficiencies and providing better quality of care.
- Resilient partnership working and sustainable clinical networks will be crucial in achieving the vision and strategic objectives; these have been informed by both local health needs analysis provided by the JSNA and national, regional and local priorities. It describes the need to consider different service delivery and configuration models, as well an importance of focusing on care pathways to ensure transformational change. Consideration around financial incentives frameworks and skills mix across the pathways will also be part of the strategy.
- Support is being sought from Professor Sir Muir Gray (NHS Chief Knowledge Officer Department of Health) and Map of Medicine to move this work forward; Herefordshire's Clinical Strategy Group will be the key group tasked with driving the plan and strategy onwards. This group next meets on the 11th September *[feedback from this group will be given to the HWBB on 18th September]*. Details of how the development of the strategy will be implemented and governed are also included in the attached document.
- Work on the strategy and plan will be taking place over the next 6 months, in preparation for full implementation in 13/14. Robust planning, based on a strong evidence base, subsequently supported by a strong programme and governance model will be essential to ensuring the plan is implemented successfully.
- The Clinical Commissioning Strategy will inform and guide the CCGs Commissioning intentions for 13/14. In essence though the central tenants of these will be the continued development of neighbourhood teams, continued move away from a bed based model of care, revisiting the role of Community Hospitals and with a core focus on care and clinical pathways.

How will your report meet the vision and guiding principles of the HWBB?

- The Clinical Commissioning Strategy's primary aim is to deliver transformational system change for benefit of Herefordshire's patients and public in an ever challenging financial climate, to this end it is designed to support the delivery of the HWBB vision, as well as aligning to national and regional priorities.
- The CCG will be key in commissioning services aimed to deliver improved outcomes for Herefordshire residents and in particular, the HWBB overall outcome of reducing the difference in healthy life expectancy in Herefordshire. The CCG continued work around the care pathways will be central to supporting the delivery of the HWBB vision.
- In particular the work being developed for the Clinical Strategy will support the HWBB principles focusing on creating a sustainable unified, affordable, focused system delivering the right service at the right time in the right place. And ensuring the appropriate support will be

provided for people when in hospital to encourage a return to independence wherever possible and when required, long term and end of life care will be dignified and caring.

- The Clinical strategy will also underpin the delivery of the proposed priorities of the Joint health and wellbeing strategy, in particular the
 - sustainability of the health and social care system upon which all others potentially depend,
 - and joined up commissioning and better care pathways

Reasons for Recommendations

- The Health and Wellbeing Board is a primary stakeholder in Herefordshire's Health and Social Care economy; it is responsible for delivering Herefordshire's Joint Health and Wellbeing strategy and it's JSNA (*Understanding Herefordshire*). It will therefore need to assure itself that the local authority and the CCG (with its PCT partners) is commissioning services in line with its vision and principles, and it support the delivery of the HWBB intended vision and principles around resilience, reducing health inequalities and emotional and physical health improvements.

Key Considerations

- The Clinical Commissioning Strategy is a vital component of the health and social planning framework; they will guide and inform commissioning plans and intentions over the next 12 months and beyond, and will support Clinical commissioners in their work over the coming 5 years. HWBB members need to assure themselves that the plans support and align to its priorities and will assist in responding to the JSNA recommendations.

Community Impact

- Engagement events with Clinicians, residents over the last year have feed into the development of the strategy and will continue to do. The HCCG plan will need to support and align to the Joint Health and Wellbeing strategy, going forward to ensure it supports the delivery of improved health outcomes. One of the CCGs central values is putting '*patients and residents at the heart of everything it does*'; key to this will be robust community engagement over the coming years, as it develops future plans.

Equality and Human Rights

- The CCG operational plan outlines the HHCC's commitment to equality, diversity and human rights it states, it will;
 - Ensure PSED and consideration of vulnerable groups is embedded within our Commissioning cycle;
 - Work locally with other Hereford Public Services as a member of Equality and Diversity Forum;
 - Embed it as a key element of its governance processes and values;
 - Ensure that all providers comply with PSED and that it forms part of contract schedules; and
 - Make certain that Quality and Equality Impact Assessments are undertaken on

QIPP schemes and programmes

Financial Implications

- The plans outline the significant challenges faced by the Health and Social Care System as a whole.

Consultees

Herefordshire Clinical Strategy Group

WVT Trust Board

PCT Cluster

Hereford Council Directors

CCG Board

Background Papers

- CCG Operational Plan 12/13;
- West Mercia PCT Cluster Integrated system plan; and
- NHS Operating Framework.