

7th March 2012

Agenda Item: **4(a)**

## **REPORT OF THE CLINICAL LEAD, NOTTINGHAM WEST NHS CLINICAL COMMISSIONING GROUP**

### **NOTTINGHAM WEST BUSINESS PLAN**

#### **Purpose of the Report**

1. To seek comments and feedback from the Health and Wellbeing Board members to incorporate into the final version of the Business Plan (**Appendix 1**) as part of the consultation process; which will be complete in March 2012.
2. To align priorities with the Health and Wellbeing Strategy.

#### **Information and Advice**

3. **The plans of Nottingham West Clinical Commissioning Group reflect the values of the organisation.** These values guide us in the priorities we set for service change and in the way we approach new challenges. Our values are as follows:
  - Clinical Leadership at the heart of the organisation
  - Constantly innovate to improve quality and experience for patients
  - Work closely with local providers and partners for the benefit of the whole of our population
  - Apply the best evidence available to improve local services and reduce health inequalities
  - By good governance, openness and sensible use of resources, produce the maximum health outcomes for the whole of our population.

#### **How will the plan evolve?**

4. This document is in draft version and outlines our plans for meeting local health needs and highlights the key priorities of Nottingham West Clinical Commissioning Group for 2012/13.
5. The local plans and priorities will continue to evolve as we learn from engagement with patients, the public, partners and stakeholders.
6. Nottingham West will take account of the emerging joint commissioning priorities around older people, carers and children & vulnerable families in developing commissioning plans.

7. We also plan to include more local, practice and neighbourhood priorities, and will include how we can support the narrowing of the gap in inequalities that impact on health and life expectancy.
8. Financial plans, contract values and budget allocations for 2012/13 are also under development and will shape our intentions over the coming months. The NHS nationally and locally has to make quality and financial efficiency improvements in order to ensure that healthcare resources are used as effectively as possible, to have the maximum impact on the health of the local population we serve.

### **Local Health Needs in Nottingham West are key to priority setting**

9. Local health needs assessments highlight that:

- Most of Nottingham West's registered population lives in Broxtowe (86%), but over 6,300 live in Nottingham City and 4,600 live in Derbyshire, mainly Erewash (Sandiacre).
- The proportion of people from BME populations is higher in Broxtowe than in Nottinghamshire generally, as 9.8% of working age population are 'non-white'.
- Parts of Eastwood, Sandiacre, Stapleford and Chilwell West are in the most deprived 30% of areas nationally. Most differences in health issues including life expectancy relate to deprivation and there is an estimated four and half year gap in life expectancy between the GP practices with the highest and lowest life expectancy in Nottingham West.
- Childhood poverty; as with deprivation this varies across Broxtowe: from around 6% of children in Greasley, Trowell, Bramcote and Toton/Chilwell Meadows to around 25% in Eastwood South, Stapleford North and Beeston North.
- Nottingham West residents are estimated to have lower levels of smoking but slightly higher levels of binge drinking to the Nottinghamshire average.

10. Resources will be targeted where need is greatest, particularly where efforts are made to prevent ill health. Addressing the causes of ill health can only be achieved in conjunction with other agencies including the Local Authority.
11. Nottingham West will continue to promote positive lifestyle choices, especially relating to Smoking, Alcohol, Diet, Sexual Health (especially Teenage Pregnancy), physical exercise and substance misuse.
12. Managing patients in primary and community care to prevent escalation/deterioration of conditions is a priority. Nottingham West will continue to develop services that identify and support people with chronic illness, in particular:
  - COPD, CVD, Diabetes and Renal Disease
  - Cancer and services for those at the End of Life.

- Dementia.

### **Examples of Key Objectives to inform Clinical Services Redesign in 2012/13**

13. Based on our local needs and the national and local drivers for change, Nottingham West has identified a number of key priorities for service redesign. These priorities for the forthcoming year will shape the work plan of Nottingham West Board and the local team in the coming months. Key objectives include:

- Reduce unplanned hospital attendances and admissions resulting from a deterioration in patients' long term conditions
- Increase the number of patients who die at home having chosen to do so at the end of their lives
- Maintain the current peer review/elective referrals management process, reducing low priority procedures, reducing cancelled operations
- Reduce unnecessary hospital outpatient follow-up appointments and unnecessary pathology and other diagnostic tests
- Maintain and improve access to talking therapies
- Develop services for people with early-onset Dementia
- Ensure that people with Learning Disabilities have equal access to health services
- Ensure better integration of health and social care providers/pathways
- Develop and enhance the relationship between Nottingham West and County Health Partnerships (CHP) to focus on the delivery of agreed local intentions
- Promote good access to primary care across Nottingham West
- Support practices to maintain good practice in prescribing and explore ways to improve quality and reduce variation between practices.

### **How will we engage on our plans?**

14. Following the recent public meetings in Beeston and Eastwood, Nottingham West has established a Patient Reference Group with representatives from each practice's Patient Participation Group. Two representatives from the Patient Reference Group will represent the group on the Board. Nottingham West is also establishing a Local Health Forum to engage local people, carers and advocates, stakeholders and partners.

15. Practices have already been engaged in the development of the commissioning intentions and Nottingham West will identify and highlight any "neighbourhood" level opportunities for service improvements, as it is acknowledged that different areas have different health needs. The commissioning intentions were presented to the Broxtowe Partnership Health Task Group in December 2011 and the draft Business Plan is to be presented for discussion at the Broxtowe Partnership Board in February as well as at the Health and Wellbeing Board.

16. Nottingham West will also ensure full engagement with the Broxtowe BME Forum and seldom heard groups as part of the organisation's commitment to equality and diversity. Nottingham West will be assessed against the Equality Delivery System.

17. Nottingham West will hold a public Annual General Meeting, develop a Communications Strategy and Patient Engagement Strategy and take steps to increase the public transparency around Nottingham West Board decisions.

18. We will take every opportunity to work collaboratively with local groups and providers to redesign and integrate care pathways and improve outcomes. We intend to commission care more smartly to get safer, better, value-for-money and more convenient care for the population of Nottingham West.

### **Governance arrangements and outcome measures**

19. Nottingham West has an elected Clinical Lead who is also the lead for Quality & Engagement. The six GP Board members cover specific areas; Planned Care, Unplanned Care, Community Care, Prescribing, Information & Finance, Mental Health & Dementia. Nottingham West Board also includes two Patient Representatives, two managers from primary care, the Chief Operating Officer, Public Health local lead and Director of Finance. Nottingham West has a forum where all practices are represented, the Practice Members Group (PMG) and also has a Practice Managers Forum, Practice Nurses Forum and Practice Secretaries Forum.

20. Each clinical workstream has an identified lead; who leads discussion with individual practices, presents at PMG and education events, engages with other clinicians in the health community and reports progress to Nottingham West Board.

21. The Primary Care Trust Cluster has set up a robust Performance Management Office (PMO) at which our financial and activity plans are objectively challenged and our performance and outcomes are regularly monitored.

22. Plans must always be based and deliver against identified health needs, evidence cost effectiveness and improved quality, support patients choice and equity. Measurement of impact is not only against agreed key performance indicators but also against the delivery of priorities and objectives and alignment with Nottingham West values. Nottingham West has developed an evaluation process and governance framework to ensure robust review of services commissioned as local pathways. At the broader level Nottingham West is closely involved in the ongoing contractual performance management and quality target setting and reviews (such as CQUIN) of the major providers.

### **Statutory and Policy Implications**

23. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

### **RECOMMENDATION/S**

It is recommended that:

1) The Health and Wellbeing Board comment on the Nottingham West NHS Clinical Commissioning Group Business Plan for 2012/2013.

**MR OLIVER NEWBOULD**  
**Chief Operating Officer**  
**Nottingham West NHS Clinical Commissioning Group**

**DR GUY MANSFORD**  
**Clinical Lead**  
**Nottingham West NHS Clinical Commissioning Group**

**For any enquiries about this report please contact:**  
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**Constitutional Comments (LMc 06/02/2012)**

24. The Health and Wellbeing Board may approve the recommendations in the report.

**Financial Comments (RWK 07/02/2012)**

25. The plans set out in the Nottingham West NHS Clinical Commissioning Group Business Plan for 2012/13 will be delivered within the budget allocated.

**Background Papers**

None.

**Electoral Division(s) and Member(s) Affected**

Nottingham West.

HWB30