

Nottingham North and East CCG Plan on a Page

Vision

Strategic Aims

Delivery supported by CCG overarching values, principles, & priorities:

- Strong PPI & stakeholder engagement
- Interests of patients & the community at the heart of decision-making
- Increased patient satisfaction
- Strong clinical/member practice engagement & leadership
- Collaborative commissioning & partnership working
- Safe & high-quality services to ensure the best outcomes for patients within available resources
- Effective & robust performance management
- Effective governance
- Robust financial planning
- On-going clinical & non-clinical education & professional development

Strategic Context

- Diverse health needs & significant variations in level of deprivation across the CCG
- Increasing demand for healthcare services
- Rates of planned & unplanned care above national average
- Above average over 65 population
- Interdependency between Nottinghamshire CCGs
- CCG population distributed across five local authority areas
- Challenging financial position

Transformational Change

Underpinned by implementation of the Right Care programme to ensure continuous improvement and effective change management

Planned Care

- Reduce the number of new OP & follow-up appointments in secondary care
- Increase & improve planned care activity in the community through pathway redesign
- Transfer patient care from secondary to primary care where appropriate

Primary Care

Improve quality, efficiency & capacity in primary care by:

- Developing innovative ways of working & sharing good practice
- Reducing unwarranted clinical variation between GP practices
- Implementing a Right Care shared decision-making approach
- Implementing the Productive General Practice programme
- Increasing the use of tools such as eHealthScope, Balanced Scorecard & accreditation tools
- Implementing a GP practice seven days a week service pilot
- Reviewing existing LES & developing new ones where appropriate, e.g. Carers' Health Checks & Medicines Related Harm

People with Long-Term Conditions

- Increase the number of patients cared for in the community through pathway redesign & the development of community-based services
- Support patients to manage their conditions at home through increased use of telehealth technologies
- Increase the number of patients who die in their preferred place

Health & Wellbeing

- Continue to develop a strong relationship with the Health & Wellbeing Board to deliver the HWB strategy
- Develop shared commissioning priorities to address issues that impact on health & wellbeing (smoking, diet, exercise, support for carers, loneliness) through NNE CCG's District & Borough Councils Partnership Group

People with Mental Health issues & Learning Disabilities

- Increase dementia diagnosis rates & improve services
- Reduce admissions of patients with advanced dementia
- Provide additional support for carers
- Reduce the rate of hospital admissions for people with learning disabilities
- Improve the quality of community care for younger people with mental health issues

Older People

- Increase capacity to support demand management through the development of an integrated adult community nursing & therapy scheme
- Avoid admissions through the implementation of a crisis response service to support the care of patients at home
- Improve the case management of older people through increased use of the Community Geriatrician service, including assessment

Children & Young People

- Work collaboratively with partner organisations to maximise the range, integration & quality of services for children
- Develop a joint CCG/NCC Children's Commissioning Team to support integration of services
- Improve pregnancy outcomes, & child health & development, through implementation of the Family Nurse Partnership programme
- Improve breastfeeding rates at 6-8 weeks
- Reduce the rate of emergency admissions

Unplanned Care

- Reduce the number of 0-4 year olds attending A&E out of hours
- Reduce the rate of emergency admissions & length of stay of patients with long-term conditions such as COPD, heart failure & diabetes
- Reduce the overall number of patients attending A&E
- Identify & target patients at high risk of emergency admission
- Support patients to make appropriate emergency care choices



Nottingham North and East
Clinical Commissioning Group