

REPORT OF THE CLINICAL LEAD, BASSETLAW NHS CLINICAL COMMISSIONING GROUP

STRATEGY AND COMMISSIONING INTENTIONS

Purpose of the Report

1. To seek comments from the Health and Wellbeing Board members so that any feedback can be incorporated into the final version of the Strategic Plan and alignment with the emerging Health and Wellbeing Strategy can be ensured. Appended for information is the Single Integrated Plan 2011-15 the Bassetlaw Commissioning Organisation (BCO) developed jointly with the PCT during the previous planning round.
2. This plan is being updated to meet the requirements of NHS North of England, and will be consolidated with the plans from the other 4 CCG's into one plan for the South Yorkshire and Bassetlaw Cluster.

Information and Advice

3. As discussed at the previous meeting of this Board on the 11th November 2011, BCO plans to be in the first wave of those CCGs that are authorised by the NHS Commissioning Board to take on the full range of statutory commissioning functions. As part of the authorisation process, CCGs are required to submit a 'clear and credible plan' demonstrating alignment with the identified health needs of our population. At the meeting of the Health and Wellbeing Board on 11th November 2011, it was resolved that the Nottinghamshire Clinical Commissioning Groups be asked to present their emerging plans.
4. This 'Consultation Draft' of our Strategic Plan sets out a number of key priority areas (commissioning priorities) to meet the identified health needs of our resident and registered populations. In advance of the publication of the refreshed Joint Strategic Needs Assessment (JSNA) the plan has been developed using the current JSNA as well as public health data, which provides profiles to a practice level.

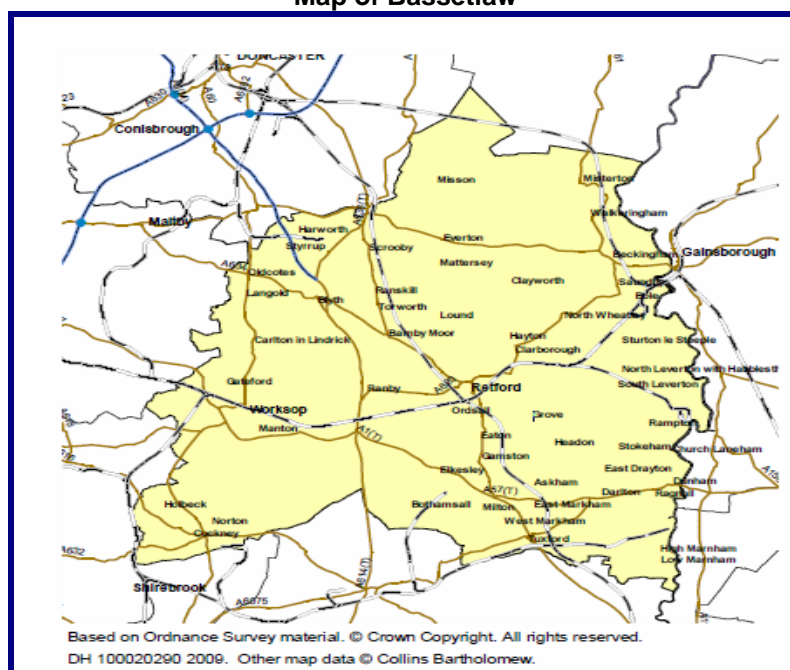
Our Population

Bassetlaw at a glance - POPULATION 111,700

- The health of people in Bassetlaw is generally worse than the England average.
- Life expectancy is significantly lower for both men and women living in Bassetlaw compared to the England average.
- Levels of deprivation, drug misuse, hospital stays for alcohol related harm, hip fractures in over-65s and deaths from smoking are all worse than the average for England.
- There are inequalities within Bassetlaw by gender and level of deprivation.
- Over the last ten years rates of deaths from all causes and early deaths from cancer have improved but are higher than the average for England.
- Rates of early death from heart disease and stroke have also improved and are now similar to the England national average.
- Levels of breast feeding initiation and Children's health in Bassetlaw are similar to the England average although physical activity of children in schools is worse than the England average. Levels of children in poverty and children's tooth decay are better than the England average.
- The rate of road injuries and deaths is higher in Bassetlaw than the England average.
- The Nottinghamshire Local Area Agreement has prioritised tackling physical activity, drug misuse, smoking, alcohol misuse, obesity, teenage pregnancy, road injuries and deaths, and all age, all cause mortality.

APHO Health Profile for Bassetlaw, 2009

Map of Bassetlaw



Strategic and Transformational Priorities

5. BCO has a number of strategic and transformational priorities, these include:

- Promote better health through addressing our key areas of health need (smoking, alcohol, obesity).
- Developing a new integrated model for urgent care with an Assessment and Treatment Centre at Bassetlaw Hospital acting as the hub.
- Prevent unnecessary hospital visits and/or admissions

- Demonstrate utilisation of high quality and cost effective prescribing
 - Developing support and care for patients with a long term condition.
 - Sustaining acute services at Bassetlaw Hospital that meet national standards.
6. Additionally, there are a number of more specific delivery areas. These include:
- New pathways for orthopaedics/arthroplasty, alcohol, falls and DVT.
 - A new information system linking general practices with Bassetlaw Hospital.
 - Dementia Care
 - Care of the elderly in the community
 - Carers and their support to all of the above.
7. Consultation on the current plan is underway. This includes 850 copies to GP surgeries, 165 copies to our patient database and includes all NHS Bassetlaw staff, all Bassetlaw GP's, and approx 150 partner organisations. Members are asked to note that BCO are working to the South Yorkshire and Bassetlaw (SY&B) Cluster timetable, therefore the process and timetable may vary the steps being taken by the Nottinghamshire CCG's.
8. Our plan has been led by clinicians and is now part of this ongoing consultation. One of the priorities for BCO has been to establish new and improved engagement mechanisms, as the organisation matures during 2012 this will include involving patients and the public in the governance and decision making of the CCG.
9. As a CCG we need to establish our organisation and deliver better health, whilst at the same time making productivity and efficiency gains that will be stretching. This is necessary to address rising demand for healthcare at a time when financial resources that we will receive from the Department of Health will not increase in line with that increase in demand. This will be delivered through ensuring that the services we commission deliver high **Quality**, exploit **Innovation**, maximise **Productivity**, and take a strong approach **to Prevention** of ill health. This is known as the **QIPP** challenge. This is a significant challenge indeed, and to succeed we intend to work in partnership with patients, members of the public, clinicians, managers, local authorities and voluntary organisations across our area.

Statutory and Policy Implications

10. 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 Bassetlaw NHS Clinical Commissioning Group Strategic Plan for 2012-2016.

DR STEPHEN KELL
Chair
Bassetlaw Commissioning Organisation

MR PHIL METTAM
Chief Operating Officer
Bassetlaw Commissioning Organisation & NHS Bassetlaw

For any enquiries about this report please contact:

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Constitutional Comments

11. The Health and Wellbeing Board is the appropriate body to consider the matters set out in this report.

Financial Comments

12. The report sets out the Strategic Plan for the Bassetlaw CCG. The plan will need to be delivered within the financial resources available.

Background Papers

None.

Electoral Division(s) and Member(s) Affected