

<b>SCRUTINY COMMISSION FOR HEALTH ISSUES</b>	<b>Agenda Item No. 9</b>
<b>12 MARCH 2013</b>	<b>Public Report</b>

## **Report of the Chief Operating Officer, Cambridgeshire and Peterborough Clinical Commissioning Group, Andy Vowles.**

**Contact Officer(s) – Jess Bawden Director of Corporate Affairs**  
**Contact Details -**

### **REPORT ON THE CAMBRIDGESHIRE & PETERBOROUGH CLINICAL COMMISSIONING GROUP BUSINESS PLANS**

#### **1. PURPOSE**

- 1.1 The purpose of this report is to update the Scrutiny Commission for Health Issues on the CCG's progress in developing its Commissioning Plan for 2013/14.

#### **2. BACKGROUND**

- 2.1 Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) comprises its 109 member Practices and covers a population of over 860,000 people. The CCG was 'authorised' by the NHS Commissioning Board in January and will be a statutory body from 1 April 2013, and is one of the largest in the country.

From the start, our objective was to develop a devolved model of local operation with clinical commissioning at its heart. We have also sought to achieve a smooth transition to the national model of Clinical Commissioning by building key elements of the new system well before 2013.

In Peterborough and the surrounding area, authority has been devolved to the Borderline and Peterborough Local Commissioning Groups (LCG). Two practices from the Northamptonshire have joined the Borderline LCG.

Clinical Commissioners will be responsible through the CCG for the following:

- Commissioning hospital and community health services – but not specialist services
- Managing prescribing based on clinical and cost effectiveness
- Developing a vision for commissioning local health and health care services with member practices, other professionals and key partners
- Working with local authorities, as well as playing a full part as a member of the Health and Wellbeing Boards
- Implementing structures and systems to safeguard transparency, accountability and good governance

#### **3. KEY ISSUES**

- 3.1 The CCG is in the process of producing an over-arching Annual Plan setting out the strategic and local commissioning priorities. The plan will take account of the Health and Wellbeing Strategies across Cambridgeshire, Peterborough, Northamptonshire and Hertfordshire, the views of the Health and Wellbeing Boards and the work of Local Commissioning Groups.

Since April 2012, clinical commissioners have been working alongside PCT staff, with delegated authority from the NHS Cambridgeshire & NHS Peterborough Cluster Board. In Peterborough the GP Sub-Committee has existed since April 2011. Over the last year much work has been done to establish the new organisation, and to the CCG was 'authorised' in January by the NHS Commissioning Board, which has existed since October 2012.

## **Vision, Mission and Values**

The CCG Governing Body and the member practices have developed the vision and values for the new organisation, and the local commissioning groups that make up the CCG. They are as follows:

### **Our Mission**

To empower our communities to keep healthy and to ensure fair access to good quality healthcare for all those who need it.

### **Our Vision**

NHS Cambridgeshire & Peterborough Clinical Commissioning Group will be led locally by clinicians in partnership with their community, commissioning quality services that ensure value for money and the best possible outcomes for those who use them.

### **Our Values**

- Patient focused - Our population, patients and their families are at the centre of our thoughts and actions we will commission care tailored to their needs
- Quality driven - We will constantly strive to be the best we can be as individuals and as an organisation and we will ensure that this is reflected in our commissioning decisions
- Work locally – Through our Local Commissioning Groups working within their communities
- Excellent – Our aim is to be an excellent organisation, for our communities, clinicians and our staff
- 

### **Priorities and Commissioning Intentions**

The CCG and LCGs have also spent a lot of time looking at the challenges facing our communities, in particular the growth in our older population over the next four/five years.

The CCG has selected three priorities for areas of focus and for discussion with all our providers as we set out our commissioning intentions for 2013/14. These are:

- Care of the Frail elderly
- End of life care
- Health inequalities, particularly in relation to coronary heart disease

## **4. IMPLICATIONS**

4.1 Local work in Borderline and Peterborough Local Commissioning Group to address these areas includes:

- Multi-Disciplinary Team, focusing on improving outcomes and patient experience for patients for Progressing development of integrated care
- End of Life Care service development
- Mental health services, clinicians leading redesign work with CPFT
- Prescribing, reviewing appropriate and best value prescribing

These link well to a number of priorities in the in the Health and Wellbeing Board areas that the CCG covers. In Peterborough the following priority areas have close links:

- Enable older people to stay independent and safe and enjoying the best possible quality of life
- Narrow the gap between those neighbourhoods and communities with the best and the worst health outcomes, whilst improving the health of all
- Enable good child and adult mental health through effective, accessible mental health promotion and early intervention services.
- Maximise the health and wellbeing and opportunities for independent living for people with life-long disabilities and complex needs. This is through robust, integrated care pathways, care planning and commissioning arrangements from early years into adulthood and old age.

## **5. ENGAGEMENT**

- 5.1 The Borderline and Peterborough Local Commissioning Group recognises the importance of working closely with Peterborough City Council and Fenland District Council and has had a number of meetings in order to share priority areas and establish working relationships.

The new Clinical Commissioning Groups are very keen to ensure there is widespread engagement with patient groups across the area. There is a Patient Reference Group, which is a formal sub-committee of the Shadow CCG Governing Body. This is made up of patient representatives from each LCG Board as well and there will also be representation from Local Healthwatch once they are established. The CCG will retain the same statutory duties around public consultation when considering major service changes, and is committed to involving patients and elected representatives in all stages of the commissioning process.

The Borderline and Peterborough Local Commissioning Group and the CCG are keen to engage further and would be happy to attend further meetings. Attached is a one page summary of our business plan for 2013/14.

## **6. NEXT STEPS**

- 6.1 Cambridgeshire and Peterborough CCG governing body discussed our first draft business plans on 5 February 2013. These were approved subject to further scrutiny and engagement. The Area Team of the National Commissioning Board will ratify our business plans in April 2013. We will continue to develop and modify our plans as we work on our priorities and outcomes, involving and engaging with national, area and local stakeholders.

## **7. APPENDICES**

- 7.1 Strategic Plan on a Page 2013-2015

This page is intentionally left blank