

Establishing the Clinical Commissioning Group for Brighton and Hove

Geraldine Hoban

Chief Operating Officer



National Change to the NHS in July 2010



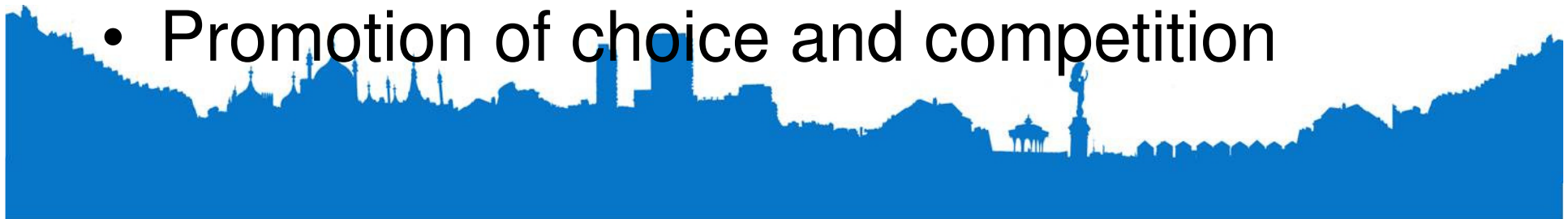
Process

- White Paper launched on 10 July 2010
- Mixed reaction
- Paused' in 2011 and various listening exercises but fundamentals unchanged
- Passed by House of Lords October 2011
- Further line by line scrutiny in Feb
- Significant reorganisation already underway



Summary of Key Changes

- Abolition of SHAs - establishing the NHS Commissioning Board
- Transferring Public Health to LAs and establishing Health and Well Being Boards
- Abolition of PCTs - establishing Clinical Commissioning Groups
- Creation of Healthwatch
- Promotion of choice and competition



GP Commissioning Locally

- Clustering of four PCTs across Sussex to one
- One emerging Clinical Commissioning Group for the City comprising:
 - 47 GP practices (each covering 1-16,000 pts)
 - 299,000 population approx
 - 184 GPs
- Engagement via three Localities: East, Central and West
- Co-terminous with Local Authority Boundary



Local CCG Leadership

- Primary care elections in April 2011
- Chair – Dr Xavier Nalletamby (St Peters);
- Dedicated GP, Nurse and Practice Manager Leads for priority areas and localities
- Good retention of reconfigured PCT staff
- Public health function embedded in CCG



CCG Roles and Responsibilities

- Commissioning a wide range of health services for local population e.g. mental health, hospital care, community services
- Won't commission – primary care, specialised services (NCB)
- Promote integrated health and social care
- Involve patients, carers and the public in commissioning decisions and plans



NHS now

Department of Health

Strategic Health Authorities

Primary Care Trusts



NHS from 2013

DOH



**NHS Commissioning Board
4 Regional Offices**



**50 Local Offices
(footprint of clustered PCTs)**



CCGs



What are CCGs Doing?

- Responsible (not accountable) for annual planning and commissioning function – £500m
- Supporting and engaging with local GP practices to inform priorities and planning
- Working closely with NHS Sussex and neighbouring CCGs
- Building relationships with LA e.g. H&WB
- Meeting the public and local partners e.g. local events



What are our priorities?

Mental Health

Improving dementia care

Improving mental health crisis management

Improving access to psychological therapies

Care of Elderly

Improving community services

Improving access to services

Supporting people to keep well and healthy at home

Children's Services

Develop children services closer to home

Supporting the development of the new health visiting service



Towards Authorisation

- Risk assessment on configuration and size – Dec 2011 – green on all indicators
- Self Assessment against 6 Domains – Implementation of OD Plan
- Shadow running from April 2012
- Formalise final structure/shared services within £25 per head running costs
- Apply for authorisation – July 2012
- Fully authorised – April 2013



Any Questions?

