

NHS B&NES Key Issues Briefing Note

Overview and Scrutiny Panel – 18th January 2011

1. PUBLIC ISSUES

Policy Reform

'Equity and Excellence - Legislative Framework and Next Steps'

The release of the white paper *Equity and Excellence- Liberating the NHS* was reported to the panel in September. Following public consultation on the proposals *Equity and Excellence- legislative framework and next steps* was published on 15th December. It confirms the central aims of the reforms:

- To put patients right at the heart of the decisions about their care
- To put clinicians in the driving seat on decisions about services
- To focus on delivering health outcomes that are comparable with, or even better than, those of our international neighbours.

As a result of consultation the Government has revised its approach in certain key areas including:

- To strengthen the public health role of local authorities
- To require all GP consortia to publish constitutions to increase transparency
- To invite the Care Quality Commission to create a more distinct identity for HealthWatch England
- For maternity services to be commissioned by GPs rather than the NHS Commissioning Board
- To give local authorities greater scrutiny of all NHS-funded services
- To phase the timetable for local authorities to take over commissioning complaints
- To give GP consortia a stronger role in supporting the NHS Commissioning Board
- To create an explicit duty for all arm's-length bodies to cooperate in carrying out their functions, with a mechanism for resolving disputes
- Allow a longer transition period for completing reforms to providers
- Create a clearer, more phased approach to the introduction of GP consortia by establishing the programme of GP consortia pathfinders
- Accelerate the introduction of the health and wellbeing boards.

Change Programme

In the November briefing note it was reported that the change agenda within the partnership was being progressed within 4 principle programme areas. A commitment was made to keep the panel informed on progress against these principle programmes:

Transforming Commissioning

The NHS Operating Framework was also published on December 15th alongside the white paper referenced above. The framework describes 2011-12 as a year of transition during which preparations will be made for the structural reforms outlined in 'Equity and Excellence-Legislative Framework and Next Steps' Principal announcements are the direction to PCTs to establish larger cluster arrangements by June 2011, the extension of the QIPP timetable to April 2015 and the expectation on all GP practices to be grouped into consortia by April 2012. Discussions are currently taking place with the SHA and neighbouring PCTs on how we move to the new cluster configuration (population circa 1m) by June 2011.

The first NHS Outcomes Framework was published at the end of December. This will be the new accountability mechanism between the secretary of state for health and the new NHS Commissioning Board. It is intended to help the NHS move away from process targets to focus on health outcomes. It is structured around five outcome goals:

- Preventing people from dying prematurely
- Enhancing the quality of life for people with long term conditions
- Helping people recover from ill health or following injury
- Ensuring people have a positive experience of care
- Treating and caring for people in a safe environment and protecting them from avoidable harm

There are 50 indicators within the framework, which was developed following public consultation last year. It is acknowledged that for some outcomes we need to develop better data to track progress.

Transforming Community Services

The Integrated Business Plan (IBP) for the proposed social enterprise for community health and social care services was submitted to the SHA on 24th December. The submission was caveated on the basis that both PCT and Council still need to make their final decision on how to proceed. In order to comply with the national timetable there will now be an intensive period of assurance around the IBP and the financial modelling while simultaneously progressing the national recruitment of Chair and CEO Designate for the proposed provider vehicle.

Transforming Public Health

The White Paper on Public Health was published in December. Public Health England will be created to give national leadership on population wide issues such as Flu, while Directors of Public Health will move to Councils, with the aim of giving more control to local communities over how public health funding is used. The DH has also published consultation documents on outcomes and on funding. The White Paper sets out proposals for making patients and service users more active participants in their care.

New statutory duties for local authorities

Because of our existing work in partnership and experience of commissioning linkages across health and social care we are well placed to pick up the new responsibilities outlined within the white paper. In terms of the establishment of a Health and Wellbeing Board DH have invited B&NES to be an early implementer and the first discussion group session with DH took place in early December. At present we do not have all the detail and further legislation is awaited but the response to the white paper released on Dec 15th gives additional information. In particular the role of health and wellbeing boards is being further enhanced with Local

Authorities being given a new responsibility to develop a joint health and wellbeing strategy. Announcements have now also been made confirming that Health Watch will be led by a statutory committee within the Care Quality Commission (CQC) and will have greater powers to refer services to Health Watch England for investigation where there are public concerns.

PERFORMANCE AND OTHER ITEMS

Stroke Services

The CQC have just published their review of Stroke Services, which looked at the care experienced by people who had stroke and their carers. The review started from the point people prepare to leave hospital, to the long-term care and support that people may need to cope with stroke-related disabilities. It looked at both health and adult social care, as well as links to other relevant services, such as local support groups and services to help people participate in community life. NHS B&NES was assessed as being in the 'best performing' category for the care and support provided by B&NES Community Health & Social Care Services, in particular the Community Stroke Service.

Winter planning - Flu

Health and Social care services have been under considerable pressure due to the severe weather conditions, early outbreaks of norovirus and more recently the escalation in the number of people becoming seriously ill with flu. Local services are coping well, with staff from all agencies demonstrating exceptional dedication to keeping services running and supporting vulnerable people. The Partnership have been using all communication methods both with the public and key stakeholders to promote health behaviours that can protect against infection in combination with the national campaign to encourage vaccination of vulnerable groups.

Re-ablement

Following national announcements in October 2010 of a £70m fund to stimulate re-ablement services the PCT has had its non recurrent allocation confirmed at £212k. On January 4th the PCT was advised of a further non recurrent allocation of £495k. Both sums of money are to be used before the end of March 2011 to help avoid demand on social care services through prevention and early intervention support and to help people leave hospital. Work is underway to scope how best this money can be used for the benefit of the local system. Initial discussions have taken place with the RUH, B&NES Community Health & Social Care Services and a range of third sector providers to scope the current re-ablement service provision and identify gaps and opportunities to build capacity.

Health and Wellbeing Network Event

The next workshop for the Health and Wellbeing Network is taking place on February 9th at the Guildhall between 9.30 am and 1pm. The subjects being covered are the public health white paper reforms and their local impact and Re-ablement. Panel members are invited to attend and information has been circulated.