

HEALTH AND WELLBEING BOARD			
Report Title	South East London Commissioning Strategy Programme Update		
Contributors	Head of Strategy & Organisational Development, NHS Lewisham Clinical Commissioning Group	Item No.	4
Class	Part 1	Date: 25 th March 2014	

1. Purpose

- 1.1 The six Clinical Commissioning Groups (CCGs) in south east London are working together to produce a five year strategy. A report to the Board in January presented an outline of the programme approach, strategic planning process, and governance arrangements. The strategy is still being developed and this report provides an update on progress with the overarching draft case for change, the emerging strategic opportunities and engagement on these; the establishment of the programme's Clinical Leadership Groups and forthcoming key dates and milestones.

2. Recommendation/s

Members of the Health and Wellbeing Board are invited to:

- 2.1 Note the update on the development of the South East London Commissioning Strategy.

3. Policy Context

- 3.1 The NHS England strategic and operational planning guidance. 'Everyone Counts: Planning for Patients: 2014/15-2018/19' sets out a framework within which commissioners will need to work with providers and partners in local government to develop strong, robust and ambitious five year plans to secure the continuity of sustainable high quality care for all.
- 3.2 While each CCG is accountable for developing a Strategic, Operational and Financial plan, they may also choose to join with neighbouring CCGs in a larger 'Unit of Planning' to aggregate plans, ensure that the strategies align in a holistic way and maximise the value for money from the planning resources and support at their disposal.

4. Draft Case for Change and Strategic Opportunities

- 4.1 The strategy's overarching draft case for change provides a south east London- level synthesis of the issues and challenges facing the six boroughs.
- 4.2 A plain English summary and a technical summary have been produced for further engagement with patients, local people, CCG membership, NHS and social care staff. These summaries are supported by a key facts and figures document.
- 4.3 Both summaries also feature the emerging collective strategic opportunities for the strategy, which represent early thinking by the Clinical Executive Group. The Clinical Executive Group believe the strategy should focus on these for any proposed future transformation of services across south east London.
- 4.4 During March 2014, CCGs will be undertaking further engagement with patients, local people and memberships on the draft case for change and emerging strategic opportunities via their existing local engagement mechanisms.
- 4.5 Other local clinical, NHS and social care staff will be engaged on these via NHS and local authority members of the Partnership Group.
- 4.6 Each CCG will have specific pages on their website introducing the strategy to the public. The full draft case for change, the summary versions and factsheet will be available via these pages for downloading and response.

5. Clinical Leadership Groups

- 5.1 Clinical Leadership Groups have been established as sub-groups of the Clinical Executive Group to ensure that this commissioning-led strategy remains clinically-driven and focused on addressing local health needs.
- 5.2 The Clinical Leadership Groups bring together medical, nursing, midwifery and social care leads from organisations across south east London to develop proposed new models of care based on the emerging strategic collective opportunities and to consider their impact across the south east London health and social care system. Any proposals will be subject to further stakeholder engagement.

6. Next Steps

- 6.1 The focus of the strategy work during March 2014 will be development of the draft strategy for submission to NHS England on 4th April 2014. This will be coordinated with the CCGs' two-year Operating Plans and the Better Care Fund plans which CCGs are developing jointly with local authorities.

- 6.2 During April and May, further development of the strategy will be taking place to prepare for submission of the final strategy to NHS England by 20th June 2014.

7 Financial implications

- 7.1 A financial analysis is being undertaken as part of the strategic case for change.

8. Legal implications

- 8.1 Members of the Board are reminded that under Section 195 Health and Social Care Act 2012, health and wellbeing boards are under a duty to encourage integrated working between the persons who arrange for health and social care services in the area. This is recognised in the strategic priorities identified in the development process.

9. Crime and Disorder Implications

- 9.1 There are no specific crime and disorder implications arising from this report.

10. Equalities Implications

- 10.1 The health needs analysis informing the development of the strategy is based on the local Joint Strategic Needs Analysis and CCG strategy which include the health inequalities implications for Lewisham's population.

11. Environmental Implications

- 11.1 There are no environmental implications arising from this report.

Background Documents

NHS England Strategic and Operational Planning 2014-19, 'Everyone Counts: Planning for Patients 2014/15-2018/19'
<http://www.england.nhs.uk/ourwork/sop/>

If there are any queries on this report please contact Charles Malcolm-Smith, Head of Strategy & Organisational Development, NHS Lewisham Clinical Commissioning Group, on 020-7206-3246, or by email at: charles.malcolm-smith@nhs.net