

# Meet your new local NHS: Redditch & Bromsgrove Clinical Commissioning Group

August 2012





# Welcome

## Clinical Commissioning Groups (CCGs) were born from the government NHS reforms in July 2010.

The Government White Paper 'Equity and Excellence: Liberating the NHS' explained how health services would work better if local doctors decided what health services were needed for their local population. This would help ensure the local residents could enjoy lives which were as healthy as possible. In Worcestershire there are 3 CCGs – Redditch & Bromsgrove, Wyre Forest and South Worcestershire.

## We are called NHS Redditch & Bromsgrove Clinical Commissioning Group (RBCCG)

We are a new NHS organisation which looks after the health and wellbeing of Redditch and Bromsgrove residents. We are a clinically led organisation which means that the local doctors make decisions on healthcare services and how money is spent. We consist of 22 GP member practices and our job is to serve our 171,000 local people with the most appropriate high quality health services, whilst delivering best value for money, with a budget of £180 million.

Currently this is the job of the Worcestershire Primary Care Trust (PCT) however the PCT will no longer exist after 31<sup>st</sup> March 2013. We will then have full responsibility for commissioning (buying) Redditch and Bromsgrove healthcare services and take on our statutory duties from 1<sup>st</sup> April 2013.



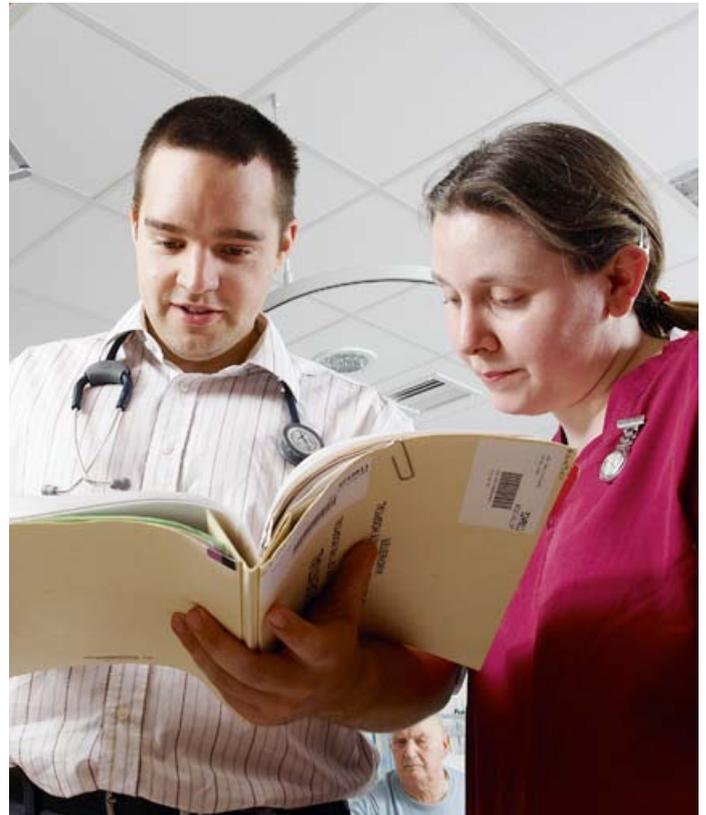
### What is commissioning?

Commissioning in the NHS follows a number of stages. The first step is to look at the health needs of the local population. Health needs are put in order of priority.

The local NHS then makes sure there are effective services in place to meet the needs of the local population, by buying in (commissioning) the services.

The services are evaluated to make sure they meet the requirements of the local people.

RBCCG will not supply healthcare services. We will buy in or commission services from high quality provider organisations including from local hospitals.



# Meet us

RBCCG is a membership organisation consisting of the 22 Redditch and Bromsgrove GP practices:

- Barnt Green Surgery – Barnt Green
- The Bridge Surgery – Redditch
- Catshill Village Surgery – Catshill
- Churchfields Surgery – Bromsgrove
- Cornhill Surgery – Rubery
- Crabbs Cross Medical Centre – Redditch
- Crabbs Cross Surgery – Redditch
- Davenal House Surgery – Bromsgrove
- The Dow Surgery – Redditch
- Elgar House Surgery – Redditch
- The Glebeland Surgery – Belbroughton
- Hillview Medical Centre – Redditch
- Hollyoaks Medical Centre – Wythall
- Hollywood Medical Practice – Wythall
- Maple View Medical Practice – Redditch
- New Road Surgery – Bromsgrove
- New Road Surgery – Rubery
- The Ridgeway Surgery – Astwood Bank
- St Johns Surgery – Bromsgrove
- St Stephens Surgery – Redditch
- Winyates Health Centre – Redditch
- Woodrow Medical Centre – Redditch

The practices have a history of working together as part of a Practice Based Commissioning Cluster since 2006. This has provided a strong foundation for RBCCG.

## Meet the Governing Body

The Governing Body is a number of elected members who jointly oversee the activities of RBCCG.



### Dr Jonathan Wells

Jonathan is Chair and Clinical Lead of Redditch & Bromsgrove Clinical Commissioning Group.

Jonathan spends 2 days a week in this role and the remaining time in clinical practice. In addition to Chair of the RBCCG Governing Body, Jonathan is also Lead GP for Community Services and Remuneration Committee.



### Dr Richard Davies

Richard is Assistant Clinical Chair, Governing Body Member and Lead GP for the RBCCG Finance and Performance Committee.

Richard is Lead GP for Finance and QIPP, and also leads on Hospital Services.



### Dr Catherine McGregor

Catherine is a Governing Body GP and Lead GP for Women's and Children's Services.



### Dr Rupen Kulkarni

Rupen is a Governing Body GP and Lead GP for QIPP projects including: Orthopaedics, Physiotherapy, Pain Services and Ophthalmology. Rupen is also the Lead for the RBCCG Audit and Risk Committee.



**Dr Stephen Miskin**  
Stephen is a Governing Body GP and Lead GP for Mental Health and Patient and Public Involvement.



**Judy Adams**  
Judy is RBCCG Patient and Public Involvement Forum Chair and Lay Member. Judy works closely with the RBCCG Locality Team and leads the implementation of the RBCCG Communications and Engagement Strategy.



**Dr Edward Barrett**  
Edward is a Governing Body GP and Lead GP for Medicines Management.



**Linda Pratt**  
Linda is Lead Practice Manager and represents all of the Practice Managers across Redditch and Bromsgrove. Linda has a crucial role in primary care development and practice engagement.  
  
Linda is a member of the RBCCG Audit & Risk Committee.



**Dr David Law**  
David is a Governing Body GP and Lead GP for Quality and Patient Safety  
  
David is a member of the RBCCG Quality and Patient Safety Committee.



**Mary Walters**  
Mary is the Chief Finance Officer for RBCCG.  
  
Mary has a crucial role supporting and leading all aspects of RBCCG financial management and the arrangements for the RBCCG Finance and Performance Committee and the RBCCG Audit & Risk Committee. Mary works closely with Dr Richard Davies as RBCCG Lead GP for Finance and QIP.

Each of the Governing Body GP's has responsibility for 3-4 practices or 'Zones'. Adopting a 'Zoning' approach means that the Governing Body GP's visit their member practices on a quarterly basis to maximise their involvement in RBCCG business. 'Zoning' is viewed as an important opportunity to share key commissioning information, service developments and to reflect upon individual practice performance and outstanding issues.



**Simon Hairsnape**  
Simon is the Chief Officer for Redditch & Bromsgrove and supports RBCCG Governing Body in all aspects of RBCCG business.



**Jo Galloway**  
Jo is RBCCG Executive Nurse. Jo is responsible for the Quality and Patient Safety agenda.  
  
Jo works closely with Dr David Law on the RBCCG Quality and Patient Safety Committee.



**Tony Hadfield**  
Tony is RBCCG Deputy Chair (Lay Member) and RBCCG Lead for Governance, Audit and Remuneration.  
  
Tony Chairs the RBCCG Remuneration Committee, RBCCG Finance and Performance Committee and the RBCCG Audit & Risk Committee.

**Specific commissioning support for the clinicians will also be provided by Arden Commissioning Support Unit, across all 3 CCG's in Worcestershire.**

## How we are different

Worcestershire Primary Care Trust (PCT) has been commissioning health services for the Worcestershire community. NHSWPCT works on a county-wide level, a much larger area than a local NHS Clinical Commissioning Group and whilst there has been a small level of clinical involvement, local doctors have had limited input around decisions on health services which affect local patients.

RBCCG puts your local doctors in charge of making the important decisions on local health care. We are focused on the needs of Redditch and Bromsgrove residents and are in touch with our patients. This allows our decisions to be much more sensitive to the needs of our local community. This makes it possible to commission quality local services with clear specifications.



## What we will do

RBCCG will work on behalf of the local population to ensure high quality health services are available to them. We will be honest and open, engaging with our residents on the commissioning of health services.

We will work together as a clinically led group to promote high quality and affordable healthcare.

### As your local NHS organisation we will aim to:

- Improve the quality of care for patients and reduce system waste using integrated models of care wherever possible (working across organisational boundaries wherever necessary);
- Apply a population-based approach to commissioning – using Public Health needs assessment to support future commissioning intentions;
- Empower patients with the active engagement and participation of local patients in the commissioning agenda;
- Apply a systematic and proactive approach to the management of chronic (long lasting) disease.

# How we will make it happen

We will successfully achieve our aims by working to our established values, which will be inherent to how we operate as a CCG.

Our vision is:

***‘Working together to promote high quality, affordable healthcare’.***

Our values are:

- Promoting a fair, ethical and transparent culture
- Placing patient safety and experience at its core
- Identifying that ‘partnerships matter’
- Listening and responding
- Promoting evidence based practice; ‘right care, right place, right time’
- Patient Choice matters
- Promoting privacy, dignity and mutual respect
- Working together with member practices
- Promoting good health and wellbeing
- Identifying opportunities for service redesign and innovation
- Securing value for money
- Being a good employer

In order to succeed, we will carefully consider efficiencies and productivity opportunities across the whole healthcare system - from primary to secondary care. We will work in partnership with other key clinicians, social services and patient representatives to integrate services and redesign healthcare pathways.

## The challenges

The NHS as a whole is facing many challenges. Although funding has slightly increased from year-on-year budgets, medical advances which offer improved ways to treat disease are very costly. This, alongside people living longer has put greater pressure on the NHS.

The financial challenges are significant in their own right, but we will not look at them in isolation. Our focus will be to strike a balance between financial pressures and continuous improvement in quality and service performance.

We recognise there isn’t one solution to tackle all the challenges we face. Rather a series of solutions that form an integrated approach to improve healthcare locally.



**Definition:** healthcare pathways are structured plans of care.

## Partnerships matter

We know to deliver the best NHS service locally we need to work in partnership. By working together with Redditch & Bromsgrove district councils, Worcestershire County Council, NHS Worcestershire, Wyre Forest CCG, South Worcestershire CCG, Worcestershire Acute Hospitals Trust and Worcestershire Health and Care Trust we can ensure we are not duplicating work. Partnerships promote more efficient and innovative solutions to the health and wellbeing needs of the local community.

We will continue to build upon the strong history of partnership working in Worcestershire that can be seen through a robust joint commissioning unit, an effective Health and Well Being Board and a joined up approach to system transformation.

Our Chair, Dr Jonathan Wells is an active partner on the Worcestershire Health and Wellbeing Board (HWB). This is a forum which has been established for all partners involved in commissioning or providing healthcare in Worcestershire. The HWB oversees the new system for local health commissioning.

The HWB is responsible for assessing the needs of people across the county by producing a Joint Strategic Needs Assessment (JSNA) and for producing Worcestershire's Health and Wellbeing Strategy. Formally established in April 2012, the HWB will become statutory from April 2013. RBCCG will ensure the strategy is put into action for our local residents.

### Reducing health inequalities

We want to close the gap between the best and the worst health in the Redditch and Bromsgrove population. We will do this by focusing resource and efforts on identified areas of highest need within the two districts. By working in partnership with existing partner organisations we can draw on their expertise in these identified areas to tackle health inequalities.

We are working closely with the Public Health team, and have invested £255,000 to support projects to improve health and wellbeing. By improving the health and wellbeing of those worst off locally, we will be preventing disease and reducing demand on costly health services.



# Redditch & Bromsgrove CCG Priorities 2012/13

We have worked with our member practices to develop a clear set of priorities to work towards. The priority areas have been informed by the Joint Strategic Needs Assessment for Redditch and Bromsgrove and are part of an annual commissioning process. These priorities cover key service improvement in areas, such as improving access to A&E and securing improvements around cancer care. Our priorities also cover development priorities and outcome aspirations, such as reducing deaths from stroke and heart attacks.



## We have identified the following priorities:

1. Develop and sustain a culture of quality
2. Achieve and sustain financial balance
3. Reduce inappropriate unscheduled care admissions
4. Improve access and outcomes for Mental Health Services
5. Reduce vascular deaths (heart attack and stroke)
6. Improve transfers of patient care
7. Improve access, range and proportion of services within Primary Care
8. Support and deliver the Cancer Strategy within Worcestershire



# Actions speak louder

Our achievements so far are testament to partnership working and being an organisation that is committed delivering the best quality care for Redditch and Bromsgrove residents.

## To date we have:

- Helped the NHS Worcestershire Primary Care Trust achieve a Quality, Improvement, Productivity and Prevention (QIPP) saving of £3.4 million for 2011/12 following a £4 million overspend in 2009/10.

- Contributed to orthopaedic pathway developments and improvements through:
  - The implementation of the guidelines for management of orthopaedic conditions within primary care;
  - Musculoskeletal Integrated Clinical Assessment & Treatment Service (MSK ICATS) established and delivering QIPP – improvements in access to primary care services;
  - Community Musculoskeletal physiotherapy services – short waiting times and increased access for Redditch and Bromsgrove patients;
  - The combination of orthopaedic developments has led to a reduction in outpatient referrals to Worcestershire Acute Hospitals NHS Trust, as patients are more appropriately (and conveniently) managed within the community setting.

### **Definition:** Orthopaedic

The branch of medicine that deals with the prevention or correction of injuries or disorders of the skeletal system and associated muscles, joints, and ligaments.

- Medicines Management QIPP was delivered through a Pharmacy Subgroup, with the introduction of Scriptswitch software, which offers more efficient prescribing of medicines, alongside subsequent improvements in prescribing practice.

- Developed and implemented a Redditch & Bromsgrove CCG Information Dashboard. This puts performance related information at the fingertips of the member practices. It was developed in partnership with member practices following a comprehensive information needs assessment process.

- Produced a Redditch & Bromsgrove CCG Communications Strategy and related action plan. This was developed in partnership with a wide range of local stakeholders to reflect the diverse needs for Redditch & Bromsgrove CCG engagement and related communication. Guided by the Patient and Public Involvement Forum (PPI Forum), the action plan will be delivered and monitored through the PPI Forum and Redditch & Bromsgrove CCG management team.

- Established a community service in Bromsgrove and Redditch towns to improve access for patients for the management of simple eye conditions, using an agreed service specification.

- Embedded Governing Body development and 'Zoning' arrangements as part of practice level accountability and Redditch & Bromsgrove CCG engagement.

- Established and evolved Integrated Community Teams:
  - Establishment of 4 multi-professional locality teams – to maximise community service provision and promote a more integrated approach for patients within their own homes. This reduces patients’ confusion and increases efficiency and productivity;
  - Successful introduction of Care Managers – to support hospital admission avoidance and facilitate early, supported discharges;
  - Falls QIPP delivered through community nurses for the elderly using falls assessments.

- Launched a Care Home Local Enhanced Service (LES):
  - Care Home patients are a particularly vulnerable group, often having multiple illnesses, yet unable to attend surgeries for ongoing management of their long term conditions. It can be difficult to avoid unnecessary emergency hospital referrals, and End of Life planning is sometimes a challenge;
  - The outcomes of the Redditch & Bromsgrove CCG Care Home LES will be improved management of long term conditions; a reduction in hospital admissions, and a reduction in hospital as place of death.

- Established a proactive Referral Management Local Enhanced Service (LES):
  - Significant reductions in all GP outpatient referrals in 2011/12 were made as a result of practices maximising opportunities for patient treatment within a primary care setting;
  - Inter-practice referrals have been encouraged and promoted through Redditch & Bromsgrove CCG.



# Moving forward

## Joint Services Review

RBCCG is actively involved in the process being undertaken to thoroughly review hospital and community services in Worcestershire. The aim of the review is to secure high quality health services for local people, which are sustainable.

Working on behalf of our Redditch & Bromsgrove residents, we have representatives directly contributing the process of the review. The results of the Joint Services Review will not be known until later in the year. Our focus in the coming year is on participating in the review to the fullest extent, and in the best interests of our local population.

## Engaging with partners and public

RBCCG is committed to engaging with the local community, partners, stakeholders and listening to the views of the public to help make our health services better.

We will work with local people to engage them in developing and improving health services to ensure services are commissioned and delivered effectively. There are huge benefits to be gained from public and patient participation in decision making and ensuring services are shaped by community needs and are socially inclusive. Our patient and public engagement will be a two-way process of both informing and building understanding, as well as listening and responding to audience views and opinions.

It is important that patients and the public also understand how their views will be used, which decisions they will be involved in, and when and how decisions will be made.

## We will:

- Build communications and engagement into the commissioning process and ensure that all commissioned schemes have been developed considering patient and stakeholder feedback.
- Work with partners inside and outside of the health economy to achieve joined up engagement, messages and campaigns.
- Establish methods of communicating and engaging with Redditch & Bromsgrove residents to create a culture that involves patients and the public at all levels of decision making.
- Develop a real understanding of the local population and significant ideas and opinions amongst communities.
- Develop processes, infrastructure and capacity to deliver effective engagement.
- Ensure that all engagement is accessible and take into account the varying needs of different groups of the local population.
- Support the planning and delivery of campaigns and initiatives.
- Promote a professional, empathic and efficient Patient Relations Service (complaints). Work in partnership with Worcestershire Local Involvement Network (Healthwatch from 2013) to ensure the signposting role of the Patient Advice and Liaison Service (PALS) is maximised.

We realise to be truly effective we need to ensure we actively engage with a wide range of stakeholders and residents that are representative of the Redditch and Bromsgrove area. We will seek the views of the 'seldom heard' and not just the views of those who actively engage with us.

## In 2012/13:

At a local GP practice level, **Patient Representation Groups (PRGs)** will be established for local people to share ideas on local health services.

Our currently active **Patient and Public Involvement (PPI)** forum will continue to build momentum, by linking with PRGs ensuring a wider representation of the Redditch and Bromsgrove area. The PPI forum will feed into the Redditch & Bromsgrove CCG governing body.

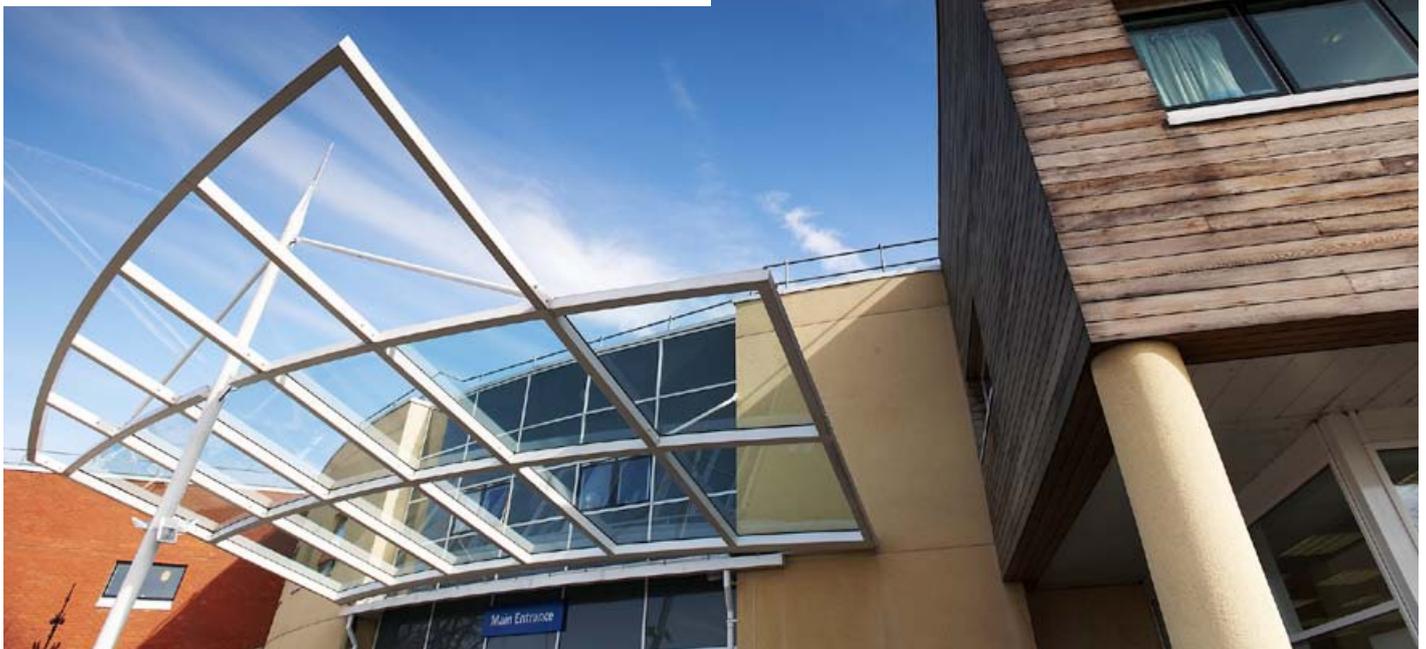
We will create and launch a **PPI Membership Scheme** open to all Redditch and Bromsgrove residents to join.

The scheme will ensure local people:

- are aware about their local NHS services
- understand what clinical commissioning is
- have the opportunity to inform and influence commissioning decisions
- have the opportunity to be trained to monitor services.

The scheme will ultimately contribute the on-going improvement of health services.

We recognise not everyone will want to get involved at the same level, or be interested in all local health services. The most important element of the scheme is that there is an opportunity for local people to get involved if and when they want to. For the scheme to work effectively, involvement will be on an informed basis, with members at varying levels. Involvement will range from 'armchair' to formal attendance at regular meetings and being actively involved in reviewing services, and seeking the views of patients.



# Quality, Innovation, Productivity and Prevention (QIPP)

The QIPP programme is a national Department of Health strategy involving all NHS staff, patients, clinicians and the voluntary sector. It aims to improve the quality and delivery of NHS care while reducing costs to make £20 billion efficiency savings by 2014/15. These savings will be reinvested to support the front line.

Locally, RBCCG has contributed significantly to the Worcestershire wide development of QIPP programmes for 2012/13. Focusing on our area, we will manage and monitor the programmes to ensure targets are met.

*The QIPP programmes in Worcestershire are worth £11.4m in total, with the Redditch and Bromsgrove element equivalent to £3.3m based on our population size.*

In addition to the project areas already identified in section 7, we will address our 'QIPP' challenge through a range of projects including the following:

## A. We will enhance the range (and quality) of services available to patients within a community setting to help prevent avoidable hospital treatment:

- A Referral Management and Redditch & Bromsgrove CCG 'Dashboard' Local Enhanced Service in place, whereby practices can review all possible routine patient cases prior to any referral being made. This will ensure that all possible options for community based treatment have been exhausted prior to any referral.

**Definition:** Redditch & Bromsgrove Dashboard. The Dashboard is a piece of software which holds detailed information which practices can access at all times.

- Peer review will be available through Zoning arrangements and Redditch & Bromsgrove CCG Dashboard has a dedicated reporting system looking at referral rates by practice.
- Partnership Working Groups. The groups are being established to allow GPs and consultants to identify potential community solutions leading to a reduction in the number of patients who would otherwise have been managed within a hospital setting. The Working Groups include a Urology Working Group, Circulatory Disease Working Group and Gynaecology Working Groups.
- The existing community ophthalmology (eye) service specification is being further developed to include a wider range of conditions, including the management of low risk glaucoma. There will be a re-tendering of the service.

## B. Urgent Care Developments:

- **Integrated Care:** We will make further developments in community services with 'Enhanced Care'. We will maximise Intermediate Care services by aligning them with the activity in Princess of Wales Community Hospital – creating a seamless service across the community hospital and community services.

We will look at possible medical models which will support the flow of patients; the management of patients within the community (within their own homes, a care home or the community hospital) and GPs in clinical decision making and general support.

- **Risk Stratification** has been previously piloted on a very small scale to identify a person's risk of developing a disease so that it can be prevented. We will consider other opportunities of applying risk stratification to make sure we identify the best way of proactively identifying patients at risk, and support them accordingly.

- **Improving Access in Primary Care:** GP Triage systems (a brief GP telephone consultation before an appointments is made) are being piloted in 2012/13. This reduces the number of face-to-face appointments with a GP, so as to improve access to GP appointments and prevent patients from inappropriately accessing Accident & Emergency.
- **Urology workstream:** We are considering possible options around the management of acute urinary retention to avoid unnecessary Accident & Emergency attendances.
- **Undiagnosed COPD Pathway:** A pathway has been developed with the aim to reduce Accident & Emergency attendances. This will be achieved by proactively identifying patients with previously undiagnosed Chronic Obstructive Pulmonary Disease (COPD - 15% of COPD patients are initially diagnosed in Accident & Emergency).

- **Falls Prevention:** We will reduce the number of falls by appropriate prescribing and referral to occupational therapy and physiotherapy. The impact of falls will be minimised by the appropriate identification and treatment of osteoporosis.

Redditch & Bromsgrove CCG practices will continue to refer to Nurse Advisors for falls assessment and related action.

### C. RBCCG Mental Health Programme:

- A series of projects are underway with the overall aims of:
  - 1) improving the interface between primary and secondary care;
  - 2) implementation of a Shared Care Model;
  - 3) provision of fair access to services across Redditch and Bromsgrove;
  - 4) apply a formal process to secure future counselling services for Redditch and Bromsgrove.



**If you would like more information on anything in this document we will be happy to provide it. Please contact Simon Hairsnape, Chief Officer on 01905 760104 or email [simon.hairsnape@worcestershire.nhs.uk](mailto:simon.hairsnape@worcestershire.nhs.uk)**