

**HEALTH OVERVIEW AND
SCRUTINY COMMITTEE**

Appendix 1

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| Subject: | Progress report on the development of The NHS Brighton and Hove Strategic Commissioning Plan 2009-2014 |
| Date of Meeting: | |
| Report of: | Deputy Chief Executive / Director of Strategy NHS Brighton and Hove |
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| Wards Affected: | All |

FOR GENERAL RELEASE

1. SUMMARY AND POLICY CONTEXT:

- 1.1 The purpose of this report is to provide the Health Overview and Scrutiny Committee with an update on the review and redevelopment of the PCT's Strategic Commissioning Plan which will be submitted as part of year 2 World Class Commissioning (WCC) process in mid January 2010. This is a national requirement of all PCTs.
- 1.2 NHS Brighton and Hove is required to submit a revised Strategic Commissioning Plan which reflects its priorities over a five-year timetable. The PCT has an existing 5 year strategic plan shared with the HOSC in 2008 which is being revised taking into account:
 - The recommendations from the original WCC process.
 - Major national and local operating environment changes
 - The PCT's and partner learning's over the last year.
- 1.3 NHS Brighton and Hove consulted on its first strategic commissioning which was published in December 2008. The

proposed revised plan is consistent with the original direction of travel contained within the PCT's first SCP and re-emphasises plans to develop care closer to home and improve the health of the local population.

A key driver for the overall revision will be to address the financial challenges from 2011/2012 onwards. The overall aim of the PCT's strategy is to demonstrate the effective use of its resources whilst maximising health outcomes for the local population. The PCT's strategic plan will be underpinned by a five year financial plan and organisational development plan which are being developed in tandem to the SCP. The SCP will contain the outputs of the PCT's review of its visions, goals and major initiatives or "Priority Transformation Programmes" (PTPs) which have been developed and agreed through the Strategic Commissioning Board which involves City Council Officers.

2. RECOMMENDATIONS:

- 2.1 That members note and consider the progress report and process for the future development of the NHS Brighton and Hove revised Strategic Commissioning Plan prior to its submission in January 2010.
- 2.2 Members are asked to note that as part of the presentation that will be given to HOSC a number of key areas of future service transformation will be highlighted as areas of change for future discussion and review.

3. BACKGROUND INFORMATION

- 3.1 The PCT has reviewed its key commissioning activities which were contained within the existing strategic plan through a dual approach of the taking stock of existing initiatives and identifying and prioritising priority programmes for next five years.
- 3.2 The PCT has prioritised a number of key Priority Transformational Programmes (PTPs) for implementation over the 5 years of the plan. For each of the programmes work is ongoing define the investment and saving assumptions where key phases of implementation including outcomes and benefits for each programme.
- 3.3 As part of the next stage of development work the PCT has agreed a number of key cross cutting programmes of review which support the PCT's financial plan linked to achieving improved value for money across the PCT's commissioning portfolio.

A summary of the PTPs is shown in the table below:

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| <p>Urgent Care</p> <p>A simpler, integrated urgent care system which ensures that people are seen quickly and by the right person in the right place</p> |
| <p>Primary Care</p> <p>Development of improved services with reduced variation in quality and performance. This will provide a strong foundation to enable the shift of services from secondary to primary care</p> |
| <p>Long term conditions and case management</p> <p>Providing systematic and integrated primary and community care for patients with a long term condition from self care to end of life, delivered through new models of care</p> |
| <p>Long term care and independence</p> <p>Develop Integrated rehabilitation and independence services which, together with case management, support people to live independently at home for as long as possible</p> |
| <p>Gateway and referral management</p> <p>Ensuring that patients are assessed and treated in the right place achieving greater value for money and improved clinical effectiveness</p> |
| <p>Acute hospital care</p> <p>Achieving reduced spend in secondary care will be achieved by reducing the cost base within the acute care and improving productivity and efficiency</p> |
| <p>Out of hospital care</p> <p>Transfer of services from the acute sector into community settings. Making services more accessible and promoting choice for local residents.</p> |
| <p>Cancer</p> <p>Improving prevention, access and treatment for cancer.</p> |
| <p>Specialised commissioning</p> <p>Increased management of specialised and tertiary services by better contract management, addressing service gaps and repatriation of out of</p> |

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| area activity |
| <p>Transferring mental health services Ensuring effective mental health services along the whole pathway of care from improved wellbeing to effective assessment, treatment and recovery.</p> |
| <p>Transforming maternity services Offering choice to women, modernising maternity services and reducing inequalities for vulnerable groups</p> |
| <p>Transforming Children's Services Improving the lives and health of children and young people through the delivery of integrated, effective, evidence based and needs led services</p> |
| <p>Developing a healthy young city Facilitating a shift to healthier, lifelong behaviours in order to impact significantly on the population's health</p> |
| <p>Adding years to life Developing key interventions to reduce the gap in life expectancy between the least and most disadvantaged populations and to improve overall life expectancy</p> |

3.3.1. Improved value for money

The PCT will undertake reviews of key aspects of commissioned activity, targeting those areas where performance lies outside national and peer group PCT averages and/or where efficiency and productivity improvements can be potentially made.

This programme is being scoped as part of the SCP development process and will focus on potential areas including Mental Health, Infectious Diseases, adverse effects, elements of planned care as well as preventative health spend.

The final shape and phasing of these proposed programmes will be subject to further scoping and consideration. Where existing programmes of review are in place these will continue as per planned programmes of redesign or review.

3.3.2. Use of Commissioning system Levers

The PCT will review the application of commissioning levers such as tariffs and marginal rates linked to quality indicators available to drive further efficiency and productivity with local healthcare providers.

3.3.3 Corporate Efficiency

The PCT will be undertaking a review of all aspects of Corporate spend as part of its cross-cutting commissioning

Along with all South East Coast PCTs, the PCT is undertaking joint work to examine the potential establishment of a commercial support unit to migrate a number of key functions to a coordinating hub from the 1st April 2010.

4. HOSC INVOLVEMENT

4.1 It is proposed that HOSC will be kept apprised of the work being developed for each PTP area and in due course the potential areas of review once the details of the proposed approach to each area and timing has been finalised and agreed by the Professional Executive Committee (PEC) and PCT Board.

4.2 The revised SCP will be finalised and submitted on January 22nd 2010 as part of the World Class Commissioning Assurance process, as the revised Strategy is still in development, it will be appropriate in early 2010 to consider any area that HOSC require the further scrutiny by members although it is not possible at this point to define whether there will be any likely “substantial variations” in local health care until the outputs of planned review work are completed.

5. CONSULTATION

5.1 The PCT is developing the revised strategic commissioning through a number of ongoing engagement activities. The PCT’s existing plan underwent extensive engagement through stakeholder events held in summer and autumn 2008.

5.2 A stakeholder event for key partners was held on November 11th 2009 which involved representatives from key healthcare providers including third sector organisations and City Council representatives.

5.3 Each planned priority transformation programme is developing more detailed change programmes as part of finalising delivery plans for each area. The PCT will publish more detailed delivery plans as part of the final SCP in due course.

5.4 The overall development of the Strategic Commissioning plan is overseen by the Strategic Commissioning Board which has Director

level representation from the PCT as well as representation from Director of Social Services and Director of Children Services for the Children and Young People's Trust (CYPT)

6. FINANCIAL & OTHER IMPLICATIONS:

- 6.1 The PCT retains a commitment to ensuring the revised plan delivers a sustainable financial position from 2010/11 – 2013/14 and that it is able to meet the pressures this will bring to the local health system.
- 6.2 The PCT is in the process of modelling a number of different financial scenarios as advised by the Department of Health through South East Coast SHA.
- 6.3 In overall terms from 2011/12 onwards, the PCT is planning to receive a zero increase in allocation which equates to approximately a 7% reduction in allocation for each year of the plan.
- 6.4 This will require the PCT to prioritise areas for investment across the whole of its commissioning portfolio with a particular focus on doing more for the same or less resource.
- 6.5 The focus of the Strategic Commissioning Plan refresh is therefore focusing on the alignment and prioritisation of Priority Transformation Programmes (PTPs) and cross-cutting programmes that are critical to achieving the PCT's commissioning goals as well as delivering improved quality and value for money over the planning period.

Legal Implications:

- 6.5 There are no anticipated legal implications.

Equalities Implications:

- 6.6 The PCT's official SCP submission was Equality Impact assessed in 2009. The revised document will be assessed for its impact in late December 2009/early January 2010.

Sustainability Implications:

None identified

Crime & Disorder Implications:

6.7 None identified

Risk and Opportunity Management Implications:

6.8 None identified.

Corporate / Citywide Implications:

6.9 None identified.

SUPPORTING DOCUMENTATION

Appendices: None

Background Documents:

- 1) NHS Brighton and Hove Strategic Commissioning Plan 2008 – 2013
- 2) World Class Commissioning Year 2 Assurance Handbook (Department of Health 2009.)

