

A decorative graphic on the left side of the page, consisting of several horizontal blue bars of varying lengths, connected by diagonal lines that create a staircase-like effect. The bars are in two shades of blue: a darker blue and a lighter blue. The central text is contained within a dark blue rectangular box that is part of this graphic.

North Durham CCG
Clear & Credible Plan
2012/13 – 2016/17

This summary of our five year Clear and Credible Plan sets out the key aims and priorities of North Durham Clinical Commissioning Group (CCG).

Clinical commissioning groups (CCGs), led by local GPs and other health professionals, are now taking on NHS management responsibilities from primary care trusts for the planning and purchasing (commissioning) of local health services for local populations. The creation of clinical commissioning groups is one of the changes to the NHS in the Health and Social Care Bill 2012.

The North Durham CCG was established in October 2011 and is made up of 31 member GP practices. It covers a total population of around 243,000 across three constituencies; Derwentside, Durham and Chester le Street. There are some significant differences in health between the various parts of the area.

Our new clinical commissioning organisation will build upon initial experience as practice based commissioning (PBC) groups and then as GP led commissioning Pathfinders. As clinicians working with patients and providers of health care services every day, we now have a great opportunity to use this knowledge to make changes which will improve the health and experiences of our patients.

Throughout the five year lifespan of this plan, we will check our progress to ensure our efforts are having a real impact on delivering our aims.

We must also demonstrate how we will use over £300 million of taxpayers' money per annum over the next five years to deliver health improvement and health services for 243,000 people in our area.

We hope you find this summary helpful. Together with our Delivery Plan for 2012/13, it will form the basis of our discussions with the public, patients and carers, providers and key partner organisations.

If you would like to make any comments about our plans for the future or have your say with regard to future developments, you will find contact details on the back page of this summary plan.

Our Challenges

We have built up a picture of our area by looking at local health needs and current health service provision, as well as what patients tell us about the services they receive and what we see as clinicians.

We cover a population with significant health challenges, both in terms of poor health outcomes and high levels of health inequality. People living within our population are more likely to die sooner than if they were to live in other parts of the country.

We face a number of challenges and opportunities:

- Across North Durham the main causes of ill health are as a result of heart disease and cancer. We know that an ageing population will result in an increase in cancers, heart disease, strokes and dementia. Heart disease and cancer already account for the majority of early deaths.
- We will focus on approaches that will reduce death and ill health from these diseases. These will include smoking cessation services and heart health checks which will deliver the quickest health benefits, and the promotion of good mental health as a basis for general health which will be needed even more as the population ages.
- There is a large difference in life expectancy in North Durham. In Durham and Chester le Street the gap between the best and worst areas is 8 years for men and 9.3 years for women. In Derwentside the gap is 5.8 years for men and 5.6 years for women.
- We need to manage the increased demand on hospital services, resulting from an increasing and an aging population and particularly from those patients with long-term conditions, and look to provide services differently.
- We need to do more to improve the overall quality of care and reduce unnecessary differences in the way care and treatment is delivered to patients, so we can ensure we get the best health outcomes and overall patient experience for everyone.
- We need to speed up the pace of change in delivering more services in the community and closer to home for patients, by redesigning the way care is provided, so that we can achieve the best outcomes for patients. We currently spend more money on hospital services compared to primary and community settings, this will change as we move more services into the primary and community.
- In order to deliver the levels of service quality in terms of safety, patient satisfaction and consistency, we must reduce unnecessary differences in the quality and access to services provided to some patients in acute, community, mental health settings.

Our Vision and Aims

North Durham Clinical Commissioning Group's vision is:
'Better Health for the People of North Durham' where:

health services meet the needs of patients

the health of our community is improved

the gap in health inequalities is reduced

we obtain value for money and efficiency from available resources

To deliver our vision, we will focus on four key aims:

1

Improving the health status of the population.

2

Addressing the needs of the changing age profile of the population.

3

Commissioning clinically effective, better quality services closer to home.

4

To make best use of public funds to ensure healthcare meets the needs of patients and is safe and effective.

Our aims have been developed from the ground up with significant contributions from GPs, member practices and engagement with stakeholders and patients. We have also learned much from our pathfinder projects that have crossed a range of care pathways. Through feedback and engagement from constituent member practices we now have a greater understanding of the key issues and challenges for our population.

Our approach

We will focus on three stages to ensure we achieve our key aims. These stages will be delivered through a series of commissioning programmes and initiatives

Stage 1

Managing the here and now.

During this initial phase we will get a better understanding of our use of secondary care services, prescribing practice and use of continuing healthcare in order to allow us to manage demand more effectively.

Stage 2 Reviewing and re-designing the services we currently commission.

We will then take stock of the full range of services we commission to identify any gaps in quality that might exist and work with our current providers to ensure a more holistic service is provided in the most appropriate setting for our patients.

Stage 3

Investing for the long term.

Once we have assessed the current use of services and redesigned pathways where appropriate, we will invest resources to improve the health outcomes and reduce health inequalities of our population for the future.

How we will deliver our plan over the next five years

By focusing on these aims and stages we believe we can make the greatest improvements to meet our health challenges. For each of our aims we have set ourselves a work programme which we plan to deliver over the next five years, with goals by which we can measure our success.

Key Aim 1

Improving the health status of the population.

By working with partners in social care and public health, we can jointly focus on the underlying risk factors and wider determinants of ill-health and health inequality. We will work in partnership with Durham County Council on areas of joint interest to improve the overall health and wellbeing of the population.

We will work in partnership with public health and health prevention professionals on approaches to changing our patients' and public's behaviour in making healthy choices and living healthier life styles.

We will also work with patients, carers and our local communities, offering a range of ways they can get involved, share their experiences and influence our commissioning and decision making activities.

Over the next five years we plan to:

- Commission services to improve early diagnosis and care for dementia.
- Monitor and support the roll-out of additional health visitors and family nurse practitioners commissioned by the National Commissioning Board
- Work with Public Health to ensure that stop smoking services are commissioned effectively.
- Support Public Health in the effective commissioning of teenage pregnancy services

- Work with Public Health to commission services to reduce Alcohol related admissions
- Support Public Health in the commissioning of health improvement programmes and services such as; weight management, exercise on referral, health checks and bowel cancer screening.
- Support the promotion of cancer screening programmes and commission services to ensure earlier diagnosis.
- Monitor and support the delivery of weight management services and support for women during and after pregnancy.

We will develop these services across North Durham to improve our population's health and wellbeing, and quality of life.

Key Aim 2 Addressing the needs of the changing age profile of the population.

By working with our providers we will ensure the holistic care of patients, resulting in improved health outcomes. This means every patient contact with a health professional will include a focus on health improvement, and there will be fully joined up primary, community, secondary and social care. We will also ensure that our GP practices provide consistent, high quality treatment pathways

Over the next five years we plan to:

- Review district nursing services
- Develop community based services for people with chronic obstructive pulmonary disease
- Improve services for people with epilepsy
- Improve care for people with dementia
- Review and improve end of life care services

Key Aim 3 Commissioning clinically effective, better quality services closer to home.

Our aim is to commission more services from a community or primary care setting where safe and appropriate to do so. These services will include diagnostics, long term follow up, and simple interventions in primary care and community settings.

Our activities will move care available closer to patients' homes, with routine treatment increasingly provided in primary and community settings. There will be more GPs specialising in areas of healthcare and complex treatments will increasingly be commissioned from specialist centres. There will be greater choice of services for patients, with convenient and timely access at all stages, so that patients can make informed decisions about where and from whom they receive their care.

Over the next five years we plan to:

- Review and improve emergency outpatient clinics
- Increase dermatology and minor surgery services provided in community settings
- Improve the continence service
- Ensure GP practices have access to dedicated mental health staff
- Review urgent care and improve patient transport services
- Reduce the number of children admitted to hospital
- Reduce the number of care home residents admitted to hospital out of hours
- Implement step up community beds for the elderly
- Review intermediate care
- Review children's nursing services
- Increase access to mental health services

Our values

Our values have been developed together with our clinicians, partners and staff and will underpin the delivery of our plan. These values will inform our approach to clinical commissioning and our responsibilities to the local community. We will:

Provide great leadership with a clear line of accountability to the communities of North Durham;

Have passion to achieve the very best we can;

Foster innovation in the commissioning of services;

Have a relentless focus on achieving value for money, reducing unnecessary waste and making every penny count;

Engage patients, carers and clinicians in decision-making;

Be open and transparent with decisions being taken publicly wherever possible;

Be committed to working collaboratively with our partners, balanced with a recognition that sometimes it is necessary to go it alone in order to secure improvements that matter to patients;

Take an ethical approach to decision-making which always takes into account the wider consequences of our actions;

Cultivate mutual trust and respect in all our working relationships.

In delivering better outcomes for patients we will also apply the values embedded in the NHS Constitution.

How we will work with our partners

North Durham CCG is committed to working with a range of local partners and organisations so that we can develop the best health care services for local people. For example:

- We will work with patients, carers and our local communities, offering a range of ways they can get involved, share their experiences and influence our commissioning and decision making activities.
- We will work in partnership with the two neighbouring clinical commissioning groups in Durham Dales, Easington and Sedgfield and in Darlington - where it makes sense to do so - to make best use of available resources.
- We will work in partnership with Durham County Council on areas of joint interest to improve the overall health and wellbeing of the population.
- Close working with our service providers will allow clinicians from all parts of the health system to shape services together and allow new ideas to be built into our commissioning plans.
- Our 31 member GP practices are committed to working with us to develop high quality, locally based services. They have helped to develop our vision, and provide valuable links with patients through their own practice groups.
- We will work in partnership with public health and health prevention professionals on approaches to changing our patients' and public's behaviour in making healthy choices and living healthier life styles.
- The Health and Wellbeing Board, led by Durham County Council will join up health services, social care and health improvement through a single approach. Executive clinical leads will sit on this board as our representatives.
- We will work with a range of NHS based support services which are being set up to help us manage and deliver the day to day business of commissioning.

How we will engage with you

In developing our priorities, we have worked closely with GP practices and have held an engagement event with patients, other local organisations who provide services and voluntary organisations.

We will continue to develop our relationships with partners, providers and our communities as we deliver this strategic plan, and will ensure that we have a range of ways in which we communicate and engage with you.

We will spend more time building our relationships with the people and groups who make up our communities in North Durham. We will continue to seek the views of our local population with regard to the services we provide and capture ideas on how these services can be improved. Much of this will be done in partnership with Durham County Council.

We will use what we know about our communities to engage with different people and groups in ways that best meet their needs and in order to improve the health of our population we will communicate messages which give clear directions to the choice of services available and which are easy to access.

Key aim 4 - How will we afford our plan

The government has set challenging targets for us to deliver improvements to the way services are delivered. We are required to make these improvements in terms of Quality, Innovation, Productivity and Prevention, nationally known as QIPP. The challenge for the NHS nationally, is to make £20 billion of efficiency savings by 2014/15. North Durham's CCG's proportionate share of this target is expected to be over £60 million.

We also need to be able to respond to significant demographic changes, in particular the increase in the number of older people. As investors of public money we need to manage our resources carefully.

Managing our resources effectively and responsibly will ensure that we make sensible investment decisions whilst getting the most out of the services we are currently paying for on behalf of the tax payer and our communities.

Over the next five years we plan to:

- Deliver our plan within our given funding
- Work with GP practices, hospital and community based services to improve quality and efficiency
- Develop approaches to control the cost of prescribing medicines
- Work with our providers of healthcare providers to increase efficiency and reduce waste
- Re-invest money saved, through redesigning the way services are delivered, into our commissioning priorities for future years
- Continually analyse need, review and measure our current providers of healthcare against others
- Test new ideas and share good practice

Contact us

If you would like to make any comments about our plans for the future or have your say with regard to future developments please contact:

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Copies of our full Clear & Credible Plan 2012/13 – 2016/17 are available on request through the contact details above. Both this summary and the full plan are available in alternative formats e.g. large print, Braille, other languages.