

Introducing Clinical Commissioning Gloucestershire



Introducing Gloucestershire Clinical Commissioning Group

With the passage of the Government's Health and Social Care Bill, it is clear that the NHS is set for change.

One of the key strands of the Act is to put GPs and other clinicians in the driving seat for the commissioning (buying) of health services to meet the needs of local people.

Put very simply, 'commissioning' can be described as making decisions about how we commit NHS resources to improve the health of our population.

The idea behind the 'clinical' part of this is that doctors and other healthcare professionals, who see patients everyday, know more than anyone else about the health needs of local people and their communities. They have first hand knowledge of how services are working and how they can be made to work better.

GPs have been playing an active role for some time in buying some local health services for their patients, but NHS Gloucestershire (the local Primary Care Trust), has had overall responsibility for the NHS budget locally and buying the majority of health services.

This will change from April 2013, when NHS Gloucestershire is abolished and clinicians (doctors, nurses and other health professionals) will take on the lead role for buying services.

The development of Gloucestershire Clinical Commissioning Group (GCCG) means that clinicians will be at the heart of planning and delivering healthcare and health improvement in the county.

This guide describes how we are developing and gives you an opportunity to comment on our draft constitution.

What is Gloucestershire Clinical Commissioning Group?

An early decision taken by GPs in Gloucestershire was to set up a single county-wide Clinical Commissioning Group, supported by Locality Executive Groups i.e. GPs and other healthcare professionals working together at a local level (e.g. in the Forest of Dean or the Cotswolds).

This will ensure that local needs are identified and met and also ensure that decisions can be made at county (CCG) level when needed.

We are one of the largest CCGs in the country, serving a population of 602,000.

What will the CCG be responsible for?

We will be responsible for commissioning (buying) local NHS services to meet the needs of local people, such as emergency care services, planned care services (e.g. operations or treatments that can be planned in advance) and mental health services.

These services will be provided by a range of 'provider' healthcare organisations e.g. NHS Trusts.

We will also work closely with the Gloucestershire Health and Well-being Board. This County Council led Board, which includes representatives from the CCG, will co-ordinate commissioning (buying) across the NHS, Public Health and Social Care. The Board will also lead on assessing the health and social care needs of the population.

More detailed information on our roles and responsibilities can be found in Our Constitution (see below).

Our Constitution

We have now produced our draft constitution. This describes how we will make sure that the new organisation is well governed and is accountable to the public.

It will be reviewed every 3 years with the involvement of clinicians, the public, patients, carers, community partners and staff.

This guide includes a summary of the main points within the draft constitution, but we would encourage you to read the full constitution.

What our constitution includes

Our Vision and Values

The constitution describes our Vision and Values and what we believe are the principles of good governance.

Our Vision

- Joined up care for the people of Gloucestershire.

Values/Aims

We will:

- Ensure effective communication and engagement with clinicians, patients, carers, community partners and the public
- Use our clinical experience to ensure high quality, safe and efficient services for the people of Gloucestershire
- Focus on clinical benefit and health outcomes – making best use of the money and resources available
- Use our clinical experience to lead innovation and change – right care, right place, right time
- Be accountable and transparent in our decision making.

Accountability

We believe we should be accountable to our members, local people, community partners and the NHS Commissioning Board in a number of ways including:

- Publishing our constitution
- Appointing lay members (public and patient representatives) and other healthcare professionals to our governing body
- Holding meetings of our governing body in public
- Publishing an annual commissioning plan
- Co-operating fully with local authority health, overview and scrutiny requirements
- Meeting annually in public to publish and present our Annual Report
- Producing Annual Accounts which are externally audited
- Having a published and clear complaints process
- Complying with the Freedom of Information Act 2000.

We believe strongly in being accountable which is why we will also:

- Publish a public guide to the CCG setting out our priorities
- Have a dedicated website and set up social media channels to communicate in a timely way and to receive feedback.

What our constitution includes

Functions and General Duties

We will be responsible for commissioning (buying) certain health services to meet the needs of:

- All people registered with member GP practices
- People who are usually resident within our area and are not registered with a GP practice.

We will also be responsible for commissioning emergency care (e.g. emergency hospital care) for anyone living in, or visiting, our area.

This is all part of promoting a comprehensive health and well-being service.

In carrying out our work we will:

- Ensure we receive patient experience feedback from communities
- Make services accessible and information available in different formats
- Work in partnership with local authorities to meet local needs and improve health and well-being.

In carrying out our duties we will ensure public involvement in the planning, development and consideration of any proposals for significant service change or changes to commissioning arrangements.

We will also promote the NHS Constitution by:

- Ensuring the patient voice influences commissioning intentions

- Producing a guide to the NHS Constitution which sets out:
 - rights e.g. right to access local NHS services and to be treated with a professional standard of care by qualified and experienced staff and;
 - responsibilities e.g. recognise that you can make a significant contribution to your own, and your family's good health, and also take some responsibility for it
- Ensuring contracts with providers of health services take into account NHS Constitution requirements.

We will make sure there is continuous improvement in the quality of services through contracts, by meeting NICE Quality Standards and through national and local audits.

Our Constitution also sets out how we will:

- Assist and support the NHS Commissioning Board in their duty to improve the quality of primary medical services e.g. services available from GP surgeries
- Enable patients to make choices e.g. through the Choose Well campaign (signposting people to services to meet their needs) or through the Patient Advice and Liaison Service (PALS)
- Obtain appropriate advice from people who have professional and specialist expertise in health, social care and public health
- Promote Innovation, Research, Education and Training and;
- Meet our general financial duties.

What our constitution includes

Decision making

This part of Our Constitution sets out things like:

- The group's authority to act
- Committees of CCG and;
- The functions of the Governing Body.

It also describes how the Governing Body will be made up and the individual roles. This will include:

- Clinical Chair
- Deputy Clinical Chair
- Vice Chair (Lay Member, Governance)
- Chief Finance Officer
- Accountable Officer
- 7 GP Liaison Leads or other healthcare professionals
- 2 Lay members (Business and Patient and Public Engagement)
- Director of Public Health
- Secondary Care Specialist (specialist hospital care)
- Registered Nurse
- Director of Adult Social Care.

Decisions will be made by our Governing Body.

Roles and Responsibilities – Gloucestershire Clinical Commissioning Group and Locality Executive Groups

We are committed to building a 'membership organisation' and currently our membership includes all of the 85 GP practices in Gloucestershire.

These practices fall within seven localities:

Cheltenham
Forest of Dean
Gloucester
Tewkesbury, Newent and Staunton
Stroud and Berkeley Vale
South Cotswolds
North Cotswolds.

Each locality has a GP Liaison Lead or other healthcare professional sitting on the CCG Governing Body.

Each locality has a Locality Executive Group and the 'locality role' is described in more detail over the page.

What our constitution includes

Role of the county-wide CCG

We have already described our overall roles and responsibilities at the beginning of this guide, but this section of our constitution describes our role in detail.

This includes:

- Setting a commissioning (buying of health services) strategy which is responsive to the needs and priorities of the population and reflects the views of individual localities
- Establishing and leading a clinical programme based approach to commissioning (this means using clinical knowledge to look at specific health conditions and the patient's journey through care)
- Being clinical leaders – engaging with member practices and the wider clinical community (e.g. doctors, nurses and therapists)
- Ensuring transparency and accountability with decision making
- Managing commissioning budgets
- Supporting localities with the development of programmes and projects.

Locality role:

- Supporting two way engagement – communicating with practices and ensuring practice input into the work of the CCG
- Providing vital intelligence for the CCG – on local health needs and the reality of services on the ground
- A focus for local service developments and ensuring strong links with the local community
- Sharing performance information with practices and where appropriate challenging practice
- Piloting new approaches
- The CCG GP liaison lead from each locality will also take on a lead role for county-wide projects.

Planning for the future

The CCG is determined that the quality and safety of patient care and the benefits to health will be the top priorities.

The CCG will also need to 'balance the books' during challenging economic times. This means making the most of every pound spent on healthcare.

There is agreement that in order to maintain the quality of care that patients receive in the coming years we will need to see a radical shift in the way care is provided.

This includes putting into place a shared 'community' vision for the NHS – commissioning and providing a greater proportion of care closer to home and reducing the amount of time patients need to spend in larger hospitals when appropriate.

The CCG will also make sure that the priority is on funding treatments where there is strong evidence of clinical (medical) benefit to the patient.

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