

BMBC Area Council 11 November 2013

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Practice Manager



NHS Barnsley CCG

NHS Barnsley Clinical Commissioning Group

(CCG), represents 38 GP practices, 233,000 patients.

Responsible for commissioning healthcare for the population of Barnsley - planning and buying services

We are a clinically led commissioning organisation that is accountable to the people of Barnsley. We are committed to ensuring high quality and sustainable health care by putting the people of Barnsley first.

Values in commissioned services:

- Equity and fairness
- Services are designed to put people first helping them to have control and be empowered to maximise their own health and well-being.
- The services delivered are needs led.
- Quality care delivered by vibrant primary and community care services or in a safe and sustainable local hospital.
- Excellent communication with service users and carers.

CCG Plan

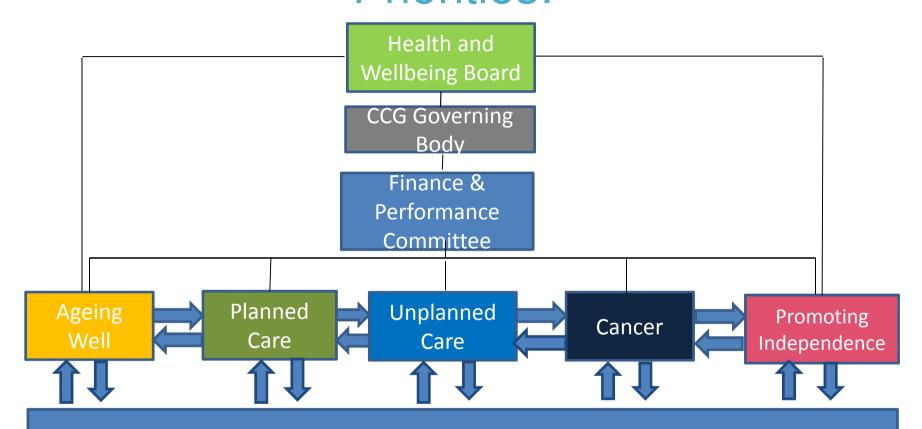
Draft NHS Barnsley Clinical Commissioning Group Plan 2013 -14

	Perspective		(Opportunities for Change)	J.		
	E ation)	Reduced <75 mortality in Cardiovascular disease and Cancer Improved 1 year and 5 year cancer survival rates Reduced emergency admissions Reduced emergency readmissions within 30 days of discharge from hospital Improved patient experience	Preventing – Targeted work with public health to promote healthy lifestyles Diagnosing – Targeted activities in deprived communities to improve symptom awareness and improve uptake in screening programmes Treating – Continue to develop secondary and tertiary care pathways Support - Implement the MacMillan Cancer survivorship programme End of life - Monitor impact of end of life care pathway			
Quality Healthcare			Diagnosing – Targeted activities in deprived communities to improve symptom awareness Treating – Maximise care planning in primary care Continue to develop secondary and tertiary care pathways End of life - Ensuring that the End of Life pathway is embedded as part of Cardiovascular Care		gy 2013/14)	
			Undertake risk stratification of patients who are high intensity users of services, are at risk of readmission who have modifiable risk factors GP led case review and integrated care planning Develop and refine pathways to ensure maximum access to telehealth support			Du
	Barnsley f transform: ith Patient	Proportion of deaths in usual home	Complete the review of the memory services Evaluate dementia assessment process and effectiveness of post dementia diagnosis support		Technolog ramme in	am Worki
Putting people fire	he best use of the thership Working (Communication w		Unplanned Care Implement phase two of the Barnsley Urgent Care Centre Develop pathways for emergency ambulatory care conditions Develop a local pathway for frail elderly people to facilitate rapid assessment, care planning and early supported discharge Implement the recommendations of the intermediate care review Evaluate the local NHS111 pathway in respect of patient flow and access to the right care first time		on Management & isation (QIPP prog	Organisation – Integrated Team Working
inable Healthcare	Making t Effective Par Excellent		Review the improving access to psychological therapies service Review In patient provision Review and implement pathways and packages of care Develop and implement eating disorder pathway Monitor and evaluate the Autistic spectrum disorder and Attention deficit-hyperactivity disorder pathway Monitor and evaluate the Autistic spectrum disorder and Attention deficit-hyperactivity disorder pathway Commission the Black Minority Ethnic liaison service		Medicines Optim	Organisati
Susta			·			
			Children particularly in relation to looked after children	n as		
		Healthcare Putling people first Making the best use of the Barns Effective Partnership Working (trans) Excellent Communication with Pa	in Cardiovascular disease and Cancer Improved 1 year and 5 year cancer survival rates Reduced emergency admissions within 30 days of discharge from hospital Improved patient experience Reduced emergency readmissions within 30 days of discharge from hospital Improved patient experience Proportion of deaths in usual home Reduced incidence of avoidable harm in hospitals Financial Balance Better quality of life for those with long term conditions Reduced inequalities Reduced inequalities	In Cardiovascular disease and Cancer Improved 1 year and 5 year cancer survivar rates Reduced emergency admissions within 30 days of discharge from hospital and the patient experience Reduced emergency readmissions within 30 days of discharge from hospital and the patient experience Proportion of deaths in usual home Proportion of deaths in usual	in Cardiovascular disease and Cancer Improved 1 year and 5 year cancer survivar rates Improved 1 year and 5 year cancer survivar rates Page 1	in Cardiovascular disease and Cancer Improved 1 year and 5 year cancer survivar rates Reduced emergency admissions Reduced emergency readmissions Reduced emergency readmissions within 30 days of discharge Improved patient Reduced emergency readmissions within 30 days of discharge Improved patient Improved patient Improved patient Improved patient Improved 1 year and 5 year cancer survivar rates Reduced emergency readmissions Reduced emergency readmissions within 30 days of discharge Improved patient Improved patie

Clinical Priority Areas

- Cancer
- Cardiovascular Disease
- Long Term Conditions
- Mental Health
- Unplanned Care
- Planned Care
- Maternity and Children

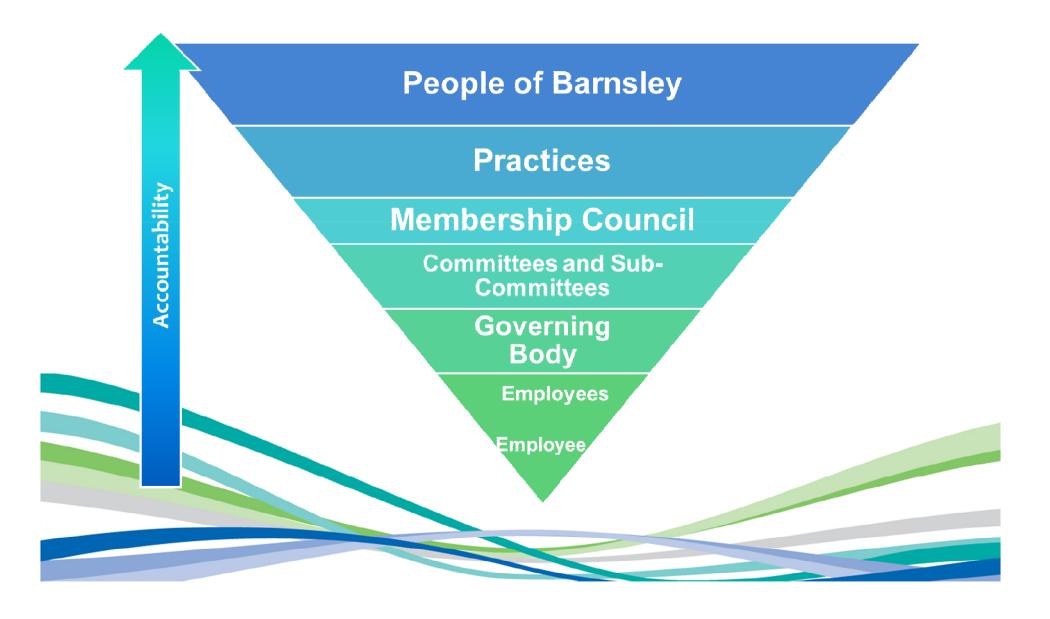
A Programme Structure to deliver the Priorities:



Provider Internal Programmes, synchronised with programme structure

Member, Patient & Public, Staff and Partner Engagement

NHS Barnsley CCG



CCG Governing Body

- -8 Elected Members, 7 GPs
- 2 Lay Members
- 1 Chief Executive Officer
- 1 Chief Finance Officer
- 1 Lead Nurse
- 1 Consultant (non Barnsley)
- 1 Practice Manager

.....Putting People First

Practice Manager on CCG Governing Body

- Practice Manager Perspective
- Primary Care : Secondary Care
- Putting People First

Our Public Engagement Network (OPEN) Putting Barnsley People First

Public and Patient Engagement

- •Dr Clare Bannon GP Lead
- •Chris Ruddlesdin Lav Member
- •Marie Hoyle Practice Manager Lead
- •Debbie Myers Facilitator

Our Public Engagement Network (OPEN)

- •Level 1: Receive regular newsletter from **NHS Barnsley**
- •Level 2: As Level 1 but seek views and opinions on local health and social care issues
- •Level 3: As Level 1 & 2 but be involved in discussions around chose area of

Public and P

Patient Satisfaction

- learn about patient experience Shared Decision Making work closely with patients
- Partnering with Patient's & **Employees**
- patient provides their perspective on how to improve healthcare in the community **зи**әшәбебил

Practice Patient Reference Group •Builds trust and communication between

- patients and staff
- •Helps patients to shape the practice services that they use
- •Patients gain a better understanding of the services at the practice and how to use the NHS as a whole

Barnsley Patient Council

- •Independent advisory panel which is supported by NHS Barnsley CCG
- •To act as the 'Voice of the Public'
- •Share views and opinions on local health services
- •Work in partnership with key stakeholders

Focus Groups, Co-production etc

Early involvement will enable Public and Patient Engagement Team to:

- establish good relations from the start
- ensure patient input to service re-
- assist focus groups in understanding what meaningful engagement is and the role of the CCG

Communications Team

- •Excellent communication with public and patients (i.e. building relationships with staff, public, patients, carers, media etc)
- •Ensures decisions are taken in an open and transparent way Ensure consultation and engagement around service changes and developments is carried out and reported within the legal requirements

Work with Local Organisations

- •Instrumental in shaping the direction of health and social care services (i.e. VAB, HealthWatch, SWYPFT, Local Authority, BHNFT etc)
- Work collaboratively
- Commission services jointly

Public & Patient Engagement Committee

- •Ensure that Public and Patient Engagement is central to the business of the CCG
- •Secure continuous improvement in the quality or engagement and communication
- •Provide assurance and advise the Governing Body as necessary
- •Oversee Dashboard

Barnsley Practice Managers

- Service Development
- Apprenticeships
- Patient Reference Groups
- Peer Support
- Value for Money
- Utilise Technology Patient Empowerment

Working with Partners

- Meet the Challenges, Develop, Share Service Models and Responsibilities
- Central Area Council
- Barnsley MBC
- Health & Wellbeing Board
- CCG Plans aligned to Joint Strategic Needs Assessment

We Recognise

"There is nothing of any significance that we can achieve in isolation. We must work closely with our local partners, in particular Barnsley Metropolitan Borough Council, the local Children's Trust, Barnsley Hospital NHS Foundation Trust, South West Yorkshire Partnership NHS Foundation Trust and Primary Care providers on issues across Barnsley and with other CCGs on matters that cross CCG boundaries."

Barnsley CCG Commissioning Plan 2013 - 14



Any questions?

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