
17th January 2007

REPORT TO THE SELECT COMMITTEE FOR HEALTH AND ADULT SOCIAL CARE

Report of the Director of Adult, Community and Housing Services, the Director of Children's Services AND The Chief Executive of Dudley Primary Care Trust

Joint Commissioning Framework for Health and Social Care in Dudley

Purpose of Report

1. To present the draft Joint Commissioning Framework and Strategy for Health and Social Care (which has been made available in the Members Library) between the Council and Dudley Primary Care Trust (PCT) and to provide the opportunity for the Committee to contribute to shaping the Framework and Strategy for Dudley people.

Background

2. The Community Services White Paper, *Our health, Our Care, Our Say* issued by the Department of Health (DH) in March 2006 and further DH consultation *on a Commissioning Framework for Health and Well-Being* (March 2007) set the context for the activity in Dudley in developing a Joint Commissioning Framework and Strategy for Dudley Borough.
3. *Our Health, Our Care, Our Say* had four main goals for health and social care services to
 - provide better prevention services with earlier intervention
 - give people more choice and a louder voice
 - do more to tackle inequalities and improve access to community services
 - provide more support for people with a long term illness.
4. The DH consultation on a *Commissioning Framework for Health and Well-Being* requires Local Authorities to work even more closely with the PCT and other health partners and argues that

“Commissioning for health and well-being means involving the local community to provide services that meet their needs, beyond just treating them when they are ill, but also keeping them healthy and independent.”

5. The Commissioning Framework and Strategy document is the first presentation of the work of the Council with its partners to take forward our commissioning activity in the coming years. The purpose of the Framework is to:
 - analyse the strategic health and social care issues facing Dudley Primary Care Trust (PCT) and Dudley Metropolitan Borough Council (MBC) and translate them into a commissioning framework
 - identify the strategic direction for commissioning services for the next 5 years
 - agree key strategic goals in terms of population health, quality, patient experience and finance.
 - identify a clear set of commissioning priorities and actions that will enable the strategic health issues to be addressed.

6. The local community in Dudley were engaged at the start of this work through a variety of means:
 - three “Think Tank” sessions in June 2007 for over 200 Dudley people as patients, users of care services, carers, or part of the wider public as well as staff and clinicians. The people who attended were invited to think about a range of scenarios in Dudley based on economic and social development and the needs that we all might have as we go through life’s course. These events were also highlighted through an interview on BBC Radio WM with Council and PCT staff.
 - a specific event for the community and voluntary and community sector at which 22 different groups were represented
 - a questionnaire for staff and management groups to reflect on connected themes

7. A broad and initial Joint Strategic Needs Assessment (JSNA) was also undertaken to influence the work and builds on work done in both children’s and adults services. A copy of this is also available to the Member’s Library. From April 2008, there will be a statutory requirement for Directors of Adult Social Services, Children’s Services and Public Health to work together to produce a JSNA. Key messages from the activity undertaken in Dudley to prepare for this are:
 - **demography:** we have to respond to the demographic challenge of an ageing population.
 - **health risks:** we need to acknowledge that there will be more long term illnesses and that circulatory disease and cancer are the two “big killers”, and that the rise in obesity and the increase in alcohol related disease are high risks.
 - **work and the economy:** our health is better if we have a job and access to skills therefore, putting energy into prevention is a key aim.
 - **housing:** decent homes promotes the likelihood of a positive experience of good health.
 - **social care provision:** needs to continue to promote people’s independence as part of ensuring the provision of care closer to home.
 - **new technologies:** need to be exploited to their best effect in the context of some expensive healthcare treatments.

8. As a result, the following strategic outcomes for health and social care services in Dudley have been identified for the Strategy whereby our commitment is that we will:
 - Be Fair
 - Provide personalised care
 - Be effective
 - Stay safe
 - Achieve economic well-being

9. Not only has the content of the draft Joint Commissioning Framework and Strategy so far built on our JSNA and the responses which Dudley people have offered in the consultation but also on a range of existing health and care strategies for Dudley as set out in Appendix 1 of the Framework, such as our Learning Disability Strategy, Older People's Strategy or Health Inequalities Strategy. Consequently, seven commissioning intentions have been developed so that commissioning of services will demonstrate
 - how communication and information for people is improved to help people make choices.
 - that the service is patient-centred and patient-led and is tailored to the needs and wants of each individual
 - commitment to the overall pathway of care and promotion of greater service integration.
 - how they contribute to or have the potential to promote wider health and well-being and enable people to remain independent.
 - how they contribute to the wider socio-economic agenda and
 - we will develop a transparent commissioning process in which all providers will be able to participate and we will actively seek out innovative ways of meeting our strategic objectives
 - all future plans for commissioning of services must demonstrate how they reduce inequalities, promote equity and embrace diversity.

10. These commissioning intentions are the basis for ten commissioning priorities with examples of activity which flow from the priorities as follows:
 - **Overall** – commissioning services where possible that will reduce health inequalities and contribute to prevention
 - **Staying healthy** – expand services to improve mental and physical well-being including nutrition, smoking, reducing alcohol intake and taking exercise.
 - **Children and young people's health** – giving children the best start in life in terms of health and greater integration of services for children with disabilities
 - **Support for people with mental health needs** – supporting improved access to early intervention in primary care
 - **Support for people with learning disabilities** – giving greater control to people with learning disabilities over their own lives
 - **Support Older People** – supporting initiatives that promote health and well-being and support through the experience of long-term health conditions
 - **Support for people with long-term conditions** – increase in Expert Patient Programme
 - **Planned care** – re-designing clinical pathways in the light of growing demand for musculoskeletal or cardiac services among others
 - **Urgent care** – scoping an increase in primary care based urgent services

- **End of life care** – to enable people to die at home if they wish

10. The Commissioning Framework and Strategy is now the subject of wider consultation in Dudley and the views of the Cabinet on its direction and approach are welcomed as part of the NHS statutory consultation timescales. Consultation will also be made with the Scrutiny Committee on Health and Adult and Social Care at its next meeting.

Finance

11. Whilst there are no immediate financial consequences to this report, the commissioning of health and care services uses considerable sums that need to be spent wisely by the Council and the Dudley PCT.

Law

12. Further guidance will be forthcoming from central government about commissioning processes in response to their consultation document of March 2007.

Equality Impact

13. The Council with its partners has consulted with Dudley people and patients in June 2007 and consulted further on this work at a specific event for black and minority ethnic communities in Dudley on 17th November. It is a key part of the framework and strategy that a focus for commissioning of health and care services is on assisting the process to “narrow the gap” so that good health and well-being is available to all and the commissioning priorities support work in addressing health inequalities.

Recommendation

14 It is recommended that the Committee:-

- note the progress made on developing a draft Joint Commissioning Framework for Dudley and comment as appropriate;
- endorse the commissioning priorities as set out in para. 10.

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Background Papers-

Draft Commissioning Framework
Joint Strategic Needs Assessment

