

# Working Together Across Cheshire



## Have your say

The future of NHS Eastern Cheshire, South  
Cheshire, Vale Royal and West Cheshire  
Clinical Commissioning Groups

**28 May 2019 – 23 June 2019**

## 1. Introduction

NHS commissioning is the process of planning, buying and monitoring health services.

NHS Clinical Commissioning Groups (CCGs) have been responsible for planning, buying and monitoring local health services since April 2013.

CCGs combine the expertise of local clinicians including family doctors (GPs) nurses and NHS managers, putting local doctors and nurses at the heart of decision-making. CCGs also have a legal duty to involve patients and the public.

There are currently four CCGs in Cheshire:

- NHS Eastern Cheshire Clinical Commissioning Group
- NHS South Cheshire Clinical Commissioning Group
- NHS Vale Royal Clinical Commissioning Group
- NHS West Cheshire Clinical Commissioning Group

The areas covered by the CCGs are shown on the map below:



## 2. What we do

Cheshire CCGs are responsible for planning, buying and monitoring:

- GP (family doctor) services (sometimes referred to as 'primary care')
- Planned (or elective) hospital care
- Urgent and emergency care including 'blue light' ambulance services, Accident and Emergency (A&E) services, NHS 111 (non-emergency line) and out-of-hours services which operate when GP practices are closed
- Community health services (e.g. district nursing)
- Maternity services
- Older people's healthcare services
- Healthcare services for children, including those with complex healthcare needs
- Rehabilitation services
- Healthcare services for people with mental health conditions
- Healthcare services for people with learning disabilities and autism
- Continuing Healthcare and Funded Nursing Care support for people with complex needs who require specialist nursing support

**Our aim is to deliver high quality, affordable patient care which meets local need.**

When making funding decisions we consider the following key objectives:

- Improving clinical outcomes
- Providing joined-up care
- Caring for patients closer to home
- Reducing unwanted variation in quality of care from one area to another

## 3. Why do we need to change?

Cheshire's health and care system provides good levels of care. But too often people tell us they fall into gaps between services and experience delays or disjointed care. A growing number of people with multiple conditions – in particular – tell us their care can often be fragmented, confusing and inefficient. Many people are treated in hospital when their needs could be better met closer to home. It has been clear for some time that simply challenging local health and care organisations to work harder in a fragmented and reactive way is not the answer.

Instead, local health and care organisations need to work together better to help people to prevent ill health, act on ill health earlier and provide more care closer to home – improving quality of life and people’s ability to live longer, healthier lives.

Funding for health and care services is tight across the country and significant system-wide challenges mean Cheshire CCGs face an increasingly difficult annual challenge to balance the books. With demand for services rising faster than budgets, positive change is needed to maintain and improve the quality of care that the people of Cheshire have every right to experience.

Despite concerted efforts, the Cheshire NHS is failing a number of NHS Constitution standards amid unprecedented demand for services. The existing set up of four separate CCGs can limit our ability to quickly deliver improvements for the people of Cheshire. Examples of fragmented, inconsistent care remain.

Working Together Across Cheshire will help create the best environment to accelerate the development and implementation of new models of integrated care and make better use of the existing workforce across the four CCGs, improving efficiency and reducing duplication, while continuing to deliver our statutory duties.

### Cheshire West

If Cheshire West was a village of 100...



### Cheshire East

If Cheshire East was a village of 100...



## 4. Place based care and Integrated Care Partnerships (ICPs)

Nationally and regionally there is a direction to move towards Place-based care, with 'Place' being identified as local authority boundaries. We have been working closely with Cheshire East Council and Cheshire West and Chester Council colleagues to consider what this would mean for the four Cheshire CCGs.

We believe that Working Together Across Cheshire will create the best environment to support the development of place-based care and two Integrated Care Partnerships (ICPs) within the local authority boundaries of Cheshire East, and Cheshire West.

ICPs bring together health and care providers e.g. GPs (family doctors), hospitals and community services – working together on local authority footprints. ICPs are designed to join up hospital and GP services, health and social care, mental and physical health, and the NHS with local communities.

Truly integrated care is about bringing health and social care together. By joining up services which are currently provided separately, we can make better patient decisions by pooling experience, expertise and resources. By focusing on preventing ill-health and unnecessary hospital admissions we can ensure local services are sustainable for the future.

Joining up services which are currently provided separately will enable teams to work together more effectively and efficiently, with the same shared goals. It will benefit the people of both Cheshire West and Cheshire East by moving away from systems that are designed to treat problems when they occur, but often involve travelling to hospital or using Accident and Emergency or same day GP appointments.

Integrated care provides the opportunity for us to go further and faster to organise services in a more joined-up way and create a more efficient system which enables local people to access high-quality care when they need it.

## 5. Care Communities

At the centre of plans for integrated care across Cheshire is the development of our 'care communities' where GP practices and community care teams work together to provide care and support to people who live in their area, typically between 30,000 and 50,000 people.

There has already been good progress in joining up services and improving outcomes for patients and the wider community. Building on this foundation, we are committed to developing care communities across Cheshire, to ensure even more



care and support is delivered closer to home. Care communities will extend beyond existing care community teams, providing a greater emphasis on supporting prevention, promoting self-care and self-management of long-term conditions.

Key principles that health and care partners will apply shaping the development of our care communities include:

- Services will be built on assets of local communities
- We will always involve local people in the shaping of services
- We will take a person-centred approach to the delivery of care and support
- Services will be delivered within the community, closer to home
- We will always support prevention of illness and promote wellbeing
- We will aim to intervene early in an emerging problem
- We will have a shared understanding of population needs and will work towards shared medical records.

We recognise that the input of patients and the public is absolutely key to the development of our care communities across Cheshire, both to ensure a person-centred approach to the design and delivery of care and support and to build on assets of the community.



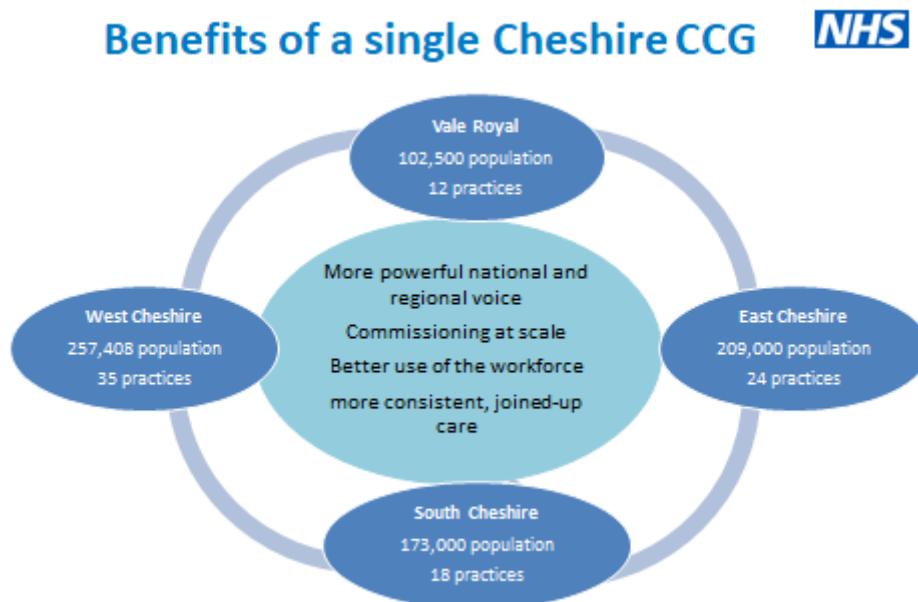
## 6. What will our proposed changes deliver?

Working Together Across Cheshire and the development of place-based care will deliver more consistent, joined-up care across the county and give Cheshire a more powerful voice in championing the needs of local people at regional and national level.

Working Together Across Cheshire will also maximise the opportunities for commissioning at scale, getting better value for money and ensuring a level playing field for patients across Cheshire.

Financial savings will be secured via fewer formal meetings and committees and better use of the combined CCG workforce – improving efficiency and reducing duplication. A single Cheshire CCG will be responsible for commissioning the best possible outcomes for the population of Cheshire within its available resources.

It would focus increasingly on longer term strategic planning, in partnership with local authorities and would be responsible for jointly commissioning Integrated Care Partnerships.



Importantly, the proposed move to a larger geographical footprint will not be at the expense of any new CCG's ability to engage with GPs and local communities at local level. The CCG will remain clinically-led and the statutory duty to involve patients and the public will remain and will continue to be prioritised.

Our Proposal is to progress the ambition outlined above. We have made the following recommendations:

- That a single Cheshire CCG is created from 1 April 2020
- That the move to a single Cheshire CCG happens alongside the development of two Integrated Care Partnerships
- That, during 2019-20, the CCGs identify new opportunities to plan and buy services together
- That the CCGs introduce shared decision-making processes before 2020

## 7. How will we involve and engage people in our plans?

The proposed merger of the Cheshire Clinical Commissioning Groups and the move towards place-based care will not be at the expense of our ability to engage with local communities at locality level. The statutory duty to involve patients and the public in commissioning health and care will remain and continue to be prioritised.

We believe that by working together we can be outstanding by communicating and sharing in an open and honest way, empowering our local communities by giving an opportunity for each individual to be involved and making engagement meaningful and valuable.

We are committed to listening to the experiences of local people and working with them to co-produce local, community-led solutions to better manage the health and social care needs of our local population.

We'll achieve this via an ongoing conversation between NHS Organisations, local partners and the public to continue to build a better coordinated health and social care system able to meet the health needs of our population both now and into the future.



We recognise that the input of patients and the public is absolutely key to the development of our Integrated Care Partnerships and Care Communities across Cheshire, both to ensure a person-centred approach to the design and delivery of care and support and to build on assets of the community.

The Care Communities will provide significant opportunities for more effective engagement with local communities.



The communications and engagement teams have a good understanding of the make-up of the local population and will continue to foster good relationships with patient forums and local voluntary sector organisations. We will involve and engage with people via:

### **Individual participation**

By placing patients, their carers and families in the driving seat of their own healthcare, we can support them to ensure they have the confidence to take individual ownership and make informed and considered shared decisions.

### **Public participation**

Our patients, public and stakeholders are at the heart of everything we do. Giving them a voice means they can shape and drive local healthcare. By working collaboratively communities can have efficient services built and developed around them.

### **Insight and feedback**

Listening is key, capturing and sharing patient stories provides insight and influences decision making, giving us the opportunity to understand the needs of our local population and provide services that our communities really want.

## **8. Some frequently asked questions**

### **Is this a formal consultation?**

No. However, patient and community engagement is at the heart of this work so it is important to give local people the opportunity to have their say.

For a number of months all Cheshire CCGs have been discussing the proposals for future commissioning arrangements in Cheshire with clinicians, partner organisations and stakeholders – including patient groups and forums. This process will continue throughout the proposed timeline to April 2020 and any agreement to create a single Cheshire CCG is subject to formal approval from GP memberships.

To ensure that all members of the community are equally able to have their say, we have decided to invite the people of Cheshire to tell us their views between 28 May and 23 June 2019. This is just part of an ongoing conversation about the future of the local NHS.

### **What happens next?**

The CCG Governing Bodies are seeking approval from their GP member practices to create a single Cheshire CCG. If the member practices vote in favour, and public support is gained, a formal application to merge will be submitted to NHS England in autumn 2019.

## 9. Get involved, stay involved

A short online survey will be accessible from 28 May until midnight 23 June 2019 to enable you to give us your views. To access this survey please click [here](#)

Paper copies of the survey can be requested from [workingtogetheracrosscheshire@nhs.net](mailto:workingtogetheracrosscheshire@nhs.net) along with copies of this document in alternative formats.

This is just part of an ongoing conversation about the future of the local NHS and we are inviting people to share their views and to stay involved by working with us to shape how we involve patients and the public in our work into the future.

All Cheshire CCGs share a commitment to “You Said, We Did”. This means inviting people to share their views, listening carefully and then keeping people informed about what’s changed as a result. This “You Said, We Did” Framework simply illustrates the steps we follow to achieve this.



If you would like to receive regular updates and stay involved please provide your details in your response to the survey or to [workingtogetheracrosscheshire@nhs.net](mailto:workingtogetheracrosscheshire@nhs.net)