

HEALTH AND WELLBEING BOARD 21 January 2016

Report of the Director of Public Health

Health and Wellbeing Policy Update

SUMMARY

- 1.1 Derby Health and Wellbeing Board has a responsibility to lead and advise on work to improve the health and wellbeing of the population of Derby and specifically to reduce health inequalities. It also has a remit to support the development of improved and joined up health and social care services.
- 1.2 This briefing provides the Board with an overview and update of some of the Government's current health and social care policies and policy shapers thinking, to support the Board in delivery of these responsibilities.
- 1.3 The publications/ policy areas included in the briefing are:
 - Spending Review and Autumn Statement;
 - The Spending Review: What Does it Mean for Health and Social Care;
 - Delivering the Forward View NHS Planning Guidance 2016/17-2020/21;
 - Place-based Systems of Care;
 - Shared Principles for Redesigning the Local Health and Care Landscape;
 - Options for Integrated Commissioning;
 - Minimum/ maximum CCGs.
- 1.4 These publications indicate ongoing financial challenge and changes to the health and care system in the near future with the likelihood of a 'mixed model' of approaches to integration, commissioning and transformation. The first big decision is the local planning and transformation 'footprint' the local NHS must submit proposals for its Sustainability and Transformation Plan (STP) by the end of January 2016.

RECOMMENDATION

- 2.1 To consider and note the health and wellbeing policies and publications detailed in the briefing.
- 2.2 The Board seeks to understand the local system-wide financial challenges and implications for 2016/17 and future years.

- 2.3 A development workshop is held to support the Board in:
 - a) The development of a shared local vision of integrated health and care, commissioning and health and care transformation.
 - b) Considering at what local geography is most appropriate for integration, commissioning and transformation of health and care.

REASONS FOR RECOMMENDATION

3.1 To support the Health and Wellbeing Board in shaping and leading the local health and social care system.

SUPPORTING INFORMATION

Policy and Publications Reviewed

- 4.1 **Spending Review and Autumn Statement 2015 (Nov 2015) -** sets out a, "...long term economic plan to fix the public finances, return the country to surplus and run a healthy economy that starts to pay down its debt". This has significant implications for the local health and social care system.
- 4.2 **The Spending Review: What Does it Mean for Health and Social Care? (Dec 2015)** a briefing prepared by the Nuffield Trust, The Health Foundation and The King's Fund provides an assessment of where the Spending Review leaves the NHS and social care.
- 4.3 **Delivering the Forward View NHS Planning Guidance 2016/17-2020/21 (Dec 2015)** sets out the requirements and expectations of the NHS for the coming five years.
- 4.4 **Place-based Systems of Care (Nov 2015)** proposes that providers of services should establish place-based 'systems of care' in which they work together to improve health and care for the populations with organisations working collaboratively to manage the resources available to them. It is expected that this will require a fundamental change to the role of commissioners.
- 4.5 **Shared Principles for Redesigning the Local Health and Care Landscape (Sep 2015)** the NHS Five Year Forward View sets out a vision for the future of the NHS. To deliver this, it suggests that new models of care and delivery are needed. What these models are and how successful they are, is significantly important to both the national and local direction of the health and social care system.
- 4.6 **Options for Integrated Commissioning (June 2015)** the devolution of responsibilities from central to local government and local areas is one of the Government's key policies. A number of devolution deals have already been agreed. Whilst the majority of the deals predominantly focus on transport; business; further education and skills; infrastructure and planning, some, most notably Greater Manchester, also include the devolution of health and social care.
- 4.7 **Minimum/ maximum CCGs** a national commissioning strategy is being drafted by NHS England and is expected to set out potential future scenarios for the role and

function of clinical commission groups (CCGs). This is thought to re-define the boundary between provision and commissioning.

Key Issues

4.8 *Health and care budgets*

- The Spending Review sets out real-terms NHS funding increases in the coming five years, with a significant chunk in 2016/17.
- The establishment of the social care precept and continuation and increase in the Better Care Fund provides further local social care funding.
- There are, however, to be annual real-term savings of 3.9% to public health spending.
- The option for local authorities to fully fund their public health spending from their retained business rates receipts will be consulted on.
- The net impact locally of these proposals is not yet fully known nor the likely impact on local health and social care.

4.9 System change

- There is a requirement that local plans are in place by 2017 for health and social care integration and that they are implemented by 2020.
- It is likely that there will be a 'mixed model' of approaches to integration and commissioning, with no centrally imposed model, although the Government supports models such as Accountable Care Organisations and devolution.
- There is currently a significant move towards 'place-based' systems of care and commissioning.
- Options for integrated commissioning could include either the local authority or CCG taking lead responsibility and accountability or Health and Wellbeing Boards taking on the responsibility (although it is recognised that Health and Wellbeing Boards would need evolve to be able to take on such responsibilities).
- It is anticipated that boundaries between provision and commissioning will diminish in the near future, with commissioning becoming a more 'strategic' function over a larger geography.
- The local NHS must develop, by June 2016, a five-year Sustainability and Transformation Plan (STP).
- 4.10 Further detail on each of these policy areas can be found in the attached briefing paper.

OTHER OPTIONS CONSIDERED

5.1 None.

This report has been approved by the following officers:

Classification: OFFICIAL

Legal officer Financial officer Human Resources officer Estates/Property officer Service Director(s) Other(s)		
For more information contact: Background papers: List of appendices:	Alison Wynn 01332 643106 alison.wynn@derby.gov.uk Health and Wellbeing Board: Policy Update Appendix 1 – Implications Appendix 2 – Health and Wellbeing Board: Policy Update	

IMPLICATIONS

Financial and Value for Money

1.1 There is no current financial impact relating to this report.

Legal

2.1 None directly arising from this report.

Personnel

3.1 None directly arising from this report.

IT

4.1 None directly arising from this report.

Equalities Impact

5.1 None directly arising from this report.

Health and Safety

6.1 None directly arising from this report.

Environmental Sustainability

7.1 None directly arising from this report.

Property and Asset Management

8.1 None directly arising from this report.

Risk Management

9.1 None directly arising from this report.

Corporate objectives and priorities for change

10.1 This report supports the Board in maintaining oversight of key policies and publications that could impact on corporate objectives and priorities for change.

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