## **HEALTH AND WELLBEING BOARD - 25 MAY 2016**

Title of paper:	NCC and CCG Joint Commissioning Priorities 2016/17			
Director(s)/	Candida Brudenell: Assistant Chief	Wards affected:		
Corporate Director(s):	Executive	All		
	Katy Ball: Director of Procurement and			
	Children's Commissioning			
	Lucy Anderson: Assistant Director of			
	Quality Governance, Children and			
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Other colleagues who	Christine Oliver: Head of Service, Crime	& Drugs Partnership		
have provided input:	Jo Williams: Assistant Director Health and	Care Integration, Nottingham		
	CCG			
	Lucy Anderson: Assistant Director of Qua	ality Governance, Children and		
	Learning Disabilities, Nottingham CCG			
Date of consultation wit	h Portfolio Holder(s)			
(if relevant)	. ,			
Relevant Council Plan Key Theme:				
Strategic Regeneration and Development				
Schools				
Planning and Housing				
Community Services				
Energy, Sustainability and Customer				
Jobs, Growth and Transport				
Adults, Health and Community Sector				
Children, Early Intervention and Early Years				
Leisure and Culture				
Resources and Neighbou	rhood Regeneration			
Relevant Health and Wellbeing Strategy Priority:  Healthy Nottingham - Preventing alcohol misuse				
Healthy Nottingham - Preventing alcohol misuse				
Integrated care - Supporting older people				
Early Intervention - Improving mental health Changing culture and systems - Priority Families				
Changing culture and sys	tems - Frionty Families			

# Summary of issues (including benefits to citizens/service users and contribution to improving health & wellbeing and reducing inequalities):

This report sets out the commissioning intentions for Nottingham City Council and the joint commissioning intentions for Nottingham City Council (NCC) and Nottingham City Clinical Commissioning Group (CCG) for 2016-2017 which will form the basis of the work programme for both organisations and will inform prioritisation of resources. This is a live document and therefore subject to change as detail emerges.

The commissioning priorities will provide an important catalyst for:

- Improving outcomes and choice for children, adults and families in key areas
- Reducing costs

Increasing focus on prevention and early intervention

### Recommendation(s):

- To approve the main areas of activity identified within the joint headline plan (Appendix 1) and the more detailed implementation plans (Appendix 2 NCC commissioning intentions; Appendix 3 Joint NCC and CCG commissioning intentions).
- 2 To agree a timescale for reviewing the progress made on the plan, potentially through RAG rating each activity area.

How will these recommendations champion mental health and wellbeing in line with the Health and Wellbeing Board aspiration to give equal value to mental health and physical health ('parity of esteem'):

The commissioning intentions relating to the Health and Wellbeing Strategy outcome, 'People in Nottingham will have positive Mental Wellbeing and those with Serious Mental illness have good physical health' will support this aspiration.

# 1. REASONS FOR RECOMMENDATIONS

1.1 Agreement of the commissioning intentions for 2016/17 by the Board will establish the work programme for the City Council and the CCG and enable resources to be allocated effectively.

# 2. BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1 Discussions have taken place with relevant partners in relation to commissioning priorities for 2016-17. These were based on consideration of citizen outcomes, policy and legislative requirements, contractual issues, budgetary issues, time elapse and outcome of last review and deliverability. The plan will form the basis for the allocation and prioritisation of resources for the forthcoming year in order to deliver improved outcomes for Nottingham citizens, transformational change and systemic efficiencies.
- 2.2 This plan identifies NCC priorities and our combined priorities across health and social care provision and will underpin the work of the Commissioning Executive Group and the Health and Wellbeing Board
- 2.3 As a result of this engagement and prioritisation process, commissioning activity for the coming year has been aligned as far as possible with the outcomes and priority areas identified within the Health and Wellbeing Strategy.
- 2.4 Activity related to improving physical health outcomes has been listed under the outcome 'People in Nottingham adopt and maintain Healthy Lifestyles' Activity related to improving mental health has been listed under the outcome 'People in Nottingham will have positive Mental Wellbeing and those with Serious Mental illness will have good physical health' Activity related to empowering people to live healthy lives or activity related to wider system change, including services working better together, which will ultimately support people to live healthier lives, has been listed under the outcome 'There will be Healthy Culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill-health'. Finally, activity related to improving citizens' physical environment has been

Listed under the outcome 'Nottingham's Environment will be sustainable; Supporting and enabling citizens to have good health and wellbeing'

- 2.5 The attached provisional headline plan (Appendix 1), indicates activity undertaken by each organisation and activity that is being undertaken jointly. The attached provisional Implementation Plans (Appendix 2- NCC commissioning intentions and Appendix 3 Joint NCC and CCG commissioning intentions), indicate activity undertaken by Nottingham City Council only and Nottingham City Council jointly with Nottingham City Clinical Commissioning Group.
- 2.6 Each activity area will be worked up further to identify person-centred outcomes and make reference to national outcomes frameworks and our local strategies and plans.
  In addition to the activity outlined, it is recognised that all partners will have additional priorities and 'business as usual' that will require some allocation of resource.

## 3. OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

- 3.1 Other options for commissioning intentions have been considered as part of early discussions with partners, but have been rejected on the basis of application of the following considerations:
  - Outcomes for children, adults and families
  - Financial factors
  - Policy Framework
  - Contractual issues
  - Time since last review
  - Partnership priorities
  - Deliverability

# 4. FINANCE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR MONEY/VAT)

4.1 The finances associated with each area of activity have been identified where possible. Further analysis of spend contained within each area of activity will be undertaken in order to identify potential efficiencies

# 5. LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT ISSUES, AND LEGAL CRIME AND DISORDER ACT AND PROCUREMENT IMPLICATIONS)

5.1 This report does not raise any significant legal issues and any Crime and Disorder Act implications arising from the recommendations in this report are positive

#### 6. EQUALITY IMPACT ASSESSMENT

6.1 Has the equality impact of the proposals in this report been asses:	sed':
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	(Please explain why an EIA is not necessary)
	Yes Attached as Appendix x, and due regard will be given to any implications identified in it.
7.	LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

- 7.1 None
- 8. PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT
- 8.1 None