Response to Engagement on our Commissioning Strategy for 2016 – 2020

What will our Commissioning Strategy aim to do?

NHS Nottingham City CCG is developing a new four year strategy that will be launched in late 2016/17. Our strategy will set out how we intend to achieve our aims over the coming years. Our ambition is to:

- Increase the number of years that people in Nottingham live in good health
- Reduce the health inequalities experienced between different areas in the city
- Empower people in Nottingham to improve their own health.

In developing our strategy we have used analysis of population trends and disease profiling to identify a set of commissioning priorities. These priorities are the areas of health that we know have the most impact on people living in the city. They are:

- Mental health
- Cancer
- Long-term conditions
- Musculo-skeletal disorders

Focusing on these priorities will enable us to have the greatest impact on reducing health inequalities.

How have we involved local people on the development of our strategy?

Between May and August 2016 we spoke to people in Nottingham City about how we could shape local services to achieve our aims. We attended events, ran surveys and held a number of focus groups with different communities to understand what different people need from the services we commission.

This statement provides a summary of what the people we engaged with told us and what we are doing or planning to do to address that feedback. We are publishing this response with the final report on the engagement programme to keep people up to date with what we are planning to do.

We will continue to develop our strategy, which will be published later in 2016/17, and will ensure that the feedback we have received is incorporated into our plans. This statement provides an overview – we will provide an updated response when we publish our strategy.
What have people told us?

When talking to people about how best to shape services to achieve our aims, four key themes emerged. These are summarised below.

Improving access to GP services:

- People told us that difficulty getting a GP appointment was a factor in their overall health
- People also felt that it was important for everyone to have access to the same level of service in accessing GP appointments
- People talked about challenges related to having additional support or communication needs when attending GP appointments.

Widening and promoting alternative access points to GP services:

- People felt that we should find different, more targeted ways of raising awareness of local services and delivering health education messages
- People felt that we should develop alternative access points in primary care.

Making services more inclusive and empathetic:

- A key theme of the feedback was the importance of delivering health services that are sensitive to the needs of different communities
- People told us that if healthcare professionals had a better understanding of different cultural needs, services would be more effective.

Improving access to mental health services:

- A range of issues with local mental health services were raised including waiting times; the availability of psychological therapies; addressing stigma associated with mental health and better use of self-referral services.

How will these findings inform what we do?

Many of the things that people told us are reflected in some of the work that we are already doing or planning to do. Other themes within the feedback will be considered as part of the work we develop to deliver our strategy.

As well as incorporating the findings from the engagement programme into our Commissioning Strategy, we will also consider the findings in the following:

- Our community grants programme, which we will launch in 2017
- Our research programme, specifically to inform any work that seeks to better understand different communities in the city
- Our social value strategy, which will look at how we can incorporate wider social outcomes in our commissioning processes
Our engagement programme, which will involve people at different stages of our commissioning processes.

What are we doing or planning to do as a result of the engagement findings?

Improving access to GP services

There are various national and local initiatives that address many of the issues identified through the engagement. Much of our work locally will be driven by the General Practice Forward View (GPFV), which is a national plan for improving access to GP services. The CCG is developing a local plan to support the aims of the GPFV.

The Primary Care Vision was developed and launched in 2014 to improve quality and increase access to primary care. It includes five core objectives, which are:

- Integrate primary community and social care
- Standardise and improve access to primary care
- Utilise and adapt innovative technology and best practice
- Develop a shared workforce across primary care, making the most of different specialisms
- Promote a shared responsibility for health between patients and different health organisations.

We are currently developing a range of programmes that will help us to achieve these objectives.

The Primary Care Patient Offer for Nottingham City introduces minimum standards of care across GP practices. These Standards include:

- Practices offering appointments 8:00am to 6:30pm Monday to Friday
- Provision of additional primary care services
- Increased awareness of Patient Participation Groups and how they contribute to practice decisions.

Although we cannot make our Primary Care Patient Offer compulsory, 50 of 56 practices in the city have already signed up to the standards.

To improve how GP practices work with patients with additional support or communication needs we will implement a programme of cultural competence development, based around the needs of different groups.

We will work with GP practices to implement the Accessible Information Standard, which aims to ensure that people who have a disability, impairment or sensory loss get information that they can access and understand.

We will also work with our GP practices in 2017 and beyond to support them in further developing Patient Participation Groups (PPGs).
Widening and promoting alternative access points to GP services

We will review how we provide information about local health services and how we deliver messages around health education. We will use our People’s Council, our patient leaders and local community networks to design a programme of work that takes messages about health and health services out into local communities.

We will consider how we can incorporate a community-based approach to delivering health messages through our community grants programme and our engagement work. To do this we will prioritise projects that build capacity within communities and empower people to deliver messages on our behalf.

Making services more inclusive and empathetic

We will develop a programme of cultural competence development for our staff and GPs to improve how we respond to different needs. We will work directly with people who have different cultural, support or other needs to design and deliver this work.

Our cultural competence programme will include consideration of communication barriers; cultural traditions and taboos; the health needs of new and emerging communities and the barriers different people can face to adopting healthier lifestyles. We will also review how we ensure that the services we commission consider the cultural competence of healthcare professionals.

We will implement our new engagement framework, which includes training local patient leaders to work with us and developing our People’s Council. We have already committed to undertaking up to two engagement projects each year aimed at better understanding the needs of seldom heard groups.

Improving access to mental health services

We will implement plans to deliver the Mental Health Five Year Forward View, which includes improvements in:

- Children and young people’s mental health services including eating disorders
- Perinatal mental health services
- Increasing Access to Psychological Therapies (IAPT), particularly integrating this with physical healthcare and improving access for those with psychosis, bipolar disorder and personality disorder
- Early Intervention in Psychosis services
- Individual Placement and Support (IPS) to enable people with severe mental illness to find and retain employment
- Annual physical health checks for people with serious mental illnesses
- 24/7 community crisis resolution and home treatment services
- Inpatient care (for adults and children) closer to home
We will continue to focus on improving crisis care, working with partners across Nottinghamshire as part of the Crisis Care Concordat. Through this work we will prioritise supporting people before they reach crisis, urgent and emergency access to crisis care and supporting people to recover and stay well.

Through the community outreach work we plan to develop to deliver health messages directly to communities, we will also provide a mechanism for conversations about mental health to take place with the aim of reducing stigma.