
JOINT HEALTH AND SOCIAL CARE BOARD

Subject: Joint Commissioning Strategy

Date of Meeting: 28 September 2006

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MKC/PCT

1. Purpose

- 1.1 The purpose of this paper is to inform Cabinet of the approach and activity undertaken in Joint commissioning across health and social care.

2. Recommendations

- 2.1. That JHSCB note the content of this paper. The significant progress to date is welcomed and the challenges are recognised and the service direction outlined to address the challenges is supported.

3. Issues and Choices

3.1 Introduction and Background

The Joint Commissioning Unit was set up in 2000 by the Council and Primary Care Trust. The unit leads on commissioning health and social care services for Older People, Adults with a Physical Disability, Adults and Older People Mental Health Services, Adults with a Learning Disability, Sexual Health and HIV, and Carers. The majority of the PCT adult community services are included within the scope of the team (e.g. District Nursing, Bletchley site, Intermediate Care).

The content has been discussed with the Joint Planning groups and other health and social care forums including service users and their carers about the future direction of services.

The Joint Commissioning strategy sets out the vision for health and social care services commissioned by the Council and Primary Care Trust and pulls together the current thinking about Joint Commissioning. It contains early review of the new white paper 'Our health, our care, our say: an new direction for community services' published on 30 January 2006 from a joint commissioning perspective and highlights three key messages for health and social care systems – the approach they take should

- strengthen the personal control of care through more access to direct payments, individual budgets and a new deal for carers
- strengthen the focus on prevention and well being by tackling health inequalities and promoting public health.
- strengthen joint working and move to shared strategic planning and commissioning.

Locally a coterminous Council and Primary Care Trust are well placed to deliver on the direction outlined in the White Paper, and to develop an integrated commissioning function that includes community health, public health, adult social care, housing and primary care. They are also well placed to develop this approach and include a wider range of services across all tiers of local government.

3.2 Demographics

The context in which Joint Commissioners operate in Milton Keynes is dynamic and unusual compared to other areas. Milton Keynes is set to continue to grow and change rapidly; the city is increasingly becoming ethnically diverse and multicultural. Therefore the Joint Commissioners are working together with providers, service users and carers and planning for services that meet the future needs of the population. For that work to be successful the health and social care system needs to work closely together to ensure that they deliver the right service, at the right place and at the right time delivered by the right person to enable people to stay as close to home as possible.

3.3 Commissioning Web

Commissioning is usually described as a cyclical process that includes:

- Agreeing the Vision
- Population Based Needs Assessment
- Setting priorities
- Procurement – including tendering and service specification development
- Market Management
- Outcome based monitoring and review

However, experience has shown that for many areas the activities do not necessarily flow from one to the next, e.g. it may be that after agreeing the vision the next key activity is managing the market.

3.4 Current Position

The aim is to shift the balance of resources to a focus of promotion of well being and the extension of universal services away from high cost specialist services. To advance a strategic approach that promotes the quality of life of people and their engagement in the community.

This vision is high level and to achieve it requires changing the way services are commissioned, managed and delivered, redesigning roles and changing the workforce and shifting investment to deliver agreed outcomes for people:

The outcomes outlined in the strategy will be used to test and challenge how far health and social care services are moving towards delivering the vision.

3.5 Challenges for the future

To deliver effective Joint Commissioning for the Primary Care Trust and Council there are a number of challenges that Joint Commissioning need to consider -

1. The Growth of Milton Keynes including the potential need for an increase in the number of acute hospital beds is still under consideration
2. Supporting the Local Strategic Partnership in tackling deprivation; promoting public health and supporting communities, through capacity building and development.
3. Taking all opportunities to integrate services, where that makes sense from a user perspective and in line with the approach outlined in the White Paper 'Our health, our care, our say: a new direction for community services (January 2006).
4. Workforce development and redesigning roles. This has resulted in a reduction in duplication and a sharing of skills and expertise.
5. Developing a strong emphasis on personal responsibility and choice.
6. Developing better tools and information systems to advise and inform service providers to enable them to respond and develop new service models, to increase current capacity.
7. Managing and encouraging the market to develop and ensuring a plurality of providers to meet local needs.
8. Develop robust information systems should be developed that bring together the information support the development of shared IT systems

Background Papers:

- *Commissioning a Patient Led NHS* – Primary Care Trust and Strategic Health Authority reconfiguration to strengthen the role of commissioners
- *Our Health, our care, our say* White Paper setting a new direction for community services: -