



Strategic Overview of the changes in the NHS (including prevention of ill-health)

**Doctor Tom Debenham, Chair of
Woodbury, Exmouth and
Budleigh-Salterton
GP Commissioning Consortia**

Respect, Quality, Effectiveness, Openness, Improvement

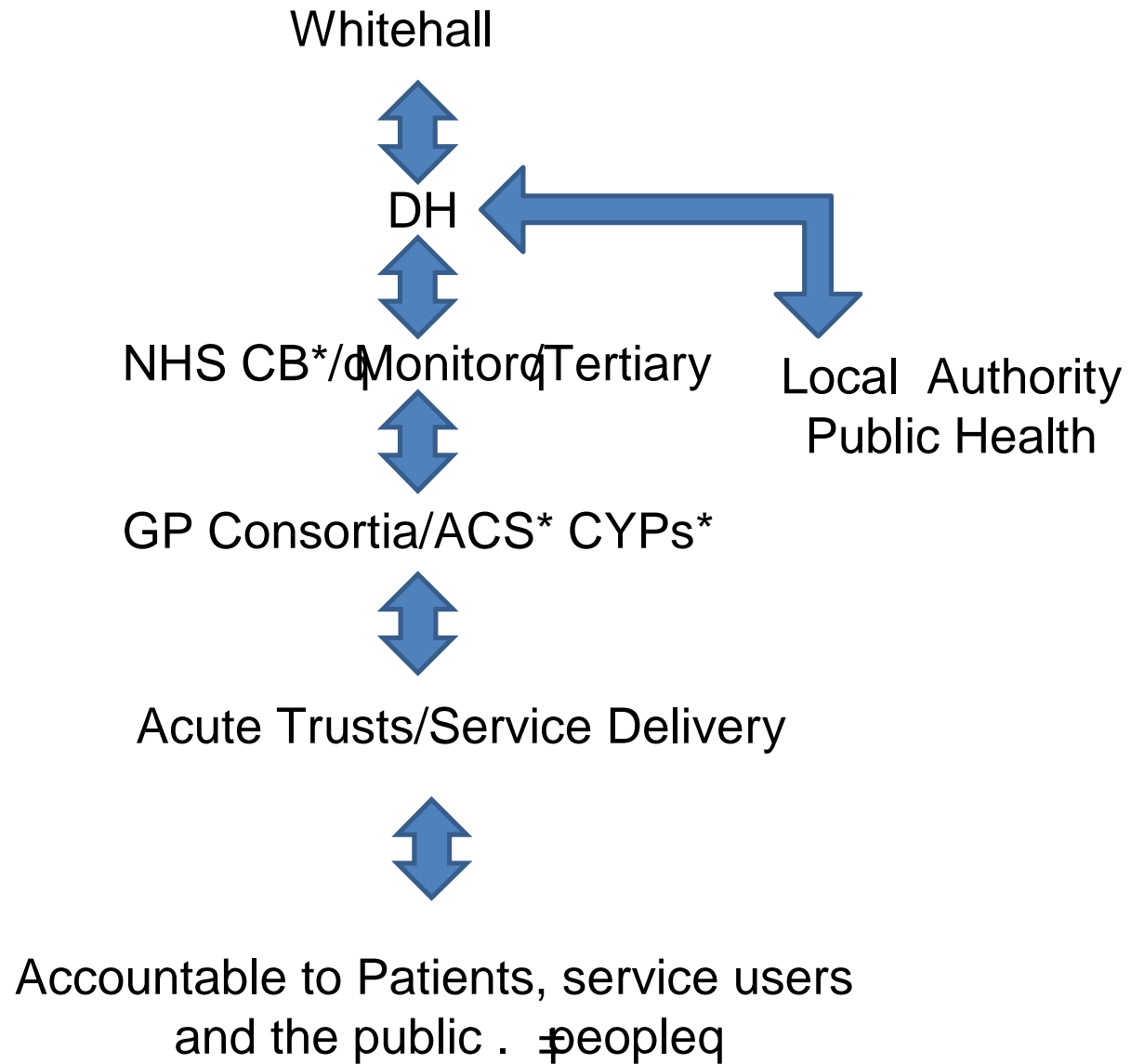
What we'll look at this morning

- “ Update on National Policy
- “ New NHS Structure
- “ NHS in Devon
 - . Pathfinder
 - . Population, GP practices and Community Hospitals
- “ What Commissioning is
- “ Summary of Key changes to the NHS
- “ What does this all mean for you as provider and commissioner?

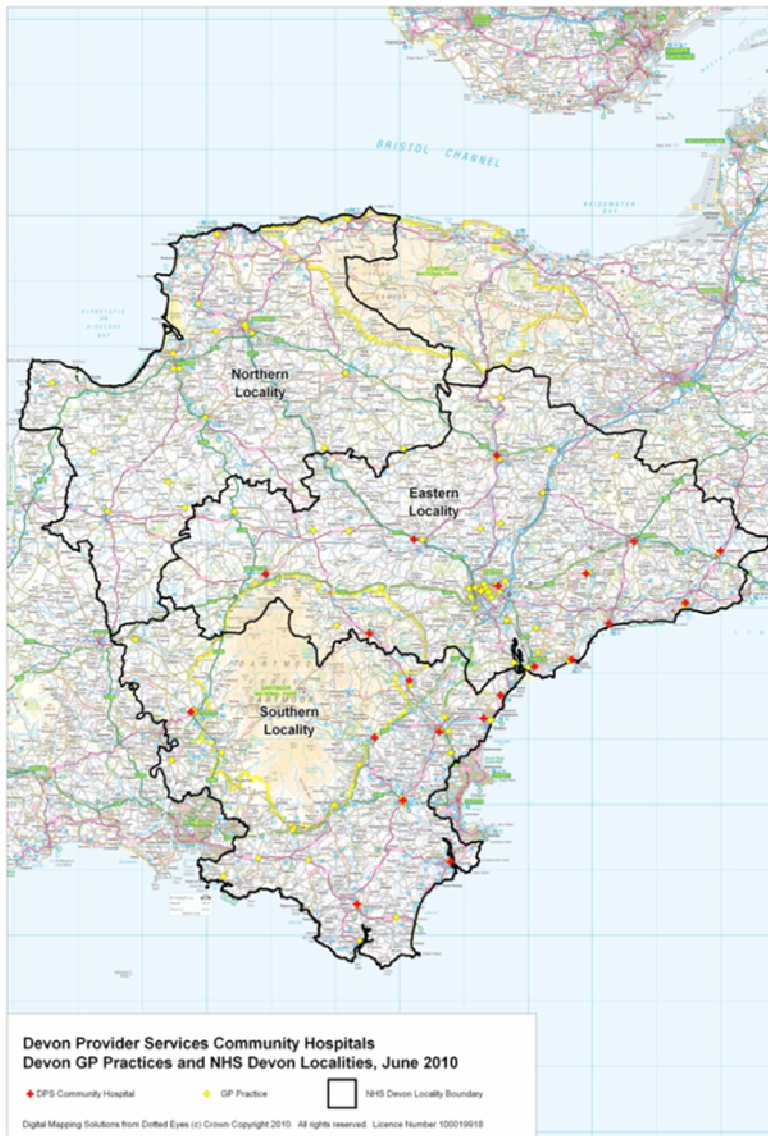
Update on National Policy

- “ Focused on patients . there will be no decisions about me without meq
- “ Putting clinicians in the driving seat
- “ But giving you more say in how the NHS is run;
- “ Emphasis on working better across boundaries with local authorities.
- “ Tariff will continue but as a maximum price.
- “ The market will expand - *Any Willing Provider (AWP)* meeting a standard can provide.
- “ And Strategic Health Authorities and Primary Care Trusts will be replaced by a NHS Commissioning Board and GP Commissioning Consortia.
- “ Aiming to be more efficient and dynamic with less bureaucracy.

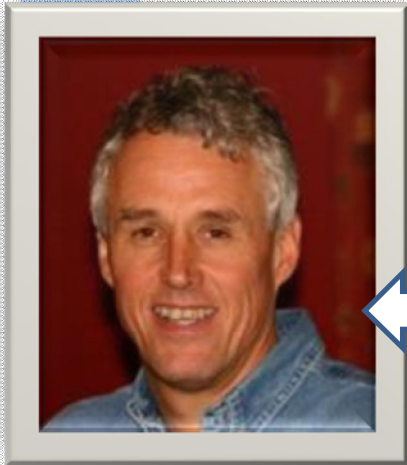
New NHS Structure



NHS in Devon



Eastern GP Localities



Locality	Towns	Locality Chair
WEB	Woodbury, Exmouth, Budleigh-Salterton	Dr. Tom Debenham
Wakley	Axminster, Seaton, Colyton, Sidmouth, Honiton, Ottery-St - Mary	Dr. Phil Taylor
Mid	Crediton, Tiverton, Okehampton, Moretonhampstead	Dr. David Jenner
Exeter	Exeter and surrounds	Dr. Vaughn Rosser



Localities, populations and community Hospitals

	GP Practices	Population	Community Hospitals
WEB	7	48,850	Budleigh-Salterton, Exmouth
Exeter	19	138,952	Whipton
Mid Devon	20	112,683	Tiverton, Okehampton, Crediton, Moretonhampstead
Wakley	6	71,695	Sidmouth, Axminster, Seaton, Ottery St Mary, Honiton
Eastern Total	54	371,952	12

Eastern Locality Structure

Eastern Consortium Board



WEB Locality Management
Team



WEB Locality Group .
GPs/Practice Managers



Local Practices, patients and
public

What Commissioning is

“ Commissioning is Cyclical

- “Assessing local needs
- “Planning for capacity and demand
- “Prioritising, defining, deciding
- “Contracting and standards
- “Monitoring and Evaluation
- “Enabling Patient choice
- “Learning from patient experiences and ...





What Commissioning is



Future Commissioning

- “ We have freedom to innovate,
- “ But a responsibility to improve efficiency and deliver better outcomes.
- “ And involve.

Our local challenge :

- “ To establish clear GP leadership and GP engagement
- “ To strengthen public and patient involvement
- “ To widen patient choice
- “ To commission from a clinical evidence base

Summary of Key Changes

- “ New National Commissioning Board
- “ Local GP commissioning consortia
- “ Public Health transfer to LAs/Public Health England
- “ New Local Health and Wellbeing Boards to join up the commissioning of NHS services with social care and health improvement
- “ ~~Monitor~~ to become a regulator of Foundation Trusts
- “ The Care Quality Commission a quality inspectorate across health and social care

What does this mean for us?

There will be:

- “ More local commissioning responding to agreed local need
- “ More opportunities to tailor local solutions . but this will come with new local challenge
- “ Our drive will be to be provide as close to home as possible
- “ We will share commissioning decisions
- “ And through the new market of *Any Willing Provider* we will work together as providers
- “ So there will be new relationships that will evolve
- “ We must have patience during this transition .



Successful partnerships Summary

- “ Where do you think you fit as providers in the new NHS?
- “ How do you think you should contribute to local commissioning processes?
- “ What could we reasonably hope to achieve this year ?



**Thank you for listening
and
Let's keep talking**

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