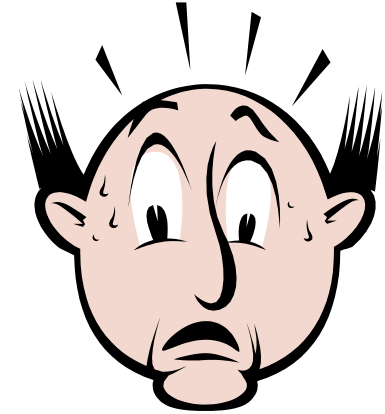


Liberating the NHS

What does it mean for councils?

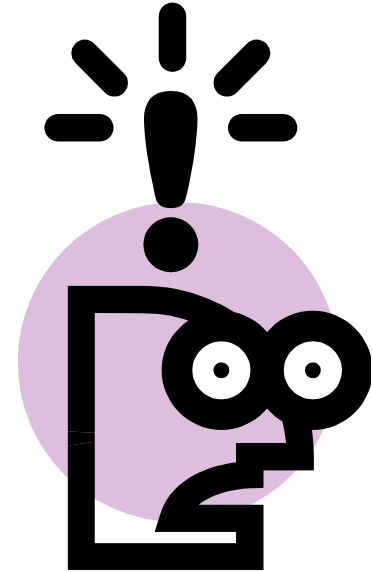
First reaction

- PCT abolished
- SHA going
- What's going to happen to my colleagues?
- How can we do this and save 40%?



Second reaction

- This is really big for the council as well as the NHS
- New set of relationships
- New role for councillors
- New things to learn
- New opportunities to create better services



Third reaction

Calderdale has a lot going for it:

- The right size
- Good relationships
- Strong partnerships
- Some successful innovation



Consultation Document

Published July 2010

The **VISION**:

- Put patients at the heart of everything that we do
- Achieve outcomes that are among the best in the world
- Empower our clinicians to deliver results based on the needs of patients

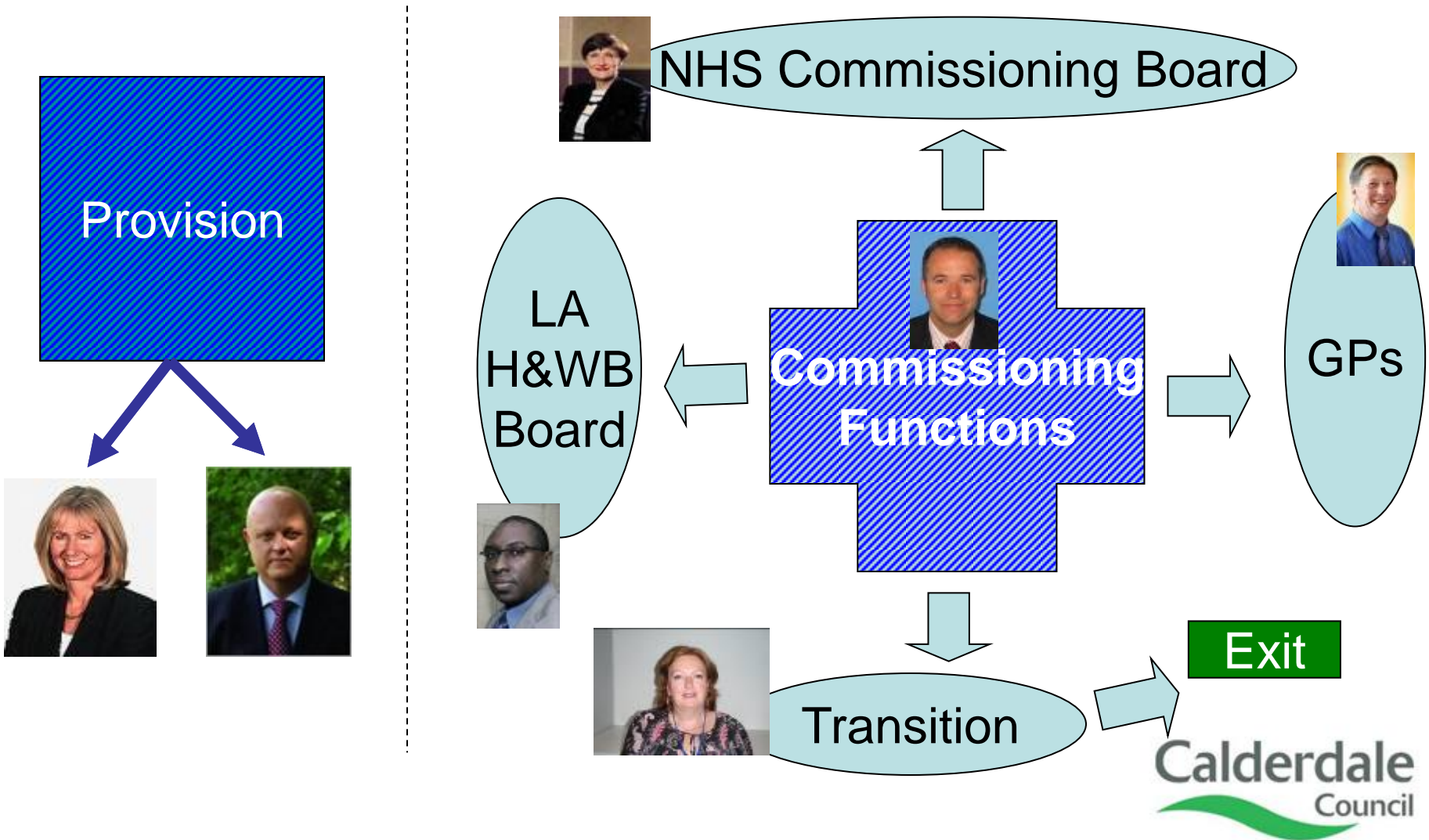


The Key Elements: by 2013

- GP Commissioning Consortia
- Public Health Service in LA
- NHS Commissioning Board
- Health and Wellbeing Boards
- All hospital trusts = FTs
- Monitor - financial regulator
- CQC – quality inspectorate
- HealthWatch – consumer champion



Post April 2011: NHS Functions



Calderdale Transition

- Ready to move at pace
- Shadow format by 1/4/11
- Building on good partnerships
- Existing joint posts and work
- ONE GP Commissioning Consortium
- Public Health White Paper shortly
- Social Care White Paper early next year
- Health & Social Care Partnership Board / Health and Wellbeing Board

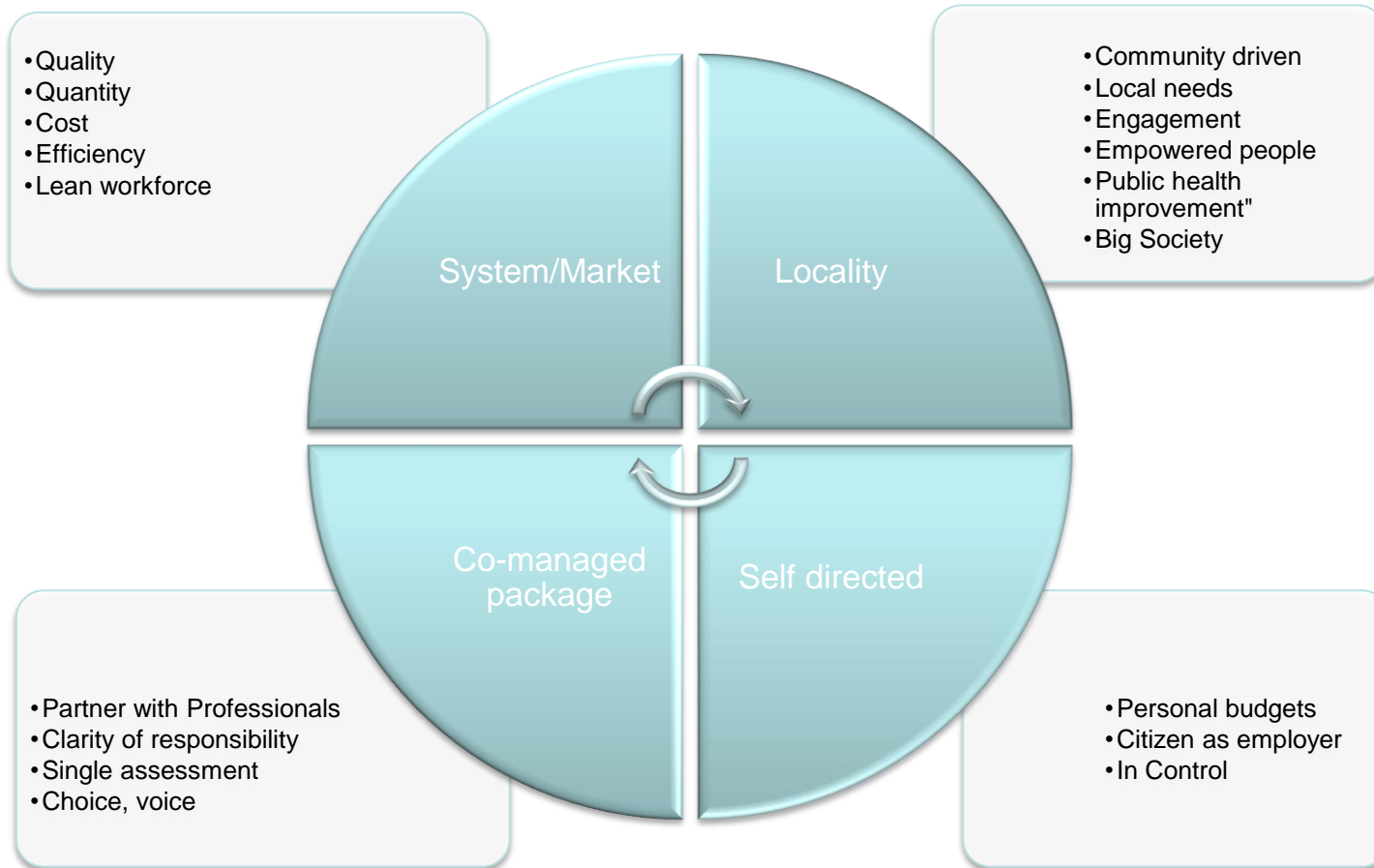


Health & Wellbeing Board

- Promote integration & partnership /joined up commissioning plans
- Across GP commissioners, public health & social care
- Includes children and young people
- Lead statutory, joint, strategic needs assessment
- Overview and scrutiny role absorbed
- Chaired by Council Leader
- With GPs, schools, voluntary & community sector



New commissioning



What's affected?

- Health and Wellbeing Board – overarching responsibility for Calderdale
- Children & Young People's services - planning and commissioning-schools purchasing health?
- Single commissioning
- Public health – local council in the lead
- Redressing health inequalities
- Leisure, Housing, Environmental Health
- Health Watch

Health and Wellbeing

- People living longer and better in their communities
- Healthy local communities
- Good, accessible local services
- Pooling resources at a local level around the family
- Integrated experience for people
- Everything the council does with people

Calderdale Response

- Calderdale is well placed
- Can build on the opportunities
- Concern about capacity in context of financial position
- More clarity about health and wellbeing board
- Behaviour of National Commissioning Board is key
- Question why maternity services not commissioned locally

LGA response

- Welcome Health and wellbeing boards
- Welcome move of public health
- Supports integrated commissioning
- Strengthen scrutiny function for health
- Ensure public health and healthcare not fragmented
- Concern about resources
- National commissioning Board needs local relationships
- Uncertainty about Health Watch

LGA 5 Tests

Do the proposals

- build on existing experience and good practice
- Support local budgeting
- Promote person centred approaches
- Ensure accountability to local communities
- Direct public resources to areas of greatest need

Next steps

- Agree a vision for what we want to achieve with and for Calderdale citizens
- Lets get talking so we understand and respect differing perspectives
- Decide how commissioning is going to be done in Calderdale
- Build the new architecture