

*Thinking Differently*

# Commissioning Intentions

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# Process

- Annual Process on 30<sup>th</sup> September
- Should reflect discussions through the year
- Intentions still required to follow all consultation processes
- Mix of
  - Technical
  - Service Change
  - Procurement Intentions

# Planning Elements

- Some national requirements
  - Guidance published December
  - Should be consistent with MCP
  - Integrated Care – working with non-NHS services
- Wider population Services
  - Urgent and emergency care
  - Clinical Networks – cancer, cardiac, stroke
  - Specialist care

# Local Principles

- Consistent with long term aim to develop a Multi-specialty Community Provider
  - Improving the Health of the Population
  - Access, continuity and co-ordination
  - Empowering people and communities
  - Improving quality and staff retention

# Local Principles

- Meaningful involvement of patients / public
- Clinically led, especially primary care
- Increased move to personalised care
- Close working with Local Authority and voluntary sector
- Quality and continuous improvement
- Living within available resources

# Local Principles

- 10 local teams serving populations of around 30,000 people
- Increased range of services in community
- Easier to access for patients and professionals
- Closing the gap between services
- Starting the transition now

# Services where Dudley is different

- Musculo-Skeletal (joint surgery, back pain, physiotherapy, joint injections)
- Ophthalmology (minor eye care)
- Falls
- Short stay emergency admissions

# What are we already changing?

- Joint Injections
- First contact practitioners (physios)
- Care Home support
- Social care in Emergency Department
- Community Rehabilitation as first choice
- Optometrists to identify minor eye conditions



# What are we already changing?

- GPs and Consultants working together to avoid delays in care (Advice and Guidance)
- Rapid access for minor injuries and illnesses (Urgent Treatment Centre)
- Reducing delays for ambulances when they go to hospitals
- Earlier planning for winter

**What changes would you like to see?**

**What would make the biggest difference to the care you would like to receive?**

## Next Steps

- 3 months to consult with patient groups and public as contracts are discussed
- Opportunity to extend complex discussions where more extensive consultation is needed
- Continue to identify new service areas as a year round process
- Review changes as they are implemented to ensure the benefits are really delivered