Clear and Credible Plan
2012/13 – 2016/17

Commissioning NHS services for Durham Dales, Easington and Sedgefield on behalf of County Durham Primary Care Trust.
This summary of our five year Clear and Credible Plan sets out the key aims and priorities of Durham Dales, Easington and Sedgefield Clinical Commissioning Group (CCG).

Clinical commissioning groups (CCGs), led by local GPs and other health professionals, are now taking on NHS management responsibilities from primary care trusts for the planning and purchasing (commissioning) of local health services for local populations. The creation of clinical commissioning groups is one of the changes to the NHS in the Health and Social Care Bill 2012.

The Durham Dales, Easington and Sedgefield clinical commissioning group was established in October 2011 and is made up of forty one member GP practices. It covers a total population of around 272,000 over a large and diverse geographical area. Our CCG is made up of three locality areas of County Durham - Durham Dales, Easington and East Durham, and Sedgefield.

The three localities have always worked closely together as clinical commissioners, recently as GP led commissioning Pathfinders, and previously as Practice Based Commissioning (PBC) groups. Local GPs across our localities will now have greater opportunity to use their knowledge about services and patients to make changes and to develop services that meet our patients’ needs.

The areas we serve

We cover a population with significant health challenges, both in terms of poor health outcomes and high levels of health inequality. People living within our population are more likely to have worse levels of obesity, hypertension, depression and coronary heart disease and are more likely to die sooner than if they were to live in other parts of the county, region and country overall.

Challenges also include areas of severe deprivation, an ageing population, large rural areas, poor transport links, poor housing, fuel poverty and unemployment.

We have built up a picture of each locality by looking at local health needs and current health service provision, as well as what patients tell us about the services they receive and what we see as clinicians.

From this, we have identified focus areas for each of our localities. These address our clinical priorities and five key aims but ensure we deliver services to meet individual local needs. We want to provide very local models of service to meet the needs of communities in our three localities. These could be very different when provided in towns compared to those provided in rural communities.

Durham Dales

- 12 GP practices.
- Population of 90,500.
- Small urban areas and many large rural areas.
- Covers 540 square miles – challenges delivering healthcare.
- Around 9% of the population is aged 75+, projected to rise to around 11% by 2020.
- Male life expectancy 1.5 years less than average and female 0.9 years less.
- Higher rates of coronary heart disease (CHD), hypertension and depression.

Easington

- 17 GP practices.
- Population of 94,000.
- 74% of LSOAs (lower super output areas) in Easington are in the 30% most deprived nationally (47 out of 63). 30% of Easington’s LSOAs are in the 10% most deprived nationally.
- Mixture of urban and rural areas.
- Covers 145 square km.
- Two main towns’ Seaham and Peterlee populations over 20,000.
- Around 35% of the population is aged 50+, projected to rise to around 40% by 2020.
- Around 8% of the population is aged 75+, projected to rise to around 9% by 2020.
- Male life expectancy 1.6 years less than average and female 2 years less.
- Higher rates of coronary heart disease (CHD), hypertension and obesity.

Sedgefield

- 11 GP practices.
- Population of 87,700.
- Sits between Durham City and Darlington.
- Majority of the population live within towns of Newton Aycliffe, Spennymoor, Shildon and Ferryhill.
- Some small villages and coalfield communities in the more rural eastern area.
- Covers 217 square km.
- Around 34% of the population is aged 50+, projected to rise to around 41% by 2020.
- Around 7% of the population is aged 75+, projected to rise to around 8% by 2020.
- Male life expectancy 2 years less than average and female 1 year less.
- Higher rates of coronary heart disease (CHD), hypertension and obesity.

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Our Vision and aims

Durham Dales, Easington and Sedgefield Clinical Commissioning Group’s vision is “To work together for excellent health for the local communities of Durham Dales, Easington and Sedgefield.”

To deliver our vision, we will focus on:

1. Improving the health of the populations of Durham Dales, Easington and Sedgefield.
2. Making sure our children and young people have a better start in life.
3. Tackling the challenges of an ageing and growing population.
4. Making services more accessible and responsive to the needs of our communities.
5. Managing our resources effectively and responsibly.

Clinical Priorities:

- Meeting the needs of older people.
- Reducing deaths from cancer.
- Mental health - providing right care in the right place.
- Long term conditions, particularly diabetes and COPD.
- Public health and prevention.
- Driving up quality in our provider organisations for patients.

Our Values

These values have been agreed by member practices and shared with patient groups. They will influence and shape our development as an organisation.

- Be open and honest
- Have respect towards our patients and colleagues
- Work collaboratively
- Be patient-centred
- Embrace equality and diversity
- Operate with integrity
- Be patient-centred
- Work collaboratively
- Be patient-centred
- Work collaboratively

How we will deliver our plan over the next five years

We have set ourselves a work programme which we plan to deliver over the next five years, with goals by which we can measure our success.

To improve the health of our population so that people will live longer, and have healthier lives we plan to:

- Develop more diabetes services closer to patients’ homes.
- Support patients to prevent, treat and better manage respiratory conditions.
- Develop more locally available physiotherapy services.
- Increase access to mental health services.
- Expand screening and health prevention programmes and services.

To ensure our children and young people have a better start in life we plan to:

- Increase the number of health visitors and family nurse practitioners.
- Work with schools to educate children about healthy life styles.
- Improve children’s therapy services.
- Invest in physical exercise programmes to reduce levels of obesity.

To support patients so they are better able to manage their conditions, we plan to:

- Develop community focused services to help patients manage long term conditions, such as diabetes or chronic obstructive pulmonary disease (COPD).
- Commission more joint services to meet patients’ health and social care needs.
- Invest in memory and dementia services.
- Improve end of life care services and enable patients to choose their place of death.

To provide a greater number of local services tailored to communities’ needs we plan to:

- Work with our GP practices to deliver and develop high quality primary care.
- Bring in more providers so patients can choose from a wider range of services.
- Deliver more minor operations and services in local community settings.
- Develop community nursing and mental health and learning disability services.
- Develop a 24/7 urgent care service across Durham, especially in rural areas.

- Meeting the needs of older people.
- Reducing deaths from cancer.
- Mental health - providing right care in the right place.
- Long term conditions, particularly diabetes and COPD.
- Public health and prevention.
- Driving up quality in our provider organisations for patients.
Durham Dales, Easington and Sedgefield Clinical Commissioning Group is committed to working with a range of local partners and organisations so that we can develop the best health care services for local people. For example:

**How we will work with partners**

- We will work in partnership with the two neighbouring clinical commissioning groups in North Durham and Darlington – where it makes sense to do so – to make best use of available resources.
- The Health and Wellbeing Board in Durham County Council will join up health services, social care and health improvement through a single approach. An executive clinical lead will sit on this board as our representative.
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**How we will engage with you**

In developing our vision and aims, we have worked closely with GP practices and have held a number of engagement events with patients, other local organisations who provide services and voluntary organisations.

We will continue to develop our relationships with partners, providers and our communities as we deliver this plan, and will ensure that we have a range of ways in which we communicate and engage with you. We will continue to seek the views of our local population with regard to the services we commission and capture ideas on how these services can be improved.

Our aim is that local people will see that we have considered the information we have on health and service needs, shared this information with them and listened carefully to their views, as we deliver step by step changes in care and services, whilst living within our means and demonstrating real value for money.

**How will we afford our plan?**

Durham Dales, Easington and Sedgefield Clinical Commissioning Group will be investing £400 million of taxpayers’ money each year to deliver health improvement and health services for 272,000 people in our area. This amounts to £2.2 billion over the next five years.

We will need to manage our money in the face of significant financial constraint as the government has set challenging targets for us to deliver improved Quality, Innovation, Productivity and Prevention (QIPP).

The challenge for the NHS nationally, is to make £20 billion of efficiency savings by 2014/15. Durham Dales, Easington and Sedgefield CCG’s share of this target is £108 million.

We also need to be able to respond to the significant demographic changes, in particular the increase in the number of older people. As a result of this we recognise that as investors of public money we need to manage our resources carefully.

In order to deliver high quality services and the plans we have set out, we must ensure that we get the best return on investment from our funding. To do this, we will:

- work with our healthcare providers to increase efficiency and minimise waste
- re-invest cost savings into our commissioning priorities for future years
- join up our financial and service planning to manage pressures on our funding
- agree realistic levels of hospital care that we can afford with our main healthcare providers
- continually analyse need, review and benchmark current service
- identify gaps and opportunities for improved practice quality and efficiency
- test innovation and share good practice.

Managing our resources effectively and responsibly will ensure that we make sensible investment decisions whilst getting the most out of the services we are currently paying for on behalf of the taxpayer and our communities.
We hope you have found this summary helpful. Together with our Delivery Plan for 2012/13, it will form the basis of our discussions with the public, patients and carers, providers and key partner organisations.

As new NHS commissioners who will plan and buy health and healthcare for Durham Dales, Easington and Sedgefield, we want to bring more services into GP practices and community settings. We want to develop more local services, and we want to encourage more patient and public involvement in order to deliver the best possible healthcare to our local populations.

We look forward to working with you to look at our progress in implementing our plans for 2012/13 and to discuss our future priorities for investment. If you would like to make any comments about our plans for the future or have your say with regard to future developments please contact:

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Copies of our full Clear & Credible Plan 2012/13 – 2016/17 are available on request through the contact details above. Both this summary and the full plan are available in alternative formats.