# How your local NHS is changing Date

Presenter

Title

### **Croydon population**

- Population 339,500
   (the population is projected to increase by 1.7% by 2013)
- Main areas of deprivation are in the north and south east
- On average men die 10 years earlier and women die 7.5 years earlier in the most deprived areas
- 41% black and minority ethnic communities
- Children 21% of the total population

### Health challenges

- Infant mortality
- Obesity
- Teenage pregnancy
- Chronic obstructive pulmonary disease (COPD)
- Cardiovascular disease (CVD)
- Diabetes
- Mental Health depression and anxiety

### **Health priorities 2011/12**

- Planned care
  - 'better healthcare closer to home' (adults and children)
    - Trauma and orthopaedic, gynaecology, ear nose & throat, eyes, skin, paediatrics etc.
    - Shorter lengths of stay in Hospital.
- Urgent care
  - Redesigning urgent care and A&E in line with strategy
    - 24/7 integrated urgent care and emergency services at the CUH site.
    - 12/7 urgent care at Purley and Edridge Road (GP Led Health Centre).
    - Revamp of Parkway service and facilities.
    - Initiatives to improve urgent care provision in GP Practices.
- Long Term Conditions
  - Improved proactive care for patients through GP Practices.
  - Care management for diabetes, lung and heart conditions.
- Staying Healthy
  - Health checks (through GP Practices).
  - Smoking cessation, sexual health and healthy living initiatives.

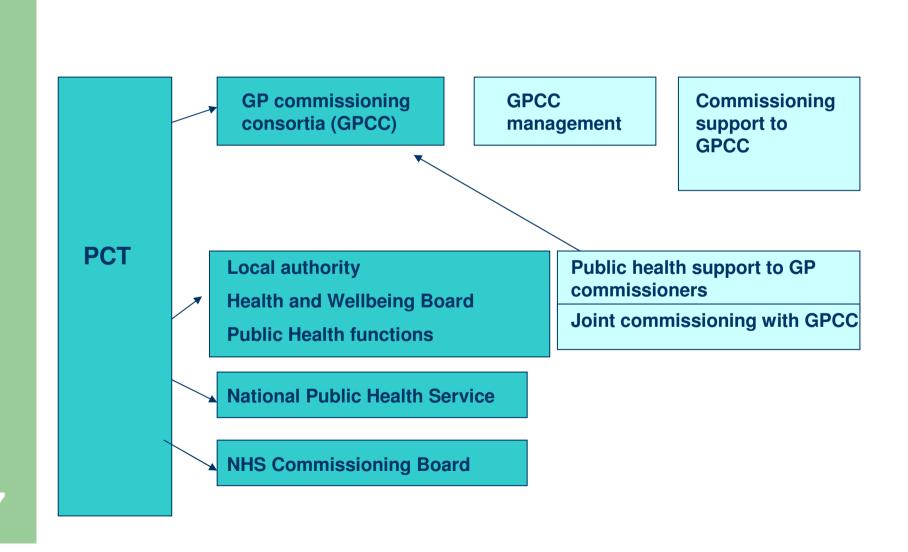
### **Changes to the NHS**

- The new NHS policy framework aims to:
  - Ensure that patients are central to the planning and funding (commissioning) of services
  - Put patients and carers in charge of decisions about themselves
  - Give patients and carers more information
  - Develop a stronger voice for patients
  - Create more choice and control for patients over how care is delivered

## What is commissioning?

- Commissioning in the NHS is the process of ensuring that the health and care services provided effectively meet the needs of the population.
- It is a complex process that includes:
  - assessing population needs
  - prioritising health outcomes
  - procuring products and services
  - managing service providers

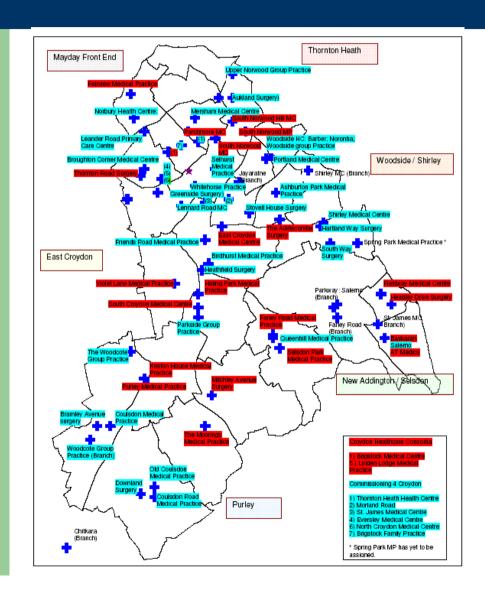
### **Proposed future of local NHS functions by 2013**



### **Current picture**

- Two developing GP consortia:
  - Croydon Healthcare Consortium
  - Commissioning 4 Croydon
- Health and Wellbeing Board in shadow form from 1 April 2011
- Local primary care trust (PCT) moving to a sector structure with a borough team, with effect from 1 April 2011
- Public health proposed to go to local authority

### Consortia development in Croydon

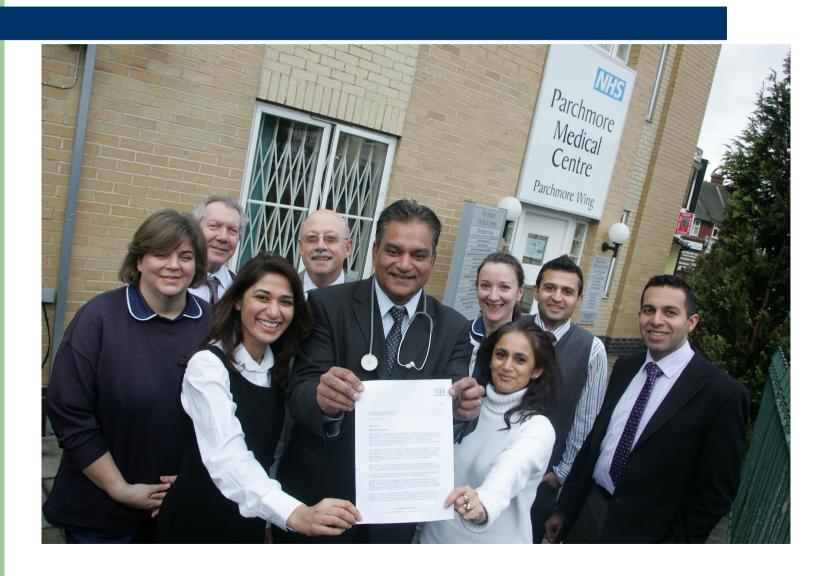


# Croydon Healthcare Consortia 1) Brigstock Medical Centre 6) Linden Lodge Medical Practice Commissioning 4 Croydon 1) Thornton Heath Health Centre 2) Morland Road 3) St. James Medical Centre 4) Eversley Medical Centre 6) North Croydon Medical Centre 7) Brigstock Family Practice \* Spring Park MP has yet to be assigned.

### Consortia development in Croydon

- GP Consortia will operate in shadow form from April 2011
- GP consortia will be statutory bodies with an accountable officer by April 2013
- Size and scale not specified
- Responsible for unregistered patients

# **Croydon Healthcare Consortium (CHC)**



### **CHC: Our Priorities**

- Long Term Conditions
   COPD
   Mental Health
   Diabetes
- Cardiology
- Urgent Care
- Paediatrics Better Pathway's
- Telemedicine
- Reablement
- •Families with challenged needs

### Consortia development in Croydon

- Over the next 18 months:
  - The PCT will continue to support the development of the local consortia
  - GP consortia will visibly become the prominent leader of commissioning for Croydon
  - Part of this will be to start developing relationships with key partners
  - Each consortium will develop a communications and engagement plan to ensure a meaningful dialogue can be established and maintained