NHS England

-Nine months on
An awful lot can happen in 9 months…
What is NHS England?
NHS 2013

- NHS Trust development authority
- Health Education England
- Local education and training boards
- Public Health England
- Local authorities
- Health and well-being boards
- Monitor
- NHS England
- Healthwatch
- Commissioning support units
- Clinical commissioning groups
- Clinical senates
- Strategic clinical networks
Put simply …NHS England is

• A single organisation with

• A single Board - supported by:
  • 1 national support centre
  • 4 regions
  • 27 area teams
We commission health care through…

- Supporting local commissioning undertaken by 211 CCGs

- and it directly commissioning (£26bn)
  - Specialist commissioning
  - Primary care (£12.6bn)
  - Armed Forces
  - Health and Justice
  - Section 7A public health
Our mission statement is

“High quality care for all, now and for future generations.”
The commissioning challenge

2015
Nicholson’s challenge

£20bn

2020

£30bn
The population in England is growing

Data source/s: ONS mid-year population estimates; NHAIS
On average, 5 in every thousand people are in a nursing home; across the country, in CCGs, this ranges from a maximum of 16.5 to minimum of 0.6 people in every 1,000.

Data source/s: NHAIS mid-year extracts
53% of people report that they have a long-standing health condition

- Across the country, in CCGs, the proportion of patients that report having a long-standing health condition ranges from 42% to 64%

Data source/s: 2012-13 GP Patient Survey Results (http://www.gp-patient.co.uk/results/)
Mortality from causes considered amenable to health care is falling, but there is wide variation across commissioners

- Nationally this metric has fallen significantly year on year
- There is variation at a local level with the map showing mortality in Northern PCT areas generally being higher than in the South
- The area around Manchester performs particularly poorly compared to the rest of the country, with the three worst performing areas being Manchester Teaching PCT (152.9), Blackpool PCT (150.7) and Blackburn and Darwen (142.3)

Data source: IC Indicator Portal, 1993 to 2010
Improving dental practice – a call to action

( Jan 14)
Key themes from engagement so far

- Capacity constraints
- Integration, particularly with community health services
- New approaches to access
- Supporting self-care
- Workforce and premises
- Finding time and space for innovation
- Key role for CCGs in developing local primary care strategy
Our message to clinical leaders
– five tips for change
• We need to invest more in people than plans
• We need to create massively distributed leadership
• Clinicians must lead through the sense of purpose and the possibility you create
• We need to invest in our first followers
• We must always talk fearlessly about values
Local Dental Networks
Serbjit Kaur
Deputy Chief Dental Officer
NHE England

LDC Officials Day
6 December 2013
NHS England Mandate

- To improve access to high quality dental services
- To Improve the outcomes for patients
- To provide seamless delivery of care across all dental specialties
- To demonstrate how dentistry is contributing to the Outcomes Framework
- Getting value for money without compromising clinical quality.
- To ensure people’s rights under the NHS Constitution are met
Case for change – the big issues

- To reduce oral health inequalities with respect to access to services and outcomes for patients
- To develop patient pathways to ensure patients can access appropriate care, dependent on need, regardless of the setting within which this care is developed
- To develop a service with a greater focus on prevention
- Treating people with respect clinically and re choices of care and charges
Securing Excellence in commissioning NHS Dental Services

• sets out NHS England’s vision for a patient-centred service that delivers best outcomes
• proposes a care pathway approach for all dental services
• Focuses on commissioning the entire dental pathway as a single, consistent, integrated model of service delivery
Local Dental Networks

‘Clinical input from a focused team of clinicians working with and alongside the area team and co-located consultants in dental public health….

to enable clinically led decisions for dentistry across commissioning and quality improvement’
Local Dental Networks

• Clear line of communication from clinicians and commissioners via the LDN to the centre to influence policy decisions at a national level to enable cohesion across the commissioning system

• Implementation of national commissioning frameworks at local level.

• Local engagement across all specialities and sectors

• Provide clinical leadership
The Contract Reform Programme

The changing demographics and improving oral health mean that we face different challenges, these require different solutions

› Oral Health has improved markedly
› Focus moving to prevention
› Pilots are testing different elements of contract reform including the preventative care pathway
› Focus is on registration, capitation and quality
› Our challenge is how do we measure quality?
Objectives

Our aim is to provide high quality, personalised care, based on:

- Shifting from an interventive to a preventive approach based on individual need and risk
- Focused on outcomes and effectiveness
- Encouraging patients to take responsibility for protecting and maintaining their own oral health
- The importance of a long term continuing care relationship between the patient and their dental team.
Role of the LPN in implementation of the new contract

- To act as clinical champions
- To help the cultural change required to deliver the pathway approach in primary care
- Support training and development of practices
- Key learning from the pilots in ensuring effective and efficient implementation
- Provide clinical advice to area teams on local issues that will impact on implementation
- Support implementation of advanced care pathways
- Support local implementation of specialist care pathways and referral management protocols
Local Professional Networks Operating Model

- **All primary care providers**
  - Influence, communications, roll out, embedding

- **Local clinicians**
  - Clinical expertise for 'task and finish' projects, quality improvement, pathway redesign, strategic development and planning

- **Core Clinical Commissioning Team**
  - Commissioning managers, clinical quality and network leaders, public health

- Relationship with the NHS CB through local teams
- Clinical engagement and leadership
- Local variation where justified by health needs
- Consistency in approach to commissioning
Dental LPN Steering Group

• Will support the development of Local Dental Networks and sharing best practice
• Support the development and implementation of national strategy and policy
• Work with stakeholders on the development and delivery of national priorities
• Work with stakeholders to achieve the transformation of services to deliver the key objectives of SEICD
Dental LPN Steering Group

• Draft TOR agreed by National Dental Commissioning Group
• Nominations for membership have been received
• The first meeting is taking place in later this month
• Will play a key role as a conduit between the NDCG and Local Dental Networks
• Information needs to flow in both directions to achieve the aspirations of SEICD
Dental LPN Steering Group membership

- Deputy Chief Dental Officer (chair)
- Assistant Head of Primary Care Commissioning (deputy chair)
- Representation from LPN Chairs at regional level
- Representation from Area team at regional level
- Representation from Public Health England at regional level
- Representation from Health Education England
Clinical engagement

- Multi-professional involvement in the design and commissioning of services is a key element of the Health and Social Care Act 2012
- Clinicians engaging with commissioners for the benefit of the patient
- LDN are central to delivering SEICD and the NHS England mandate
- Clinicians engaging with the local stakeholders to improve quality and outcomes:

<table>
<thead>
<tr>
<th>Patients</th>
<th>Local authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and well being boards</td>
<td>Local Dental Committees</td>
</tr>
<tr>
<td>CCG</td>
<td>Social care</td>
</tr>
<tr>
<td>Other clinical networks (including pharmacy and eye care LPNs)</td>
<td></td>
</tr>
</tbody>
</table>