

Committee: Health & Wellbeing Board

Date: 30 September 2014

Wards:

Subject: Merton CCG Commissioning Intentions

Lead officer: **Adam Doyle, Director of Commissioning and Planning**

Contact officer: **Adam Doyle, Director of Commissioning and Planning**

Recommendations:

- A. The Health and Wellbeing Board is asked to note the Merton Clinical Commissioning Group (CCG) Commissioning Intentions
-

1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

This is the second set of commissioning intentions Merton Clinical Commissioning Group has developed. These commissioning intentions continue to build on the two year operating plan we developed for 2014/16 and form part of our 5 Year Strategic Plan which is being developed with other commissioners including local Clinical Commissioning Group's, NHS England and the local authority. For 2015/16 we have overarching commissioning intentions across all SWL CCGs and this helps us to start to shape the future direction of our 5 year plan. In addition to the collective SWL commissioning intentions issued in this document, each CCG will issue independent intentions that reflect local initiatives that complement the collective commissioning intentions.

2 DETAILS

Last year, Merton CCG worked through the commissioning cycle with our patient's clinicians and members, to identify the emerging priorities for 2014/16, based on the Joint Strategic Needs Assessment and other intelligence and we are continuing with the identified priorities as follows:

- Older and Vulnerable Adults
- Mental Health
- Children and Maternity Services
- Keeping Healthy and Well
- Early Detection and Management
- Urgent Care

Our commissioning intentions describe the high level the priorities and actions we will deliver during 2015/2016 and outlines the platform for delivery of continuous commissioning improvement in subsequent years. This is an iterative document subject to active review as national and local policy emerges and areas of delegated accountability are assigned. We look forward to working with our population and colleagues across the health and social care economy to continue to deliver high quality care. We have developed a Plan on a Page for Merton CCG that can be used in to ensure key stakeholders are aware of our plans.

3 ALTERNATIVE OPTIONS

4 CONSULTATION UNDERTAKEN OR PROPOSED

Summary of channels used:

GP members; promotion to CCG members, Patient Participation Groups

Face to face meetings; linking into existing engagement activities, events and regular meetings

Social media; promotion via Merton CCG's twitter account

5 TIMETABLE

N/A

6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

N/A

7 LEGAL AND STATUTORY IMPLICATIONS

8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION 8.1IMPLICATIONS

N/A

9 CRIME AND DISORDER IMPLICATIONS

None for the purposes of this report.

10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

None for the purposes of this report

11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

None for the purposes of this report

12 BACKGROUND PAPERS

None for the purposes of this report.