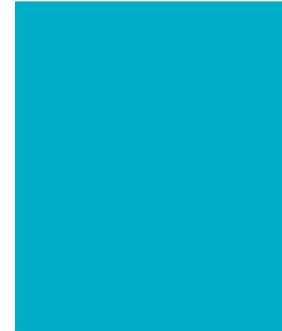


NHS Commissioning Board: Local area teams



Staff briefing pack
20 June 2012



Background

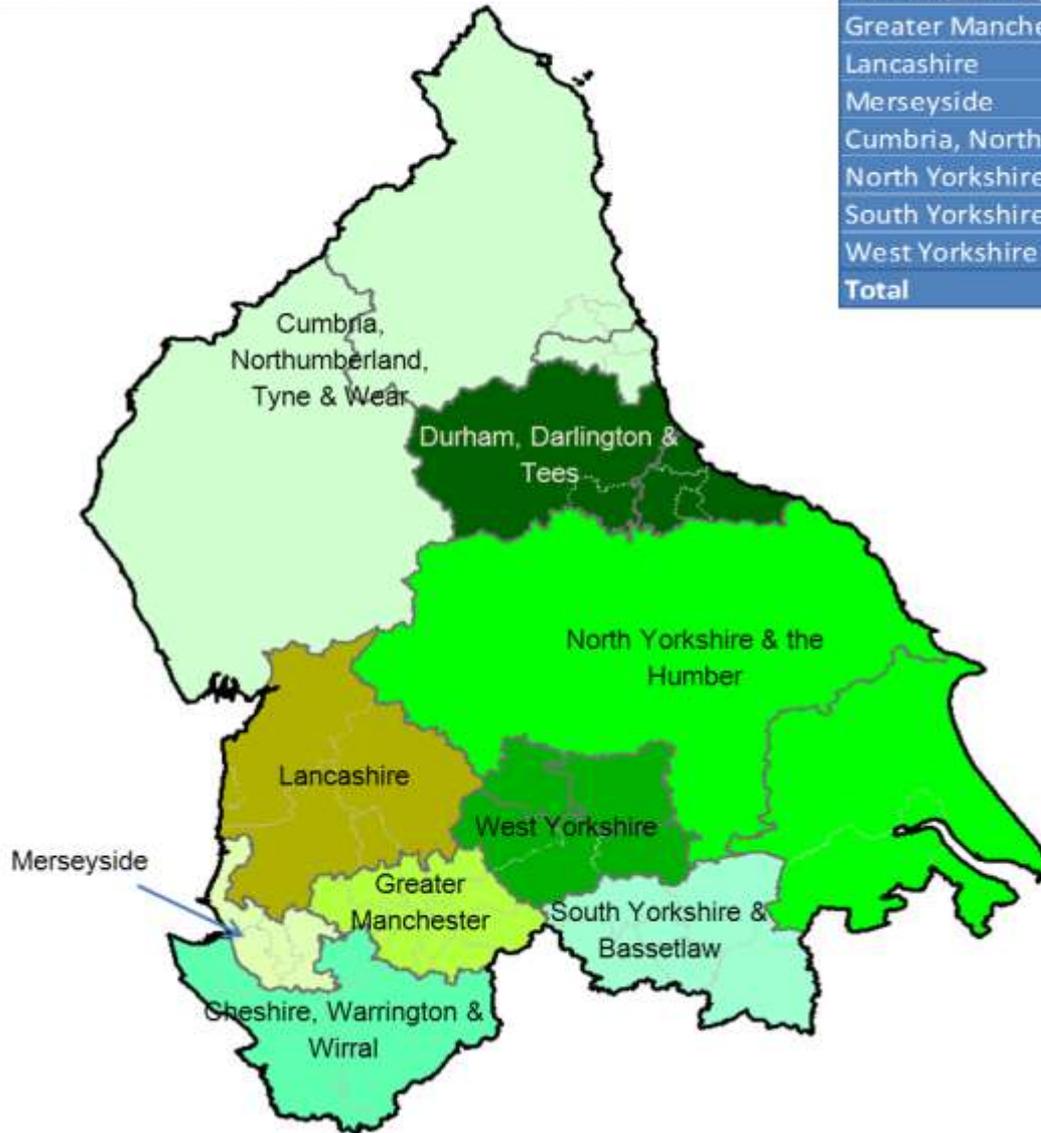
- Regional directors have been working with PCT and SHA clusters, emerging CCG leaders and local government partners to co-design optimal geographies of local area teams within each region.
- The work considered a range of factors including
 - direct commissioning responsibilities;
 - the number and nature of local relationships which will need to be maintained;
 - the boundaries of clinical commissioning groups (CCGs);
 - the interface with local government; and
 - the relationship of local area teams to the pattern of other local footprints such as clinical networks and senates and Local Resilience Forums / Local Health Resilience Partnerships.



Outcome

- There will be 27 local area teams, with local staff of the operations directorate working from a number of office bases across their geographical area.
 - North of England: 9 local area teams
 - London: 3 local area teams
 - Midlands and East: 8 local area teams
 - South of England: 7 local area teams
- The naming convention has been revised from ‘sectors’ to ‘regions’ and from ‘local offices’ to ‘local area teams’ to recognise the multitude of office bases for local staff.
- The conclusions take account of related local geographies, service patterns and relationships to achieve a sustainable solution that will establish the definitive local presence of the NHS CB.

North of England



North of England	Popn (1,000s)	CCGs	HWBs
Cheshire, Warrington and Wirral	1195	6	4
Durham, Darlington and Tees	1167	5	6
Greater Manchester	2636	12	10
Lancashire	1424	8	3
Merseyside	1170	6	5
Cumbria, Northumberland, Tyne and Wear	1910	8	7
North Yorkshire and Humber	1690	8	6
South Yorkshire and Bassetlaw	1427	5	4
West Yorkshire	2235	10	5
Total	14853	68	50

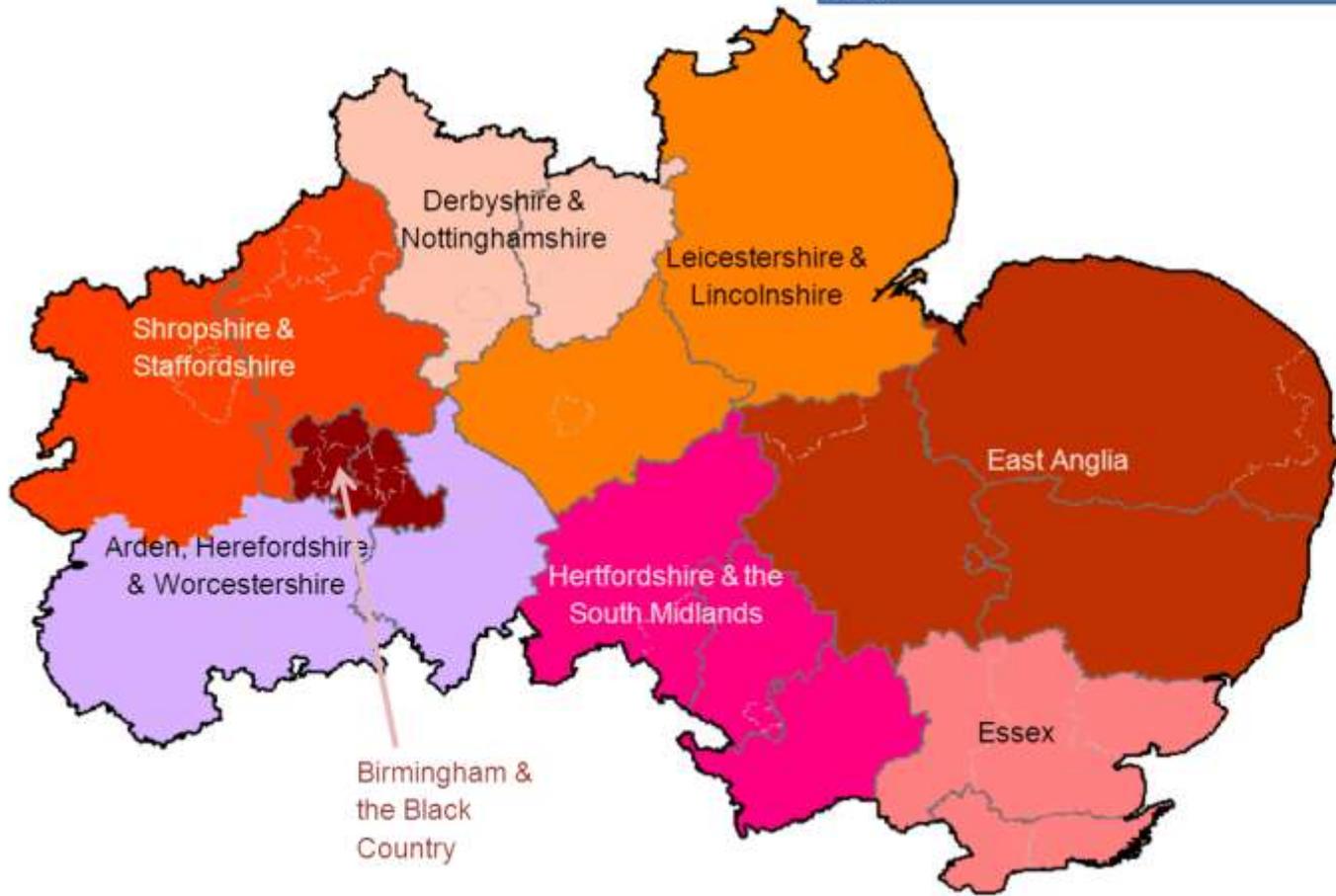
London

London	Popn (1,000s)	CCGs	HWBs
North East London	2897	12	13
North West London	1890	8	8
South London	2971	12	12
Total	7758	32	33



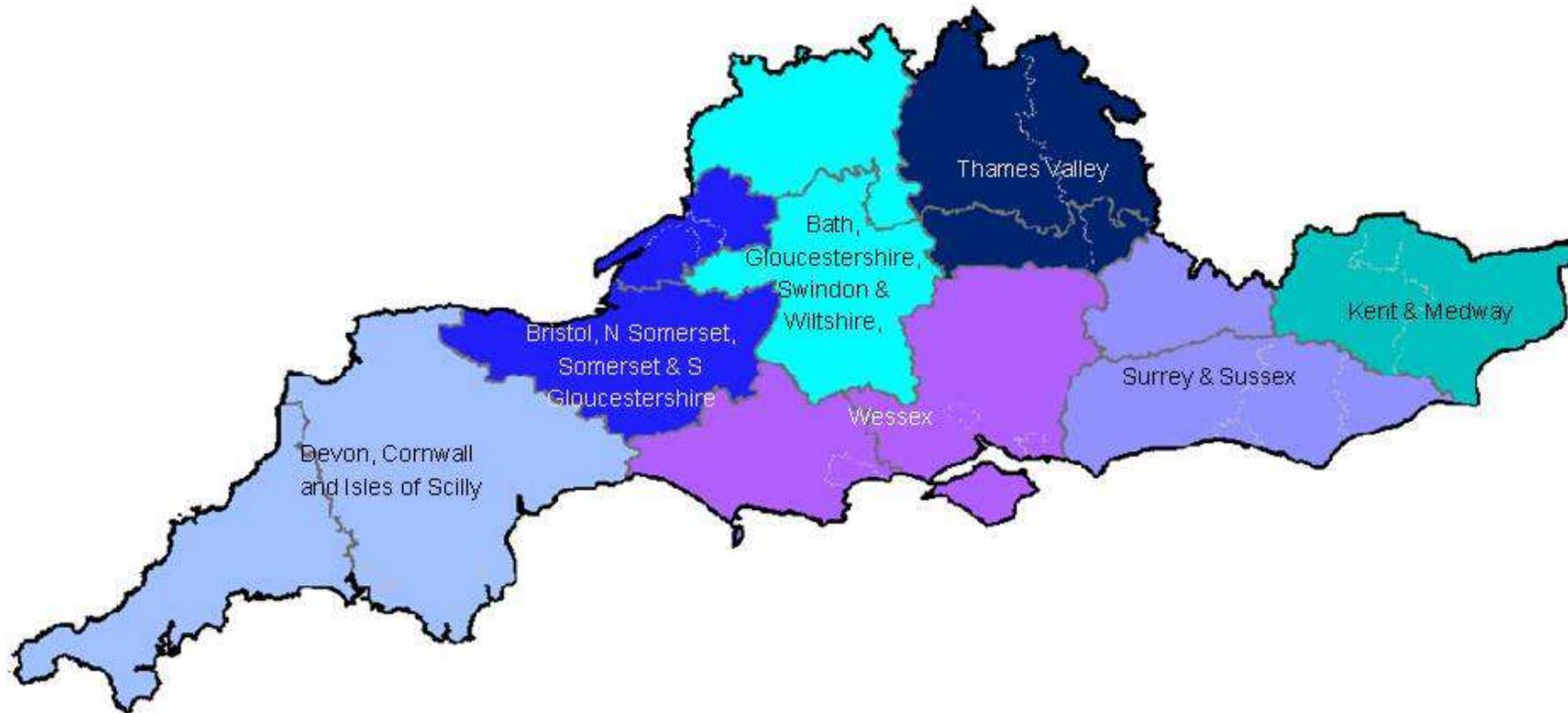
Midlands and East of England

Midlands and East of England	Popn (1,000s)	CCGs	HWBs
Arden, Herefordshire and Worcestershire	1575	7	4
Birmingham and the Black Country	2350	8	6
Derbyshire and Nottinghamshire	1933	10	4
East Anglia	2294	8	4
Essex	1699	7	3
Hertfordshire and the South Midlands	2628	7	6
Leicestershire and Lincolnshire	1674	7	4
Shropshire and Staffordshire	1496	8	4
Total	15649	62	35

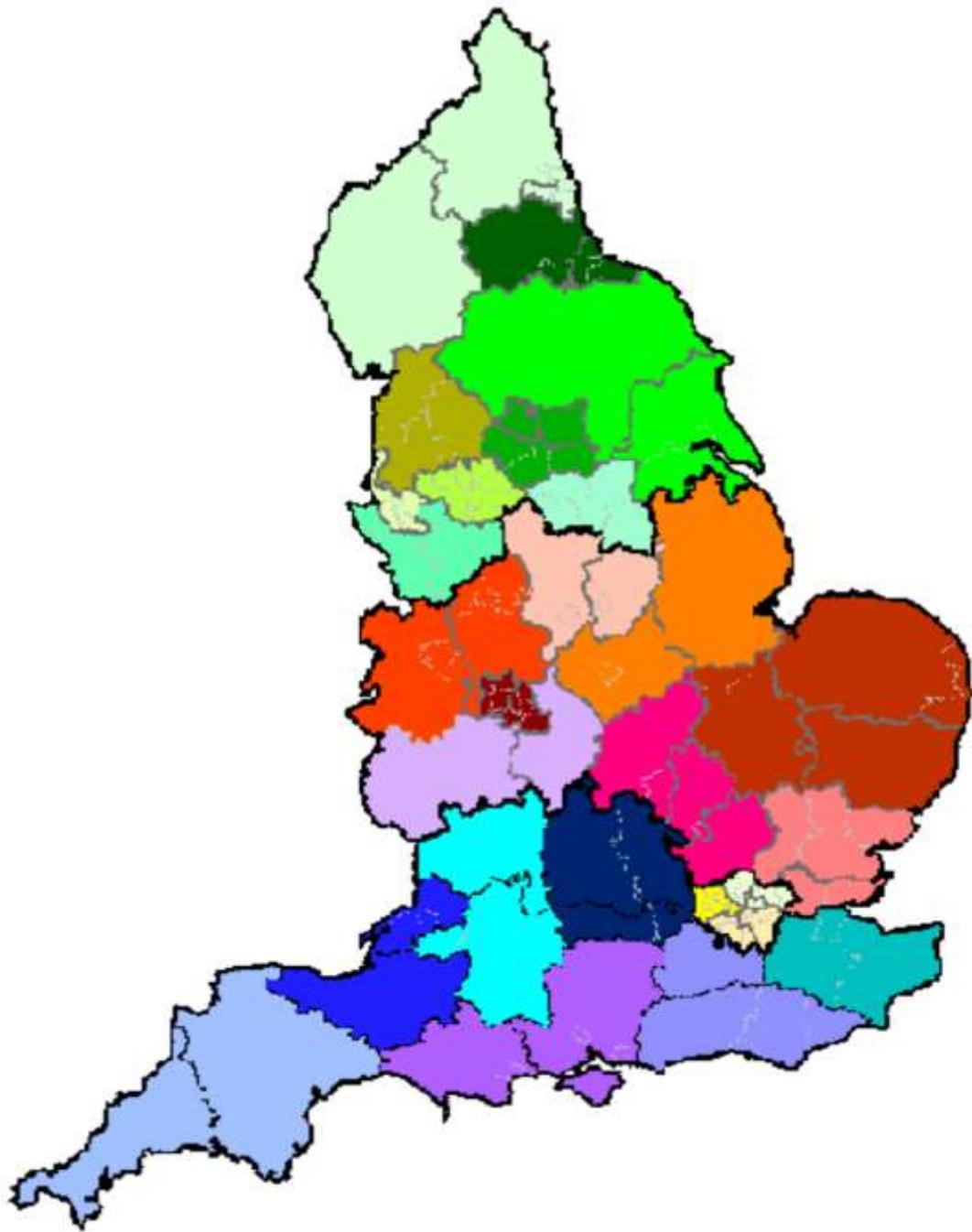


South of England

South of England	Popn (1,000s)	CCGs	HWBs
Bath, Gloucestershire, Swindon and Wiltshire	1411	4	4
Bristol, N Somerset, Somerset and S Gloucestershire	1413	4	4
Devon, Cornwall and Isles of Scilly	1652	3	5
Kent and Medway	1662	8	2
Surrey and Sussex	2640	12	4
Thames Valley	1985	10	8
Wessex	2550	9	7
Total	13313	50	34



England



Local Area Teams

Population, number of CCGs and number of Health and Wellbeing Boards

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Durham, Darlington and Tees	1167	5	6
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Thames Valley	1985	10	8
Wessex	2550	9	7
Total	13313	50	34

Total	51573	212	152
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Local Area Teams

Current PCT cluster to Local Area Team mapping

Region	Local Area Team	Current PCT Cluster
NORTH		
	Cheshire, Warrington and Wirral	Cheshire, Warrington and Wirral
	Cumbria, Northumberland, Tyne and Wear	Cumbria North of Tyne South of Tyne and Wear
	Durham, Darlington and Tees	County Durham and Darlington Tees
	Greater Manchester	Greater Manchester
	Lancashire	Pan Lancashire
	Merseyside	Merseyside
	North Yorkshire and the Humber	Humber North Yorkshire & York
	South Yorkshire and Bassetlaw	South Yorkshire and Bassetlaw
	West Yorkshire	Airedale, Bradford and Leeds Calderdale, Kirklees & Wakefield

MIDLANDS AND EAST		
	Arden, Herefordshire and Worcestershire	Arden West Mercia
	Birmingham and the Black Country	Birmingham Black Country
	Derbyshire and Nottinghamshire	Derbyshire Nottinghamshire
	East Anglia	Cambridgeshire and Peterborough Norfolk, Great Yarmouth and Waveney Suffolk
	Essex	North East Essex South Essex
	Hertfordshire and the South Midlands	Bedfordshire and Luton Hertfordshire Northamptonshire and Milton Keynes
	Leicestershire and Lincolnshire	Leicestershire Lincolnshire
	Shropshire and Staffordshire	Shropshire Staffordshire West Mercia

Local Area Teams

Current PCT cluster to Local Area Team mapping

Region	Local Area Team	Current PCT Cluster
LONDON		
	North East London	Inner North East London North Central London Outer North East London
	North West London	North West London
	South London	South East London South West London
SOUTH		
	Bath, Gloucestershire, Swindon and Wiltshire	Bath, North East Somerset and Wiltshire Gloucestershire and Swindon
	Bristol, North Somerset, Somerset and South Gloucestershire	Bristol, North Somerset and South Gloucestershire Somerset
	Devon, Cornwall and Isles of Scilly	Cornwall and Isles of Scilly Devon and Torbay
	Kent & Medway	Kent & Medway
	Surrey and Sussex	Surrey Sussex
	Thames Valley	Berkshire Oxfordshire and Buckinghamshire
	Wessex	Bournemouth, Poole and Dorset Southampton, Hampshire, Isle of Wight and Portsmouth

Functions

- All LATs will have the same core functions around:
 - CCG development and assurance
 - emergency planning, resilience and response
 - quality and safety
 - partnerships
 - configuration
 - system oversight



Functions

- There will be variations around the scope of direct commissioning responsibilities:
 - all local area teams taking on direct commissioning responsibilities for GP services, dental services, pharmacy and certain aspects of optical services;
 - 10 local area teams leading on specialised commissioning across England;
 - smaller number of local areas teams carrying out the direct commissioning of other services such as military and prison health;
 - the model for the commissioning of NHS public health services and interventions still to be finalised.

London region

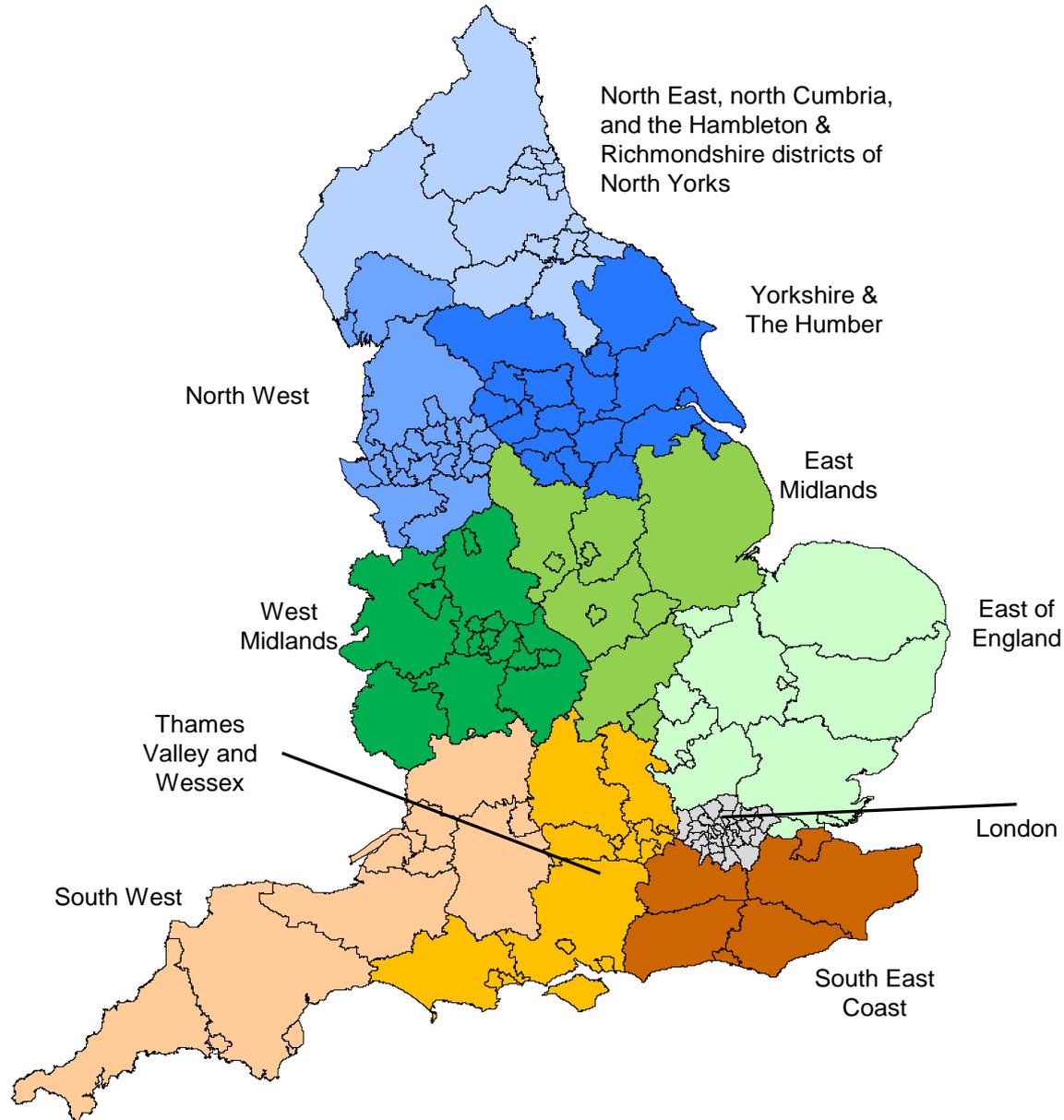
- In London there will be a more integrated structure with three area teams working as an essential part of the overall pan-London arrangements for direct commissioning and functions supporting the delivery of service innovation.
- These arrangements reflect both the distinct nature of the London Region and the need to ensure effective working with partners at both a Borough and London-wide level.

Specialised commissioning

10 of the local area teams will be responsible for specialised commissioning hubs:

- Cumbria, Northumberland, Tyne and Wear
- South Yorkshire and Bassetlaw
- Cheshire, Warrington and Wirral
- East Anglia
- Leicestershire and Lincolnshire
- Birmingham and the Black Country
- Bristol, North Somerset, Somerset and South Gloucestershire
- Wessex
- Surrey and Sussex
- London

Specialised commissioning hubs



Next steps

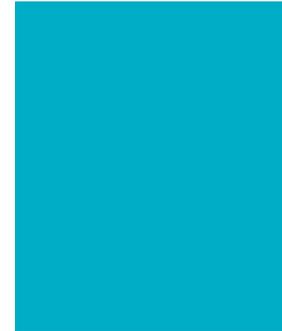
- **June – July 2012:** the next steps will be to recruit to the very senior manager (VSM) posts in the Directorate, including:
 - two director level posts in central roles
 - local area team directors; and
 - direct reports to the regional directors
- **July – December 2012:** recruitment to direct reports to the local area team directors and all Agenda for Change posts as part of a rolling programme. This is likely to start with AfC band 8-9 posts.



Next steps

- We are working across the system, moving as quickly as we can at the same time as aiming to align the recruitment and transfer of staff at similar grades and levels.
- By working in a coordinated way we aim to maximise opportunities for staff and minimise uncertainty and disruption in the current system.

NHS Commissioning Board: Clinical senates



Staff briefing pack
20 June 2012



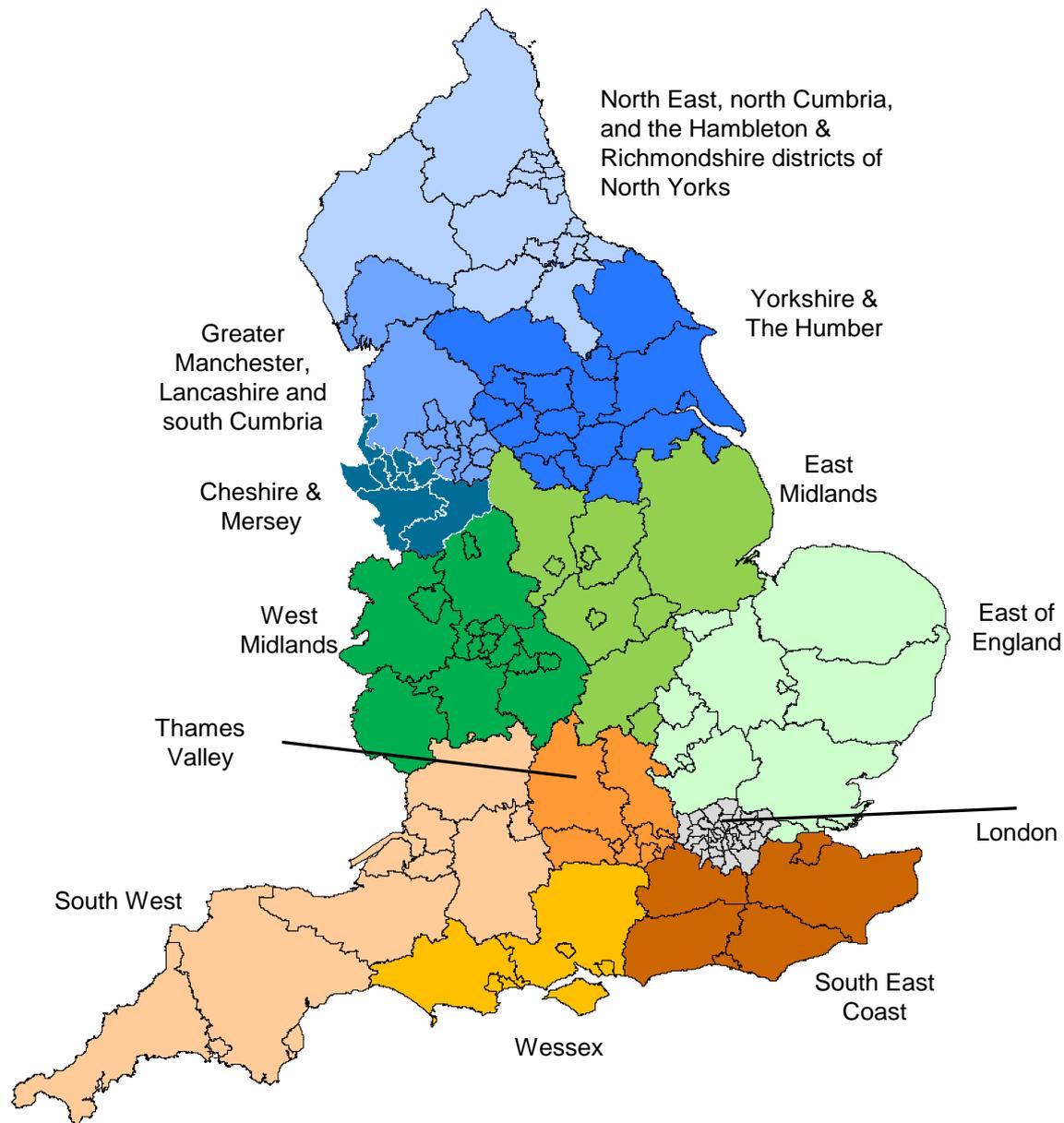
Background

- Clinical senates will help Clinical Commissioning Groups (CCGs), Health and Wellbeing Boards (HWBs) and the NHS CB to make the best decisions about healthcare for the populations they represent by providing advice and leadership at a strategic level.
- Dr Kathy Mclean has been working with SHA Cluster Medical and Nursing Directors, clinical leaders locally and the NHS CB's Regional Directors to determine the most appropriate number and coverage of clinical senates. As a result of this work it has now been confirmed that there will be a total of 12 senates.

Establishing Clinical Senates

- The detail of who will be part of clinical senates, and the roles they may have will be shared for discussion over the next few weeks.
- They will be made up of a range of clinicians and professionals from health, including public health and social care alongside patients, public and others, as appropriate.
- The NHS Commissioning Board is working with clinicians and stakeholders on the exact makeup of clinical senates, and there will be opportunities for engagement and co-production within this work.
- Further details will be circulated in the coming weeks
- Details will also be shared shortly on the future arrangements for clinical networks

Clinical senates map



Geographical Alignment

- A key principle of the design work for both LATs and clinical senates has been that there should be alignment of boundaries between structures wherever relationships are important.
- The 27 local area teams have boundaries largely aligned within those of the clinical senates. There are only three areas where the senate boundaries cut across those of the local area teams. This has been necessary to ensure that the senate boundaries recognise the pattern of patient flows, particularly with tertiary centres.
- Similarly, close alignment has been sought between the NHS CB's specialised commissioning arrangements and the clinical senates. As a result, the boundaries of the 10 specialised commissioning hubs will be aligned entirely with the 12 senates.