

Transforming Primary Care

Co-commissioning - a new local way for designing and providing Primary Care Services

What will it mean for me and my family?



What is changing?

- Every GP practice offers a range of different health services – these could include asthma care, contraceptive planning and advice, minor surgery such as mole removal and management of long term conditions such as diabetes.
- At the moment a central organisation called NHS England (NHSE) plans and develops the Primary Care services that GP practices provide. Local Clinical Commissioning Groups (CCGs) currently commission Acute Hospital services and Mental Health services for their local population.
- From April 2015 this is going to change. In addition to the services they currently commission, CCGs will begin to work together as a larger group to plan and develop their local primary care health services - NHSE will still have some involvement.
- This is because the NHS wants local clinicians and local communities to have more influence over how primary care services are developed.
- This is part of the NHS' vision to improve the quality of services for patients, provide greater value for money and address any local health inequalities (such as mortality rates) and will result in a more responsive health service for the people of South West London.
- CCGs and NHSE working together in this way to plan and deliver primary care services is called 'co-commissioning'. It is one of a series of changes set out in the [NHS Five Year Forward View](#) to transform the way primary and community care services are provided for local people.

Co-commissioning - what is happening in South West London?

- The six CCGs in South West London (Croydon, Kingston, Merton, Richmond, Sutton and Wandsworth) have decided that they would like to plan (commission) Primary Care services across South west London, together.
- To do this, they will set up a Joint Committee which will have representatives from each of the CCGs in South West London and NHS England who will make decisions about primary care functions together.
- We will work closely with our Local Authority Health and Wellbeing Boards and local Healthwatch organisations to gain clarity around their involvement in the joint committee.
- More detailed work is taking place between now and through to the end of March 2015 with CCGs, NHS England (London) and Local Authority colleagues to establish how this will work in practice.
- The new arrangements formally 'go live' from 1st April 2015

What does this really mean for patients and the public?

- These changes are about giving local communities and patients more say in the care they receive and doctors and nurses more freedom to shape services to meet people's needs, to improve the quality of the support, care and treatment we all receive.
- Patients will still contact their local GP practice when they are unwell and will continue to receive healthcare free at the point of need just as before.
- Alongside this, Primary Care is undergoing a programme of transformation (Transforming Primary Care) over the next five years which is set to improve the experience for patients, such as access to GPs etc. This change to co-commissioning will support this process of transformation.

What does this really mean for patients and the public?

What will change

Your GP practice will be able to have greater input into the design and delivery of local services – through its local CCG.

Local services will be locally tailored to meet local needs as the CCGs will have voting rights when making decisions in the Joint Committee.

Patients will be able to input into decisions undertaken by the Joint Committee on primary care services through the lay (public) members of your CCG Board and your local area Healthwatch representatives, both of whom will have a seat at the Joint Committee.

This is part of a package to improve primary care including improving access to general practice services – the responsiveness of the health service in your area should improve as a result. For example, we know that the provision of extended hours in GP practices is variable. This is something we will be able to work together to address in the future new way of working. e.g. patients being able to access a GP, 12 hours a day, 7 days a week.

Your CCG will be able to play a more active part in monitoring the service provided to you by your GP practice and resolving any issues.

CCGs will also be able to input into decisions about new GP practices in an area

What does this really mean for patients and the public?

What won't change

Patients will still be able to access their GP practice and its services as they do now – e.g. being seen when they have a medical problem or being prescribed medication if needed

With the involvement of local populations and patient groups, your CCG will still have a statutory duty to make decisions based on what is best for local needs

What are the benefits for patients?

There are a number of benefits and these include:

- ✓ An opportunity to have a greater influence on the delivery of local health services as CCGs will take a more active role in commissioning primary care. This will mean local services that are better suited to address local needs and priorities.
- ✓ Working towards common goals across south west London can enable the delivery of high quality services for more patients as together we can work in a more efficient, streamlined way and have more negotiating power to influence organisations which provide care such as local hospitals to support the delivery of more services out of hospital.
- ✓ A better patient experience through more joined up services e.g. if we want to have better access to care over the weekend or out of hours, or make online booking of appointments available, this can be enabled as a result of GPs working closely together across south west London. The more GPs working together to address this issue, the greater the likelihood that we will be able to make it a reality.