

## Changes to NHS reform

The changes which the Government intends to make to its health and social care bill have been widely publicised in the press following the publication of the NHS Future Forum's recommendations, at the end of the listening exercise.

The key changes include

- The Secretary of State for Health's duty, since 1948, to promote a comprehensive health service will remain.
- GP consortia will be called 'clinical commissioning groups'. They will have governing bodies with at least one nurse and one specialist doctor.
- Commissioners will be supported by clinical networks advising on single areas of care, such as cancer, and new 'clinical senates' in each area of the country that will provide multi-professional advice on local commissioning plans. Both will be hosted within the NHS Commissioning Board.
- The governing bodies of clinical commissioning groups will have lay members and will meet in public.
- Foundation trusts will have public board meetings.
- Health and wellbeing boards will have a stronger role in local councils, with the right to refer back local commissioning plans that are not in line with the health and wellbeing strategy.
- There will be clearer duties across the system to involve the public, patients and carers.
- Monitor's core duty will be to protect and promote the interests of patients – not to promote competition as if it were an end in itself.
- There will be new safeguards against price competition, cherry-picking and privatisation.
- There will be stronger duties on commissioners to promote (and Monitor to support) care that is integrated around the needs of users – for example, by extending personal health budgets and joint health and social care budgets, in light of the current pilots.
- The NHS Commissioning Board will promote innovative ways to integrate care for patients.
- Commissioning groups will all be established by April 2013. But where a group is not yet ready, the NHS Commissioning Board will commission on their behalf.
- Monitor will continue to have transitional powers over all foundation trusts until 2016 to maintain high standards of governance during the transition.
- There will be a managed transition process on education and training, to avoid instability – more details will be announced in the autumn.

The NHS Future Forum's recommendations were published on 13 June:

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_127443](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_127443)

The Government's response to those recommendations is available via:

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_127444](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_127444)

The SHA will be following up these issues with the Department of Health and will work to provide further clarification and guidance on the timetable for these changes for colleagues within Yorkshire and the Humber.

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## Handling Pandemic Flu in a reformed health system.

The Department of Health has produced a draft strategy on UK preparedness for an influenza pandemic. This is currently out for consultation and has been raising questions about how an effective flu response will work in the reformed NHS. Local directors of public health in Yorkshire and the Humber region have discussed the implications and will be making a response.

Local organisations can read the proposed strategy and make comments up until 17<sup>th</sup> June.

The web address is: [http://www.dh.gov.uk/en/PublicHealth/Immunisation/Keyvaccineinformation/DH\\_104070](http://www.dh.gov.uk/en/PublicHealth/Immunisation/Keyvaccineinformation/DH_104070)

## Supporting local public health teams through transition

Yorkshire and the Humber have for the past couple of years supported leadership development for directors of public health and their teams. This most recently has resulted in the "Liberating Public Health Development Programme". The key components are personal leadership, system leadership and facilitating/enabling the public health workforce to enable them to exercise their public health functions on a personal, team, organisational and regional level. This adaptive leadership is a core thread throughout the programme.

A core theme is future proofing public health wherever it may be in the new system.

Further information can be obtained from Karen Payne at the SHA via [karen.payne@yorksandhumber.nhs.uk](mailto:karen.payne@yorksandhumber.nhs.uk)

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## Confirm and Build event

A successful workshop was held on 14 June in York that brought together colleagues from commissioning consortia, PCT Clusters, local authorities, NHS provider organisations, the voluntary sector and patient and carers' representatives to work with Department of Health (DH) policy colleagues. The aim of this piece of work is to look at next steps in areas such as the development of consortia, commissioning support, health and wellbeing boards and the NHS Commissioning Board.

This was the first of a series of three sub-national workshops at the end of which the DH will be using the results and feeding back to SHA Directors of Commissioning. Further information can be made available once the report after the third workshop has been produced.

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## Diabetes Event Reminder: Clinical & Commissioning Engagement Event

Thursday 23 June, 10.00pm to 4.00 pm, Holiday Inn, Garforth, Leeds.

This **free** event, hosted by NHS Yorkshire and the Humber and Diabetes UK is aimed at commissioners, GPs and diabetes service providers. To register, please contact Kate Mackay on 0191 2580412/ [kate@mumac.co.uk](mailto:kate@mumac.co.uk)

Further details can be found at: [www.yorksandhumber.nhs.uk/document.php?o=7078](http://www.yorksandhumber.nhs.uk/document.php?o=7078)

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## Aspirant Foundation Trusts & Social Enterprises

The timeline for Hull and East Yorkshire Hospitals Trust to achieve foundation trust status has been extended to a submission to the Department of Health in January 2012. Yorkshire Ambulance Services will submit their timeline in June 2012, with Bradford District Care Trust and Leeds Community Healthcare submitting in July 2012; there is further dialogue continuing with other remaining trusts. All trusts are working closely with NHS Yorkshire & the Humber and are making positive progress towards their various submission dates.

City Healthcare Partnership the social enterprise established in Hull to provide their community services celebrates its 1<sup>st</sup> birthday this month. It has been a hugely successful first year for them and we congratulate them on being our flagship social enterprise. They are certainly in demand from other parts of the country in terms of sharing their learning and how they achieved social enterprise status. Their birthday celebrations are especially pertinent as we have a further three social enterprises coming into being in NHS Yorkshire and the Humber in July.