



South East London
Clinical Commissioning Group

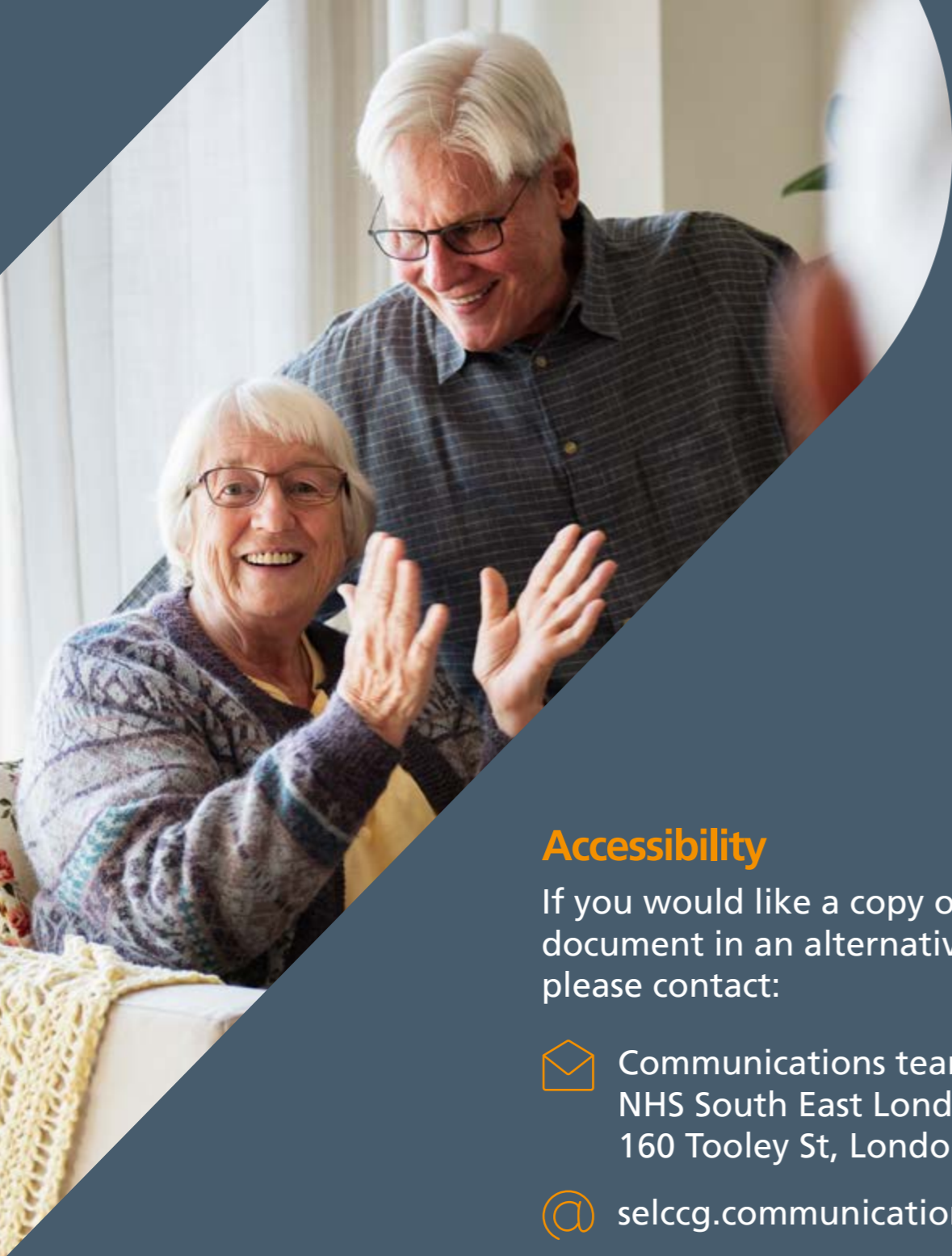


NHS South East London
Clinical Commissioning Group

An introduction

April 2020





Accessibility

If you would like a copy of this document in an alternative format please contact:

✉ Communications team
NHS South East London CCG
160 Tooley St, London, SE1 2QH

@ selccg.communications@nhs.net

What we do

Plan

the delivery of care to ensure it is available at the right time, in the right place and organised at the scale needed to meet the needs of people in south east London.

Bring together

health and social care to plan services that meet the needs of local people and improve the health and wellbeing of the wider population.

Collaborate

with health and care services to work as one system across south east London and in each of its boroughs to take collective responsibility for proactive, effective and affordable services which improve health and patient outcomes.



We will keep local people at the heart of our decision-making

Welcome to NHS South East London Clinical Commissioning Group

NHS South East London Clinical Commissioning Group (CCG) was established on 1 April 2020 and works across the London Boroughs of Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark. Our aim is to work with our partners to improve care and health outcomes for local people.

CCGs are local, clinically led, statutory NHS bodies. They are membership organisations, whose members, in the case of the South East London CCG, are all the GP practices that serve the six boroughs. We are led by a governing body made up of local GPs drawn from across our boroughs, other clinicians, executives and lay members.

Responsible for planning and paying for most health care services local people use, CCGs ensure that residents can access the best possible care from the services commissioned on their behalf. This involves assessing local needs and prioritising the use of funding with our partners, including local authorities, hospitals, community and primary care services. This is an ongoing process and CCGs are expected to monitor the care provided, as well as respond and adapt to changing local circumstances. In doing so, CCGs are responsible for commissioning to improve the health of their entire population.

The greatest priority of NHS South East London CCG is to ensure that the 1.9 million local people experience the highest possible standard of care within the resources made available to us. In 2020/21 our budget will be just over £3 billion. Increasingly we are focused on supporting our population to stay well and we are working with our partners to do this through the commitments set out in the NHS Long Term Plan. We know that, for most people, it is the care and support they receive in their local community that makes the most difference. We are committed to being deeply connected with our populations and partners in each borough and to working across south east London when that makes sense.

In south east London, we have a long history of working together. Our partnership working with local authorities and providers of health services is delivered through the Our Healthier South East London strategic partnership, which is known as an integrated care system (ICS). This collaborative approach resulted in us becoming the first ICS

in London. The strong relationships between our predecessor borough CCGs, local authorities and other partners has been critical to improving care and services. These partnerships, which are key to the ICS, will continue and are known as local care partnerships. Our new CCG has been designed to align with these partnerships.

Underpinning everything we do is the involvement of our diverse communities. We will build on the well-established engagement approaches in each borough to further strengthen the involvement of local people at neighbourhood and borough levels, supporting this with CCG-wide initiatives where this is the right thing to do.

We will keep local people at the heart of our decision-making and look forward to working together with all our partners to improve the health and wellbeing of south east London people.



Dr Jonty Heaversedge
Clinical Chair

A membership organisation with a governing body











The member GP practices across south east London have agreed a constitution for NHS South East London CCG and to operate as a Council of Members. They have established and mandated the CCG's governing body – our multi-disciplinary leadership team. Their combined experience ensures that clinical expertise is at the heart of what we do. Importantly, there is equal representation from each of the CCG's six boroughs.

The governing body GP members have individual clinical leadership responsibilities. They also support their local borough-based boards, which increasingly will work across health and social care.

Each of these boards has a borough-based (place-based) director who is a voting member of the governing body. These individuals work closely with their respective local authority colleagues, and in some cases are joint appointments.

The governing body has representation from Healthwatch, the Local Medical Committee (LMC) and public health. Importantly, our CCG executive directors will attend and support the governing body meetings.

To see meeting details, papers and minutes go to selondonccg.nhs.uk

| | | | | |
|--|--|---|--|---|
|  Dr Jonty Heaversedge Clinical chair |  Andrew Bland Accountable officer |  Usman Niazi Chief financial officer |  Dr Siddarth Deshmukh GP clinical lead Bexley |  Dr Clive Anggiansah GP clinical lead Bexley |
|  Dr Andrew Parson GP clinical lead Bromley |  Dr Ruchira Paranjape GP clinical lead Bromley |  Dr Krishna Subbarayan GP clinical lead Greenwich |  Dr Sabah Salman GP clinical lead Greenwich |  Dr Adrian McLachlan GP clinical lead Lambeth |

| | | | | |
|--|---|---|--|--|
|  Dr Di Aitken GP clinical lead Lambeth |  Dr Faruk Majid GP clinical lead Lewisham |  Dr Jacky McLeod GP clinical lead Lewisham |  Dr Nancy Kuchemann GP clinical lead Southwark |  Dr Robert Davidson GP clinical lead Southwark |
|  Professor Simon Mackenzie Secondary care doctor |  Mary Currie Registered nurse |  Shelagh Kirkland Deputy chair Lay member governance and audit |  Joy Ellery Lay member patient and public involvement |  Peter Ramrayka Lay member primary care |
|  Stuart Rowbotham Place-based director Bexley* Director adult social care and health, Bexley |  Dr Angela Bhan Place-based director Bromley |  Neil Kennett-Brown Place-based director Greenwich |  Andrew Eyres Place-based director Lambeth Strategic director integrated health and care, Lambeth | |
|  Martin Wilkinson Place-based Director Lewisham Director of integrated care and commissioning, Lewisham |  Sam Hepplewhite Place-based director Southwark | | | |

*From 1 July 2020



Governance and transparency

The CCG's governing body will meet formally six times a year in public in different boroughs. Local people across south east London are welcome to attend any of the meetings in public. Borough-based boards will also hold meetings in public locally with at least the same frequency, which residents are welcome to attend.

In this way, patients and the wider public will have visibility of the CCG's work, with time at each of its meetings in public for people to ask questions.

Whilst the governing body's membership gives it strong clinical leadership, this must go beyond participation in the statutory governance functions of a CCG. Learning from successful health systems around the world confirms the importance of health and care professionals providing leadership at every level of an organisation like a CCG, especially around improving care quality, implementing change

and evaluating its impact in terms of improving outcomes for people and reducing health inequalities.

We are pleased that other partners such as the Local Medical Committee and directors of public health will be part of the governing body and borough-based boards where they will be joined by several other local authority colleagues. Importantly, our six borough Healthwatch organisations have made arrangements to be represented at the governing body, and borough Healthwatch representatives will have a place at their respective borough-based boards.

Through borough-based teams the CCG will participate in each borough's partnership fora, health and wellbeing boards and scrutiny committees. Not only will these key local relationships be retained, they form a vital part of the work undertaken in our boroughs.

How we will work to improve health and wellbeing

The CCG's main purpose is to improve the health and wellbeing of south east London people. We will do this by:

- Ensuring that the services we commission for local people are high quality, safe and accessible.
- Working with our partners across health and social care, including those in the voluntary and independent sectors, to plan and improve services.
- Ensuring there are effective relationships with organisations that deliver care, so it is joined up in ways that are in the best interests of those using these services.
- Making sure that the money we receive from the Government is used to provide the right services, to the right people and at the right time.

As our population continues to grow and age, we will see an increase in demand for health and social care services, as more people live for longer with pre-existing and often long-term conditions.

Today, there is unacceptable variation in the care people experience across our six boroughs in terms of its quality, ease of access and the outcomes experienced. We will take a concerted and targeted approach to improve how care is delivered, tackling variations in quality and

outcomes to reduce current inequalities. We will do this by making our services more joined up and easier to use, which in turn will make them more cost-effective to run.

We will continue to support work underway within south east London to improve the care and services people use in the community or when they need urgent medical help, sometimes in an emergency. We want to ensure that people who have health conditions such as cancer, cardiovascular disease, respiratory illnesses and diabetes experience better services and outcomes.

At the same time, we want to see improvements in the quality and consistency of our maternity services, and the care provided for people of all ages with a mental health condition and/or learning disability and autism.



Our commitment to equalities and diversity

We are committed to promoting equality and diversity for the people of south east London. As part of that commitment, we are making equality and human rights everyone's business within the CCG.

Our commissioning processes are underpinned by human rights principles. This means that commissioning decisions will be subject to fairness, respect, equality, dignity and autonomy.

We also have leadership roles for equality and diversity, which sit on our governing body (see pages six and seven) to ensure that it is championed at the highest levels. These and other leaders will be focused on both equality and diversity related to the services that we commission, and for our staff – who are our greatest asset.

We are establishing an equalities committee which will support this critical agenda, and this will report directly into the governing body.



Designing and delivering NHS services – having your say

Over the last two years, predecessor CCGs in south east London boroughs received national recognition for the quality of engagement they undertook with local people. Engagement with the public enables us to make decisions underpinned by a clear understanding of public views, concerns and aspirations. Knowing what people think about existing health services is vital to help us improve experiences of care for all patients.

Our aim is to build on the good work happening in our boroughs already. We will base our engagement activities on evidence of what works well, as well as national best practice. We will continue to involve local people at neighbourhood and borough level, and there will be occasions when we need to engage with people across borough boundaries, sometimes across south east London

We will continue to reach out proactively to people and communities so they can be involved in a consistent way. We are committed to addressing the inequalities and barriers to participation and involvement of seldom heard groups in south east London – including young people, those yet to develop health conditions, people from our LGBTQI+ communities, those living in areas of

deprivation within our boroughs and people from black and minority ethnic communities.

To support our engagement with local people and ensure that we hear from all communities across our boroughs in our decision-making, especially those whose voice is seldom heard, the CCG has established an engagement assurance committee. The committee will agree the CCG's engagement approach with local communities and partners. It will also monitor the annual engagement work plan (which will directly support delivery of the CCG's annual business plan), as well as ensure there is meaningful and genuine involvement that contributes to service improvements that benefit many more people. This committee will report directly into our governing body, where leadership roles for engagement and participation also sit.

Crucial to delivering effective and meaningful engagement, will be our ability to demonstrate how people's feedback and comments are used to inform the decisions made by the CCG to improve patient outcomes. We commit to making this part of the way we operate and will seek to evaluate the impact that new services and initiatives have on the health and wellbeing of our communities.

To find out more about this important work, and to get involved in shaping our evolving engagement approach see selondonccg.nhs.uk

The six boroughs of south east London

South east London is diverse, and the health and care needs of its 1.9 million people are complex. We have organised the CCG in a way that responds to this. Our population is both growing and ageing; that means demand for health and care services is set to increase significantly as more people live longer.

We also have significant health inequality, both within and across our six boroughs. Life expectancy at birth can vary within a borough by up to nine years between the most and least deprived areas. When it comes to people's health, the wider determinants of health – such as deprivation, the local environment,

housing, crime, education, employment and social isolation – have a significant impact, as do individual lifestyle choices.

One in five children in south east London live in low-income homes, with most of our boroughs – Greenwich, Lambeth, Lewisham and Southwark – ranking amongst the 15% most deprived local authority areas in the country. Whilst Bexley and Bromley are comparatively less deprived, they both still have pockets of significant deprivation.

The proportion of people from black and minority ethnic backgrounds also differs across our boroughs, from 60% in Lambeth to 19% in Bromley. We also have a higher than average proportion of local people identifying as LGBTIQ+. For example, Lambeth and Southwark have the second and third largest lesbian, gay and bisexual communities in the country.

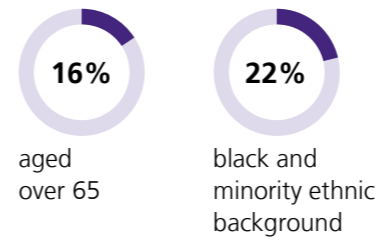
Many parts of south east London see big changes in their local populations on an annual basis. Where a highly mobile population exists, it can be harder for people to have access to good quality, consistent care.

In tackling health inequalities and improving health outcomes, the NHS Long Term Plan highlights the importance of continued collaboration between organisations with responsibility for providing and paying for health and care services in local areas.

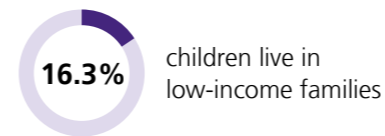
More information on each of our boroughs can be found on their local pages through the CCG's website: selondonccg.nhs.uk



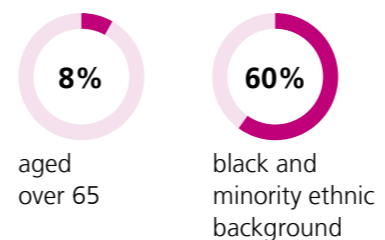
Bexley



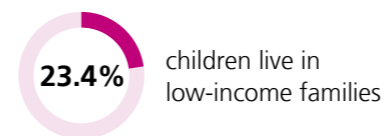
in the most deprived areas of Bexley than in the least deprived.



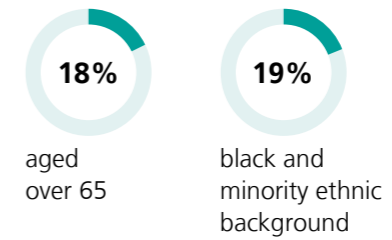
Lambeth



in the most deprived areas of Lambeth than in the least deprived.



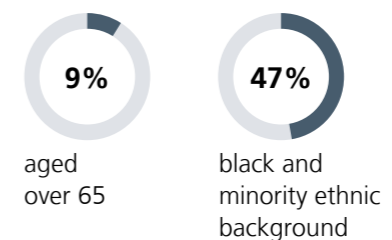
Bromley



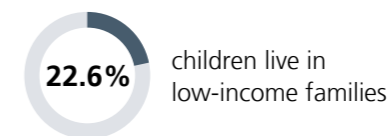
in the most deprived areas of Bromley than in the least deprived.



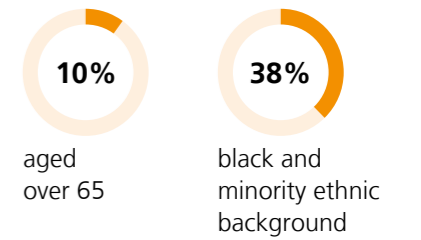
Lewisham



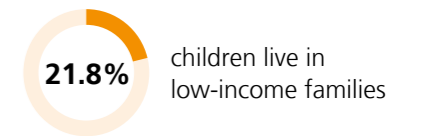
in the most deprived areas of Lewisham than in the least deprived.



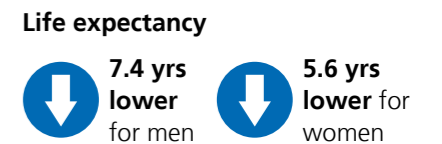
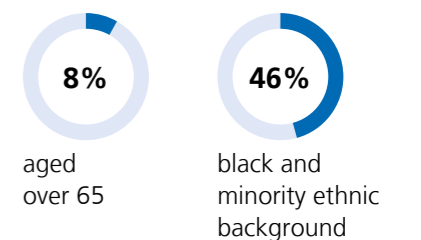
Greenwich



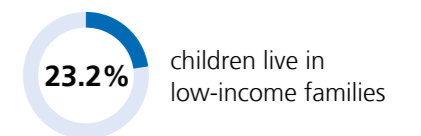
in the most deprived areas of Greenwich than in the least deprived.



Southwark



in the most deprived areas of Southwark than in the least deprived.



The following sources of data was used to compile the data listed on these pages:
 • Local authority websites • GLA population projections • Public Health England

Partnership working

People living in south east London access most of their health and social care very locally. When they do need more specialist care they have access to some of the country's finest specialist medical care through our teaching hospitals and wider acute provision and often access those services right across our six boroughs.

But people tell us that health and care services are often fragmented, resulting in duplication and confusion for those who use them. Not only is this unacceptable, it impacts on the quality of outcomes and increases the cost of delivering these services.

The key to making our services better is through improved partnership working. When it comes to health and social care, organisations working in isolation can rarely affect the types of change needed to bring about the greatest benefit for most people.

Our map of south east London's boroughs and hospital locations (page 12), if overlaid by the wider range of organisations, providers and community support that make a difference to

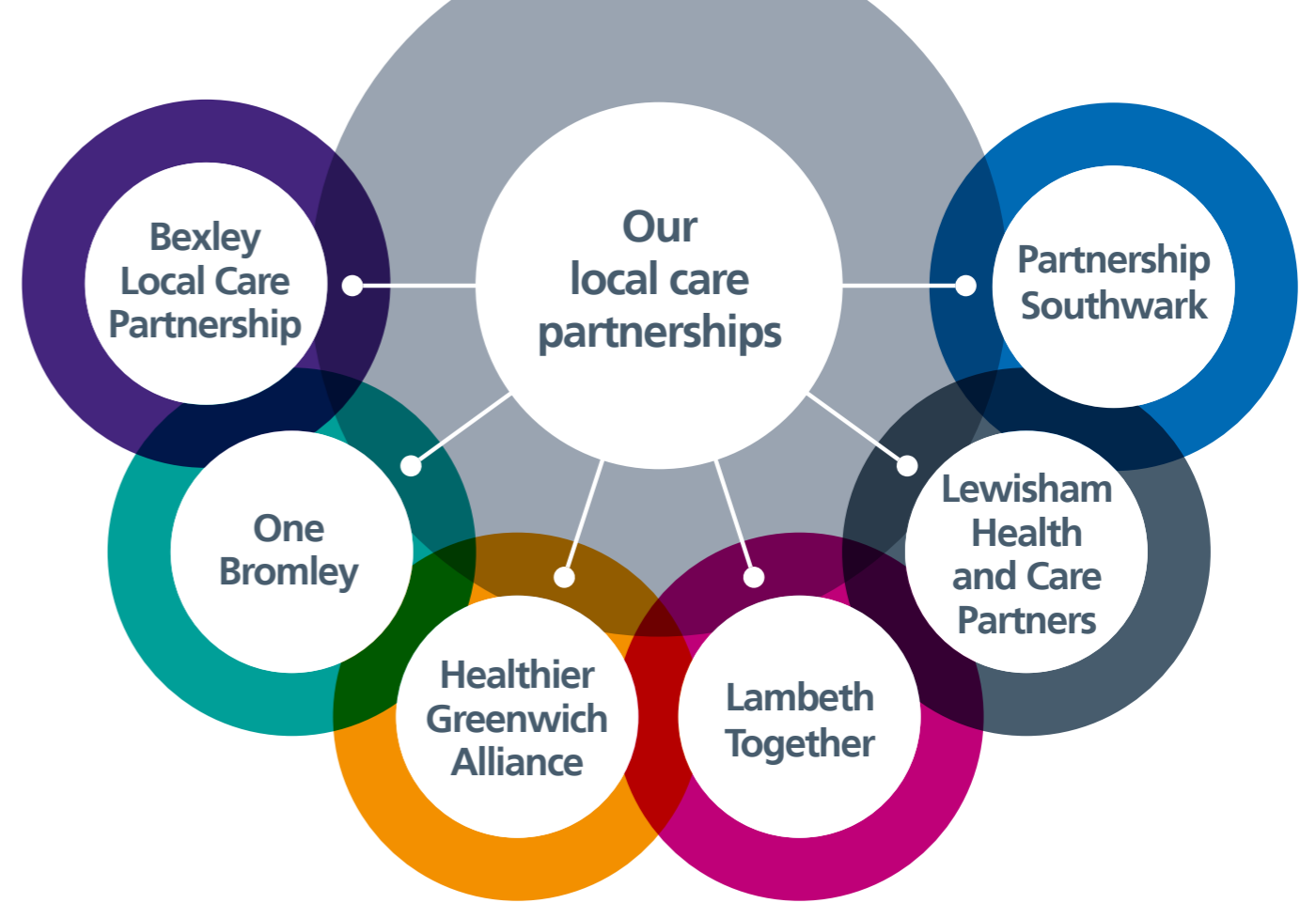
peoples' lives is hugely complex. We need to do more to help local people navigate this system and access the right advice and care.

Our partnership working, driven through our integrated care system (ICS), Our Healthier South East London, aims to bring about real improvement. Our ICS brings together six local authorities, five NHS trusts and NHS South East London CCG. You can find out more about its work at www.ourhealthiersel.nhs.uk

But our partnership working is not limited to our integrated care system. The CCG – both across south east London and at a borough level – has positive working relationships with Healthwatch and voluntary and community sector organisations. We will continue to work with these partners, sharing expertise and in joint engagement projects.

Key to the CCG's future success will be to get the focus of our work right from the outset.

We want to build on the positive partnerships and relationships that have already been built up locally



Working at borough and system levels

Our new CCG for south east London will operate with borough-based boards that will have their own clinical and executive leadership to deliver the CCG's plans at a local level. These boards will include, and work increasingly closely with, representatives from the local authorities, as well as with a wider range of partners through their local care partnership.

The overall aim is to bring together commissioning and provider organisations from across the health and care system in each borough to plan and provide a range of coordinated services that deliver more integrated care for local people, with a focus on the health and wellbeing of the local population. This means that our

boroughs will have health and wellbeing strategies that cover the development of health and care services locally.

In this way, the CCG can work at different population levels – within a neighbourhood or a whole borough through borough-based initiatives, or where most appropriate across more than one borough or even the whole of south east London. All of which will be overseen by the CCG's governing body, with membership drawn from all six boroughs.

Information on our borough-based boards and local care partnerships is at selondonccg.nhs.uk



The NHS – your rights and responsibilities

The NHS Constitution sets out rights to which patients, public and staff are entitled, and pledges that the NHS is committed to achieve, together with responsibilities, which the public, patients and staff owe to one another to ensure that the NHS operates fairly and effectively.

The values underpinning the NHS Constitution are: working together for patients; respect and dignity; commitment to quality of care; compassion; improving lives; and everyone counts. Building on these values, the Constitution is based on seven principles:

- 1** The NHS provides a comprehensive service, available to all irrespective of gender, race, disability, age, sexual orientation, religion, belief, gender reassignment, pregnancy and maternity or marital or civil partnership status.
- 2** Access to NHS services is based on clinical need, not an individual's ability to pay.
- 3** The NHS aspires to the highest standards of excellence and professionalism.
- 4** The patient will be at the heart of everything the NHS does.
- 5** The NHS works across organisational boundaries and in partnership with other organisations in the interest of patients, local communities and the wider population.
- 6** The NHS is committed to providing best value for taxpayers' money and the most effective, fair and sustainable use of finite resources.
- 7** The NHS is accountable to the public, communities and patients that it serves.



Patients have a series of rights under the Constitution in relation to: accessing services; quality of care and environment; nationally approved treatments, drugs and programmes; respect, consent and confidentiality; informed choice; involvement in your health and in the NHS; and complaint and redress.

At the same time the constitution asks patients and the public to take responsibility for their own health and wellbeing, register with a GP practice and treat NHS staff with respect. Other responsibilities include providing accurate information

about their health status, keeping appointments, following treatments recommended and taking part in public health programmes such as screening and vaccination, as well as providing feedback on the services they or their loved ones experience.

The NHS Constitution can be found at www.gov.uk/government/publications/the-nhs-constitution-for-england. NHS South East London CCG will work in accordance with it and the rights and responsibilities it outlines.

Glossary

- **CCG** – clinical commissioning group
- **ICS** – integrated care system
- **LGBTQI** – lesbian, gay, bisexual, transgender, queer, questioning and intersex
- **LCP** – local care partnership
- **PCN** – primary care network
- **STP** – sustainability and transformation partnership

Useful information

- NHS Long Term Plan
[longtermplan.nhs.uk](https://www.longtermplan.nhs.uk)
- South East London integrated care system's response to the NHS Long Term Plan
[ourhealthiersel.nhs.uk/news-events/news.htm?postid=103711](https://www.ourhealthiersel.nhs.uk/news-events/news.htm?postid=103711)
- NHS Constitution
[gov.uk/government/publications/the-nhs-constitution-for-england](https://www.gov.uk/government/publications/the-nhs-constitution-for-england)
- Our Healthier South East London ICS
[ourhealthiersel.nhs.uk](https://www.ourhealthiersel.nhs.uk)
- South East London CCG
[selondonccg.nhs.uk](https://www.selondonccg.nhs.uk)



Get in touch



NHS South East London CCG
160 Tooley St, London, SE1 2QH



selondonccg.nhs.uk

Further contact details:

- General enquiries/patient advice and liaison (PALs) – selccg.contactus@nhs.net
- Complaints – selccg.complaints@nhs.net
- Freedom of information requests – nelcsu.foi@nhs.net
- Media enquiries – selccg.media@nhs.net

