

## **Clinical commissioning groups authorised in Wave 1**

This document gives summary information about all 34 clinical commissioning groups (CCGs) which have been authorised in Wave 1 of the process.

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### **North of England**

#### **NHS Bassetlaw CCG**

12 member practices, population 110,000

Clinical Lead: Dr Stephen Kell

Accountable Officer: Phil Mettam

#### **Priorities:**

- Developing an assessment and treatment centre combining the skills of GPs, community and social care staff with those of hospital staff, to treat people who need urgent care
- A new patient-tracking computer system to help GPs and community staff co-ordinate their care, particularly when preparing for patients' return from hospital
- Developing closer-to-home services for patients

#### **NHS Blackpool CCG**

Clinical Lead: Dr Amanda Doyle

Accountable Officer: Dr Amanda Doyle

24 member practices, population 172,000

#### **Priorities:**

- To develop new ways of delivering unscheduled, scheduled and out-of-hospital care
- To tackle the significant health challenges of Blackpool, improving life expectancy and health outcomes for the population of our town

- To continue the development of our joint working with our partner organisations and our local communities to ensure that our patients, service users, and carers are at the centre of everything we do

### **NHS Calderdale CCG**

Clinical Lead: Dr Alan Brook

Accountable Officer: Dr Matt Walsh

27 member practices, population 213,000

#### **Priorities:**

- Preventing people from dying prematurely (plans inc. cancer – screening, diagnosis and public education; mental health – access to care and urgent care)
- Enhancing the quality of life for people with a long-term condition (inc. work with care homes, telehealth/telecare, support for carers)
- Helping people to recover and maintain their independence

### **NHS Cumbria CCG**

Clinical Lead: Dr Hugh Reeve

Accountable Officer: Nigel Maguire

82 member practices, population 500,000

#### **Priorities:**

- To develop a systematic patient feedback system using a technical solution to collect patient experience data which will feed quality measures which can be fed into contract discussion with provider organisations and ensure high quality services for patients across Cumbria.
- The CCG has signed a compact agreement with the local voluntary and community sector in Cumbria. This is a commitment to work closely with the third sector to encourage them to apply to run services where appropriate and also engage closely with voluntary and community groups during decisions about service redesign options.
- To focus on helping people with long term conditions to receive more support in primary care and community settings to enable them to manage their own conditions

### **NHS East Riding CCG**

Clinical Lead: Dr Gina Palumbo

Accountable Officer: Jane Hawkward

38 member practices, population 335,000

#### **Priorities:**

- Supporting our patients and population to achieve healthy, independent ageing
- Reducing health inequalities across the East Riding
- Improving the physical and mental health and wellbeing of children

### **NHS North East Lincolnshire CCG**

Clinical Lead: Dr Peter Melton

Accountable Officer: Dr Peter Melton

30 member practices, population 168,000

- Empowering people to manage their own health and wellbeing
- Supporting communities to help one another
- Delivering sustainable services when people need them

### **NHS Oldham CCG**

Clinical Lead: Dr Ian Wilkinson

Accountable Officer: Dr Ian Wilkinson

46 member practices, population 239,600

#### **Priorities:**

- To engineer a platform for patient centred care integration through a network of Clinical Directors, GPs, and CCG members, focussing on long term conditions, diabetes, urgent care and mental health
- To engage patients and the public in our work through initiatives like the 'Oldham Family', which describes how health and social care processes work, using fictional patient characters.
- To have clear and well-documented frameworks for collaboration with commissioning partners and early progress on integrated commissioning.

### **NHS Rotherham CCG**

Clinical Lead: Dr David Tooth

Accountable Officer: Chris Edwards

36 member practices, population 253,000

#### **Priorities:**

- Working with partners to help deliver the community strategy priorities of: the best start in life; supporting the most vulnerable communities; and supporting and sustaining the growth of the local economy.

- Improving communications with the public including communicating the efficiency challenges we face.
- Transforming the way health services are delivered by: preventing as many health problems as possible; helping patients to take more control over their health; transforming the case management of 8,000 people with long-term conditions; improving the quality and efficiency of the use of diagnostic tests, medicines and referrals to specialist care; and making sure patients with urgent needs get the right care at the right time.

### **NHS Wakefield CCG**

Name of Clinical Lead: Dr Phillip Earnshaw

Name of Accountable Officer: Jo Webster

40 member practices, population 354,000

#### **Priorities:**

- To improve our patients' experiences of care and make sure they receive the best possible outcomes
- To work in partnership with all care providers to ensure that services are seamless and as close as possible to the patient's home
- To commission urgent care services that provide the right care for local people in the right place, at the right time

### **NHS Warrington CCG**

Clinical Lead: Dr Andrew Davies (Chair)

Name of Accountable Officer: Dr Sarah Baker (Chief Clinical Officer)

26 member practices, population 208,000

#### **Priorities:**

- Working closely with partners and engaging with the public to make sure health services are joined up and meet people's needs.
- Early detection, self management and increased awareness of Long Term Conditions.
- Implementation of a redesigned urgent care model as part of Warrington's Urgent Care Programme.

### **NHS West Cheshire CCG**

Clinical Lead: Dr Huw Charles-Jones

Accountable Officer: Alison Lee

37 member practices, population 253,000

**Priorities:**

- Improving outcomes in six key areas: cancer, heart disease, mental health, alcohol-related ill-health, diabetes, and dementia
- Improving patients' experience of all types of healthcare
- Collaboration with partners to make all-round improvements in health and social care

## **Midlands and the East**

### **NHS Dudley CCG**

Clinical Lead: Dr David Hegarty

Accountable Officer: Paul Maubach

52 member practices, population 313,000

**Priorities:**

- To address health inequalities in Dudley
- To ensure that local services deliver the best possible outcomes for the whole population
- To improve the quality and safety of local services

### **NHS East & North Hertfordshire CCG**

Clinical Lead: Dr Tony Kostick

Accountable Officer: Lesley Watts

60 member practices, population 567,000

**Priorities:**

- To implement innovative ways to avoid hospital admissions of people with long term conditions.
- To ensure patient and public engagement throughout the commissioning process by developing patient leaders and GP patient champions.
- To work with partners on improving the health of our population, including encouraging people to take more personal responsibility for maintaining good health.

### **NHS East Leicestershire and Rutland CCG**

Clinical Lead: Dr Hamant Mistry

Accountable Officer: Dr Dave Briggs

34 member practices, population 318,000

**Priorities:**

- To transform services and enhance quality of life for people with long-term conditions
- To improve the quality of patients services and experience
- To develop and deliver excellent community services in collaboration with local partners.

**NHS Great Yarmouth and Waveney CCG**

Clinical Lead: Dr John Stammers

Accountable Officer: Andy Evans

27 member practices, population 230,800

**Priorities:**

- Continuing the improvement of local services and strengthening the local health system
- Working with social care to provide seamless services for those needing both health and social care
- Increasing patient involvement in the commissioning of healthcare

**NHS Leicester City CCG**

Clinical Lead: Professor Azhar Farooqi

Accountable Officer: Dr Simon Freeman

64 member practices, population 374,000

**Priorities:**

- Reducing premature deaths from cardiovascular disease
- Reducing premature deaths from respiratory disease
- Developing integrated health and social care solutions for elderly patients and patients with long term conditions

**NHS North Staffordshire CCG**

Clinical Lead: Dr Mark Shapley

Accountable Officer: Dr David Hughes

33 member practices, population 210,000

**Priorities:**

- Providing integrated patient journeys for nursing home residents; recognising the scope and complexity of needs, provide a proactive care where ever possible, maximise continuity of care and minimise sudden or unplanned transitions to care.

- Using simple telehealth solutions and assistive technologies to promote better self-care and avoid re-admissions and attendances to hospital.
- Providing a person-centred approach where health and social care teams work together to provide a personalised package of care which is seamless, closer to a person's home and which supports patients to better manage their health and live independently

### **NHS Sandwell and West Birmingham CCG**

Clinical Lead: Dr Nick Harding (Chair)

Accountable Officer: Andy Williams

112 practices, population 534,786

#### **Priorities:**

- To deliver whole system change in partnership with others to bring care closer to home and focus on health promotion through “Right Care, Right Here”
- To improve the health care outcomes and experience of people with long term conditions through the systematic identification and the provision of proactive healthcare to people at risk
- To improve health outcomes and reduce health inequalities to a diverse population through the development of locally targeted health services

### **NHS Shropshire CCG**

Clinical Lead: Dr Caron Morton

Accountable Officer: Dr Caron Morton

45 member practices, population 302,020

#### **Priorities:**

- Develop a health system that empowers the delivery of excellent outcomes founded on individual relationships which nurture compassion, respect and dignity
- Implement the long term conditions strategy, which will engage clinicians in the development of pathways and support patients to manage their conditions and personal budgets
- Develop a health economy approach to transform urgent care and ensure patients have access to the right services at the right time

### **NHS Stoke on Trent CCG**

Clinical Lead: Dr Prasad Rao

Accountable Officer: Dr. Andrew Bartlam

54 member practices, population 250,000

**Priorities:**

- Putting patients, carers and the public first to improve healthcare outcomes
- Reducing bureaucracy to a minimum
- Delivering best value for money in consistent, high-quality healthcare

**NHS West Leicestershire CCG**

Clinical Lead: Dr Nick Pulman

Accountable Officer: Toby Sanders

50 member practices, population 366,000

**Priorities:**

- Reducing premature deaths from cardiovascular disease, cancer and respiratory disease
- Reducing health inequalities across the area
- Developing capacity and capability in primary care

## South of England

**NHS Bedfordshire CCG**

Clinical Lead: Dr Paul Hassan

Accountable Officer: Dr Paul Hassan

55 member practices, population 429,000

**Priorities:**

- Improving patients' experience of urgent care services, including walk-in centres, GP out-of-hours services, and A&E
- Giving more support to people with long-term conditions to help them manage their conditions without visiting hospital
- Increasing support for older people to return to their own homes after hospital stays.

**NHS Gloucestershire CCG**

Clinical Lead: Dr Helen Miller (Clinical Chair)

Accountable Officer: Mary Hutton

85 member practices, population 616,000

**Priorities:**



- To further develop joined up care and wider community support across Gloucestershire
- To develop a clinical programme based approach to commissioning that looks at a range of conditions and the patient's journey through care
- To develop new ways of engaging with all our stakeholders

### **NHS Kernow CCG**

Clinical Lead: Dr Colin Philip

Accountable Officer: Joy Youart

70 member practices, population 540,000

#### **Priorities:**

- To work across health and social care to integrate services for the benefit of patients.
- To put patients at the heart of commissioning through developing the People's Commissioning Board.
- To develop a seamless, county-wide 24-hour urgent care service

### **NHS Newbury and District CCG**

Clinical Lead: Dr Abid Irfan

Accountable Officer: Cathy Winfield

10 member practices, population 114,000

#### **Priorities:**

- Improving the quality of data gathered throughout health and social care, so that clinical commissioning can be truly evidence-based
- Carefully managing work to reduce hospital admissions, by ensuring good community provision
- Improving access to physiotherapy services

### **North and West Reading CCG**

Clinical Lead: Dr Rod Smith

Accountable Officer: Cathy Winfield

10 member practices, population 106,028

#### **Priorities:**

- Partnership with the Health and Wellbeing Boards to improve prevention and public health for the population

- Commission easily accessible, effective and high quality health services to our patients
- Develop an integrated healthcare system including primary care, secondary care, community and public health

### **NHS Oxfordshire CCG**

Clinical Lead: Dr Stephen Richards

Accountable Officer: Ian Busby

82 member practices, population 650,300

#### **Priorities:**

- Increasing engagement with patients in clinical commissioning
- Reducing health inequalities, to achieve a healthier population overall
- Smoothly taking over responsibilities from primary care trust NHS Oxfordshire

### **NHS Portsmouth CCG**

Clinical Lead: Dr Jim Hogan

Accountable Officer: Innes Richens

28 member practices, population 211,200

#### **Priorities:**

- Improving community services for frail, older people and those with chronic conditions
- Engaging patients' views in clinical commissioning
- Increasing collaboration with the local authority

### **NHS Somerset CCG**

Clinical Lead: Dr David Rooke

Accountable Officer: David Slack

176 practices, population 529,000

#### **Priorities:**

- Delivering integrated services closer to home
- Reducing health inequalities and supporting people to make healthier lifestyle choices
- Developing strong locality teams that reflect the needs of local communities

## **NHS South Reading CCG**

Clinical Lead: Dr Elizabeth Johnston

Accountable Officer: Dr Cathy Winfield

20 member practices, population 125,000

### **Priorities:**

- To work with our local communities to review services for minor ailments and to avoid inappropriate A & E attendances
- To reduce non elective admissions by 1 patient per day through a number of project streams, supporting self-care, carers, risk stratification, and care co-ordination
- To increase the focus on early years and the whole family to reduce health inequalities.

## **NHS Wokingham CCG**

Clinical Lead: Dr Stephen Madgwick

Accountable Officer: Dr Cathy Winfield

14 member practices, population 155,000

### **Priorities:**

- To work with our local communities to support people to manage their long-term conditions, maintain independent living and reduce social isolation
- To reduce non-elective admissions and re-admissions by 1 patient per day through a number of project streams, supporting self-care, risk stratification and care co-ordination
- Making 'Care Closer to Home' a reality by switching the focus of care to the community, driven by Primary Care

## **London**

### **NHS Islington CCG**

Clinical Lead: Dr Gillian Greenhough (Chair)

Accountable Officer: Alison Blair (Chief Officer)

37 member practices, population 226,000

### **Priorities:**

- Ensuring every child has the best start in life, with a programme of work focusing on key outcomes such as reducing infant mortality, reducing childhood obesity and increasing childhood immunisation rates.

- Preventing and managing long term conditions to extend both length and quality of life and reduce health inequalities through the implementation of integrated care centred on the needs of the individual and their families.
- Improving mental health and wellbeing by supporting the shift towards prevention, earlier intervention and recovery as well as focusing on particular issues such as harm from alcohol, substance misuse and dementia.

### **NHS Kingston CCG**

Clinical Lead: Dr. Naz Jivani

Accountable Officer: David Smith

28 member practices, population 106,100

#### **Priorities:**

- A programme of improvements to mental health and substance misuse services through jointly commissioning services to avoid duplication and to help patients be signposted to the best treatment for their needs.
- Developing and implementing a transformation model of integrated health and social care to deliver services for people with long term conditions (Kingston at Home), to improve patient experience and help people live independently in their own homes.
- Working with all GP practices to make sure that patients receive the right medicines for their condition. All practices have signed up to the delivery of the medicines management goals to manage prescribing growth within financial resources.

### **NHS Wandsworth CCG**

Clinical Lead: Dr Nicola Jones

Accountable Officer: Graham Mackenzie

43 member practices, population 360,000

- An approach called Planning All Care Together that aims to better coordinate how care is delivered for patients with long term conditions.
- An integrated approach to Urgent Care – the CCG has procured an integrated 111 and Out of Hours service which launched on 6 November 2012.
- The CCG is developing a partnership with the people of Wandsworth which will be built on honesty, integrity and open communication, enabling patient views to inform the commissioning process and ensure we create pathways of care and services that fulfil our patients' needs.