



Committee and Date
Shadow Health & Wellbeing
Board

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Public

PRIORITISATION PROCESS FOR HEALTH INVESTMENT DECISIONS IN SHROPSHIRE

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The limited budgets available, coupled with infinite and competing local needs, mean that the CCG has to make decisions about which services or interventions should take precedence in relation to each other for investment.

As the prioritisation process entails making difficult decisions/choices on a resource use – a dilemma, it implies some element of sacrifice - because once a resource is used in a certain way, it cannot be used in an alternative way. The decisions made are therefore associated with winners and losers in the process.

To overcome these dilemmas in decision-making, the CCG will have an explicit, objective and consistent mechanism in place that would allow investment decisions to be made in an informed, transparent and considered way.

In broad terms, the prioritisation process entails two distinct stages:

Stage 1: Setting/identifying priorities – This involves a submission of what is considered a priority for development by PCT staff, CCGs, following consultation with acute trusts and other stakeholders. The submissions could be based on identification of health needs or as a result of national/political imperatives and should be linked to the strategic direction and QIPP plan. The CCG will continue to use a *modified* version of the Portsmouth Tool for both stages of the prioritisation process

Stage 2: Decision-making on identified priorities (prioritisation) – This involves the assessment, scoring and making decisions on all identified priorities by a prioritisation panel.

The decision making (prioritisation) process includes presenting competing proposals to a panel of local members of the public for them to review and offer opinions upon. These opinions are then fed into the formal prioritisation panel, made

up of clinicians, managers, non-executive directors and a small number of the members of public who had been on the previous panel.

Prioritisation process for current services

From October to December 2011 the CCG will be holding a “strategic discussion” with stakeholders about the commissioning of District Nursing services and Child and Adolescent Mental Health services (CAMHs).

This will culminate in a prioritisation process, examining current spend against the output from the strategic discussion.