

Arlene Wilkie
Chief Executive





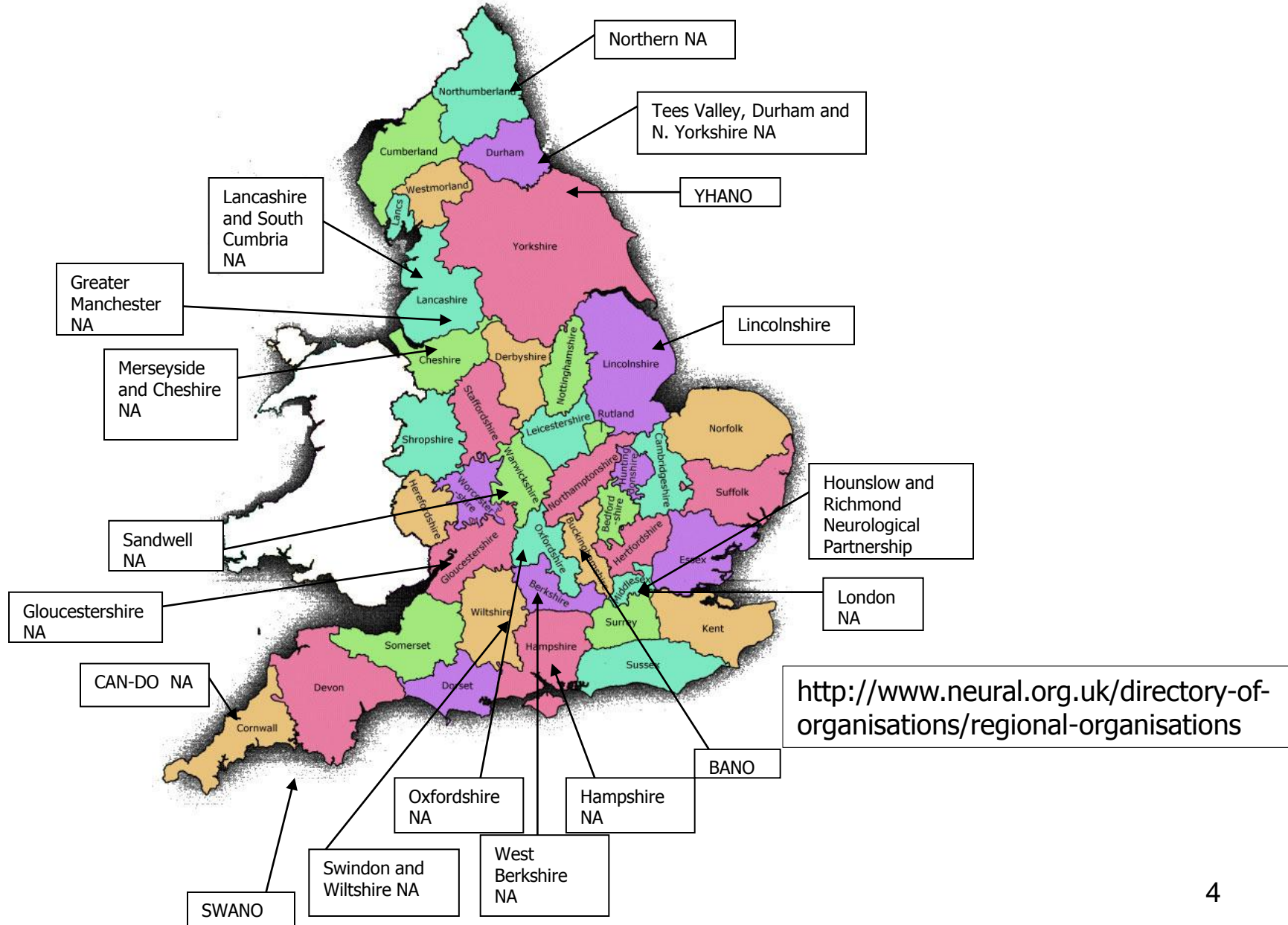
We are the only collective voice for more than 70 national and regional brain and spine organisations working together to make life better for 8 million children, young people and adults in England with a neurological condition.

A better quality of life for each individual diagnosed with a neurological condition

To raise awareness and understanding of neurological conditions to ensure that every person diagnosed with a neurological condition has access to high quality, joined up services and information from their first symptoms and throughout their life



Regional Neurological Alliances



Neurological disease in the UK

10 million people / 8 million in England are living with a neurological condition

- 1 million people (2% of population) are disabled by a neurological condition
- 350,000 people require help with most of their daily activities
- 850,000 people will be acting as a carer to these individuals
- These people account for 20% of acute hospital admissions
- the third most common reason for individuals visiting their GP.

- **2 million people** living with cancer (Cancer Research UK)
- **2.6 million people** living with coronary heart disease (British Heart Foundation)

NHS reforms

- The most extensive reorganisation of the NHS structure in England since 1948
- Not discussed during the 2010 election campaign, nor in the May Conservative-Liberal Democrat coalition agreement
- ... the white paper *Equity and Excellence: Liberating the NHS* was published,
- then the implementation plan *Liberating the NHS: legislative framework and next steps*
- and the Health and Social Care Bill followed in January 2011 ...



The principles

- Patients at the centre of the NHS – ‘No decision about me without me’
- Changing the emphasis of measurement to clinical outcomes
- Empowering the health professionals



The changes

- Establish an independent NHS Commissioning Board:
 - role includes overseeing the new clinical commissioning groups led by GPs and other clinicians who will "buy" care within the NHS, and organising the treatment of complicated/specialised conditions including some highly specialised neurology services; and will host clinical networks and senates
- Abolish Strategic Health Authorities
- Abolish NHS primary care trusts ~£60 billion transferred to clinical commissioning groups
- Establish new local authority Health and Wellbeing Boards:
 - lead on improving the strategic coordination of commissioning across NHS, social care, and related children's and public health services

What the NHS reforms mean for the care of people with neurological conditions

- People with neurological conditions rely on a specialist multidisciplinary team of nurses, physiotherapists, speech and language therapists and others to maximise their independence and quality of life.
- The Bill proposes that these services be commissioned at a local level by clinical commissioning groups.
- Our key concern is that some such groups will cover a relatively small population area, meaning that it will not be cost effective to commission services for less common conditions. Effective commissioning necessitates a population size of a minimum of 250,000 but ideally larger. Otherwise, there are not likely to be enough people living with neurological conditions to make it efficient.
- **Therefore, clinical commissioning groups covering a small population and working in isolation are unlikely to deliver the services that people with neurological conditions need or provide value for money for the public purse.**

Recommendations

Clinical commissioning groups must work together

- The NHS Commissioning Board must monitor, and where necessary enforce, commissioning of services for less common conditions.
- There should be an advisory group for neurology within the NHS Commissioning Board
- Without this, neurology services will fall through the 'strategic gap' and at clinical commissioning group level there is a real risk neurology will be overlooked.

There must be neurology networks and clinical senates

- These can help provide more integrated care, including for less common conditions.
- Neurology should be represented on each clinical senate in order to provide the necessary skills and leadership to assist clinical commissioning groups to commission effectively for neurology.
- Neurological networks should be funded and embedded throughout the NHS
- The formation of clinical senates and networks should be a priority. They should be in place to support clinical commissioning groups when they start taking full responsibility for commissioning from April 2013.

Our campaigning

- Responded to the early consultations
- During the listening exercise
 - Worked with the Bill team
 - Neurology meeting with Earl Howe, Health Minister
 - Met with Andrew Lansley and Paul Burstow, Health Minister
 - Took part in Future Forum meetings and responded to their consultation
- Briefed the Health Bill committee
- Briefed and met with MPs before recess
- Brought out issues to the party conferences
- Met with the Lords
- **Amendments to the Bill have been tabled**



Action is a necessity, not a choice.

Thank you!

arlene.wilkie@neural.org.uk