

# A Call To Action - partnerships

National Support Centre  
Regions  
Area Teams  
Clinical Commissioning Groups  
Health and wellbeing boards



# Clinical Commissioning Groups

- The CCGs have an important role in:
  - Leading and/or working in partnership with other CCGs to run local engagement events (potentially with health and wellbeing boards)
  - Incorporating the 'Call to Action' as a complementary strand to existing engagement work over the autumn
  - Building momentum with local partners – e.g. health and wellbeing boards, patients' groups
  - Liaising with Area Teams for shared development of engagement work, in order for ATs to consolidate area engagement
  - Providing feedback on the progress of the 'Call to Action' in their localities
- There is not a single mandated approach to the CCG activity, as this would run contrary to the principles of the new commissioning system. CCGs have flexibility to join with ATs and neighbouring areas (providing that does not diminish the opportunities for local communities to participate) and to use the services of CSUs to manage this locally.
- The 'Call to Action' will lead to 5 year commissioning plans owned by each CCG, with the first 2 years covering hard edged commitments. The engagement phase should provide a key channel through which CCGs can test ideas and gather feedback to inform their strategic plans.
- The Commissioning Assembly will continue to be key partners in co-producing this going forward.

# Health and wellbeing boards

- The health and wellbeing boards (HWWBs) have an important role in:
  - Understanding the specific communities to engage during the campaign
  - Agreeing how the £3.8bn integrated budgets will contribute towards the strategic plans
  - Ensuring community needs and requirements are covered in the plan development at a local health economy level
- There is an opportunity for health and wellbeing boards to be critical partners in the design and delivery of the call to action, in supporting the alignment of plans and encouraging the wider participation of local stakeholders.
- There is not a single approach to how this could work, but area teams and clinical commissioning groups are asked to consider how their HWWBs can be integral to this process, there is joint ownership where possible, and to ensure this is part of the dialogue with HWWBs around identifying and meeting local priorities.
- The Strategy Unit will refine further the roles and working models as we discuss with colleagues in regions and area teams, and with the Commissioning Assembly.