1. HEALTH GEOGRAPHY

1.1 Introduction

This chapter provides an overview of the geographies that will become important for the provision of public health information as a result of the Health and Social Care Act that received Royal Assent on 27 March 2012. Primary Care Trusts, Cancer Registries, Public Health Observatories and the Health Protection Agency will cease to exist after 31 March 2013 and a number of new organisations will take over these and other public health functions. The new organisations will include a new executive agency of the Department of Health (DH) to be called Public Health England (PHE), a range of organisations under the NHS Commissioning Board (NHS CB) and the local Health and Wellbeing Boards (HWBs) based in upper tier local authorities. All will have core roles in the collection of health data, publication of information and assessment of health commissioning needs and resources.

This chapter will also include signposts to other geographic products available to support the publication of 2011 Census data.

1.2 Public Health England (PHE)

Public Health England will be established on 1 April 2013 and will become responsible for providing public health functions for health protection, health promotion, screening, immunisation and public health information & intelligence. PHE will operate as an Executive Agency of the Department of Health (DH) with a small national office led by a Chief Executive. A number of 'sender' organisations have been identified as core components of PHE, including the Health Protection Agency, public health observatories, cancer registries, National Drug Treatment Agency, National Drug Treatment Monitoring Service, and cancer and non-cancer screening quality assurance reference centres.

Public Health England will have three main geographic footprints:

- Four sub-national regions will cover the North of England, South of England, London and the Midlands & East of England.
- Eight Knowledge and Intelligence Teams (KITs) will provide knowledge and intelligence services to all NHS CB organisations, local HWBs and voluntary sector.
- 15 Centres will provide a local presence and leadership to local authorities for health protection, public health and specialised commissioning.

The West Midlands will be part of the Midlands and East of England region and have a single Knowledge and Intelligence Team dedicated to the same geographic area as the former SHA/GOR. There will be one PHE Centre covering the West Midlands although three Health Protection Units will continue to support local authorities (Figure 1.1).

Key Regional Office **HPU Sites** PHE KIT and Centre West Midlands North HPU West Midlands East HPU West Midlands West HPU Crown copyright and database rights 2013 Ordnance Survey 100050714.

Figure 1.1: Public Health England geographies in the West Midlands, April 2013

1.3 NHS Commissioning Board (NHS CB)

The first new organisation to be established under the Health and Social Care Bill was the NHS Commissioning Board Authority. It was established in shadow form as a Special Health Authority and replaced by the NHS Commissioning Board on 1 October 2012. Within the NHS CB structure there are both statutory and non-statutory organisations that will each have their own geographic footprint. The national office of the NHS CB in Leeds will oversee a commissioning budget of £80 billion.

Commissioning Regions (CRs)

There will be four Commissioning Regions (CRs) in England responsible for directly commissioning primary care and specialist services for their sector. They will cover the North of England, South of England, London, and the Midlands & East of England (Figure 1.2). Midlands and East of England CR will be responsible for services in the West Midlands.

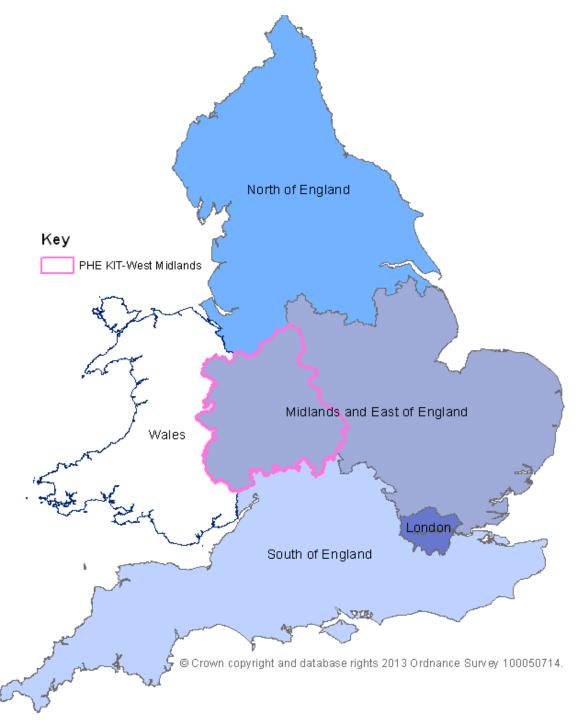


Figure 1.2: NHS Commissioning Board Commissioning Regions in England, April 2013

Networks and hubs

There will be ten Specialised Commissioning Hubs in England whose functions will be provided within the Area Teams (ATs). They will lead on specialised commissioning across England. West Midlands will be covered by one Specialised Commissioning Hub coterminous with the PHE KIT boundary.

The 12 Clinical Senates identified by NHS CB will provide professional and clinical advice and leadership at a strategic level to CCGs and HWBs to support all commissioning decisions.

12 Specialised Commissioning Networks will provide specialist commissioning advice to the NHS CB and CCGs.

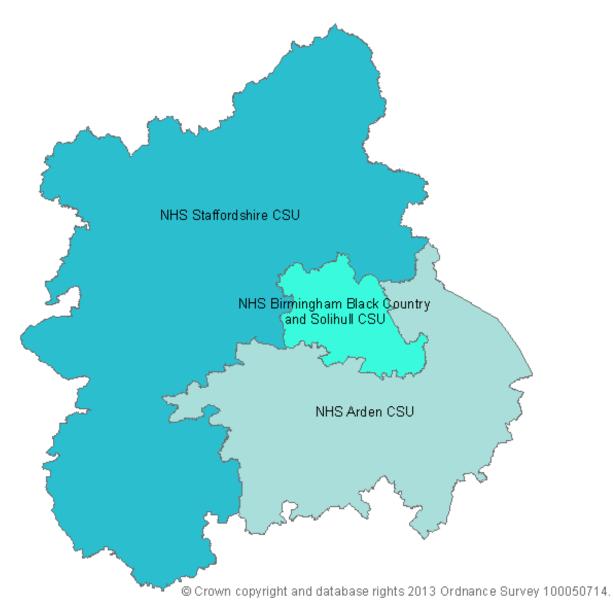
- 12 Strategic Clinical Networks will "help commissioners reduce unwarranted variation in services and encourage innovation".
- 12 Operational Delivery Networks will be set up to closely collaborate with Strategic Clinical Networks, academic health science networks, senates and Health Education England for operational delivery issues.

Within the West Midlands the Clinical Senates, Specialised Commissioning Networks, Strategic Clinical Networks and Operational Delivery Networks are all coterminous with the PHE KIT boundary.

Commissioning Support Units (CSUs)

There will be 22 Commissioning Support Units (CSUs) across England who will support Clinical Commissioning Groups (CCGs) when commissioning local services.

Figure 1.3: Commissioning Support Units in the West Midlands, April 2013



Originally envisaged as having a geographic footprint it is now more likely that the CSUs will bid to provide a range of services to any CCG regardless of their geographic location. Some CCGs are

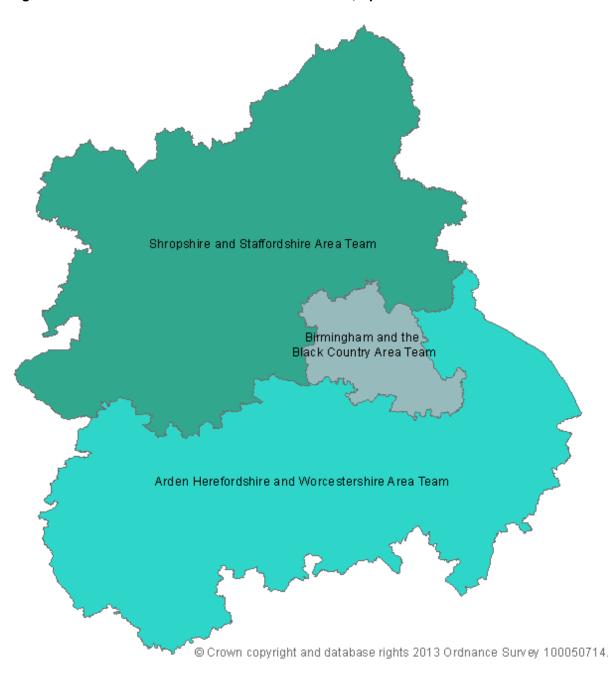
planning to run their own CSU activities e.g. NHS Cambridgeshire and Peterborough CCG. Some CSUs will host Data and Management Integration Centres (DMICs).

It is expected that 3 CSUs will exist in West Midlands providing support to all CCGs but it is not clear whether they will include a DMIC (Figure 1.3).

Area Teams (ATs)

27 Area Teams (ATs) will support CCG development and assurance, emergency planning and directly commission GP, dental, pharmacy and optical services in England. There will be 3 ATs based in West Midlands (Figure 1.4).

Figure 1.4: NHS CB Area Teams in the West Midlands, April 2013



Clinical Commissioning Groups (CCGs)

Clinical Commissioning Groups (CCGs) are the only statutory organisations in the NHS CB family. Their function will be defined by Statute to commission local health services. 22 CCGs have been identified in West Midlands, one of which is split into two distinct geographic areas i.e. NHS South Staffordshire and Seisdon Peninsular CCG (identified by cross-hatch in Figure 1.5 below).

Ten CCGs have been authorised in Wave 1 and Wave 2. The remainder should be authorised in Waves 3 and 4 before 1 April 2013. The authorised CCGs are:

- NHS Dudley CCG
- NHS North Staffordshire CCG
- NHS Sandwell and West Birmingham CCG
- NHS Shropshire CCG
- NHS Stoke on Trent CCG
- NHS Redditch and Bromsgrove CCG
- NHS South Worcestershire CCG
- NHS Telford and Wrekin CCG
- NHS Walsall CCG
- NHS Wyre Forest CCG

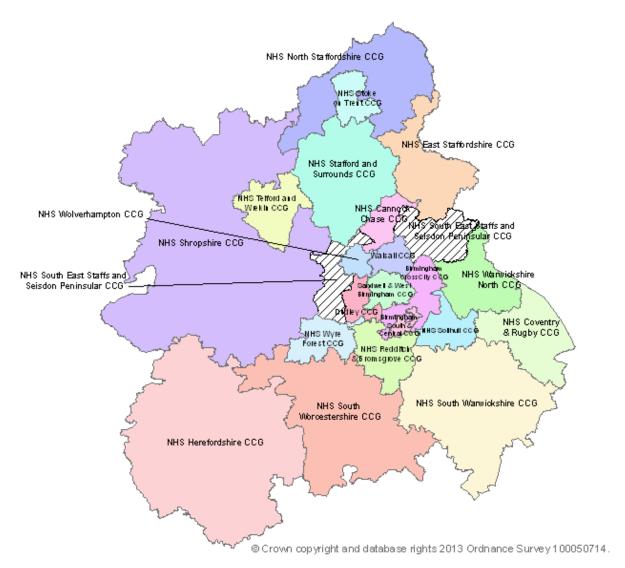


Figure 1.5: Clinical Commissioning Groups in the West Midlands, April 2013

1.4 Health and Wellbeing Boards (HWBs)

Local public health policy will be led by a Health & Wellbeing Board based in strategic or upper tier local authorities. The HWBs will provide the direction for local health policy and the targets for commissioning public health and clinical services. The local authority will host the Director of Public Health and a team of information specialists to support the work of the HWB. The Public Health team will take the lead for improving health and coordinating local efforts to protect and promote the public's health and wellbeing. Local political leadership will be central to making the new structure work. There are 14 HWBs in West Midlands (Figure 1.6).

STAFFORDSHIRE SHROPSHIRE WARWICKSHIRE COUNTY OF HEREFORDSHIRE © Crown copyright and database rights 2012 Ordnance Survey 100050714.

Figure 1.6: Health and Well-being Boards in the West Midlands, April 2013

1.5 Other geographies

Parliamentary Constituencies

In September 2011 the Boundary Commission for England began a process of consultation on parliamentary constituency boundary changes to secure a reduction in the number of Members of Parliament from 533 to 502 before the next general election or 2015 whichever is the earlier. In the West Midlands they proposed a reduction in parliamentary constituencies from 59 to 54 with 10 boundaries unchanged. Details of the proposals are available at:

http://consultation.boundarycommissionforengland.independent.gov.uk/.

The Electoral Registration and Administration Act 2013 received Royal Assent on 31 January 2013 and postponed the date of the next boundary review to 2018.² The Boundary Commission for England has therefore ceased working on the 2013 Review and will no longer be reporting to the Secretary of State in autumn 2013.

Census 2011 geography

ONS Geography published new output area, lower super output area and middle super output area boundaries for 2011 census as 'extent of the realm' and 'mean high water mark' (coastline) files on 1 January 2013. Changes to output area boundaries are minimal and limited to change in less than 5% of output and lower super output areas. Wherever possible the changes to boundaries have been achieved by simple mergers and groupings rather than wholesale realignments. This strategy should allow more meaningful comparisons to be made between 2001 and 2011 results than was possible between previous Censuses.

The boundary sets are available to download under OpenData principles at: http://www.ons.gov.uk/ons/guide-method/geography/products/census/spatial/2011/index.html

1.6 References

- 1 Great Britain. *The Health and Social Care Act 2012, Chapter 7*. London: The Stationery Office, 2012. Available at: http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted
- 2 Great Britain. *The Electoral Registration and Administration Act 2013, Chapter 6.* London: The Stationery Office, 2013.

Available at: http://www.legislation.gov.uk/ukpga/2013/6/contents/enacted

1.7 Further information

Since 1 July 2012 a number of key documents have been published by DH and the NHS CB which identify the geographic footprint of many of the structures within PHE and the NHS CB. These publications were used to identify the boundaries describes in this chapter. They are:

NHS Commissioning Board. *Local Area Teams: staff briefing pack.* Leeds: NHS Commissioning Board, 20 June 2012.

Available at: http://www.commissioningboard.nhs.uk/2012/06/20/local-teams-senates/

NHS Commissioning Board. *Clinical Commissioning Groups in England: LSOA lookup tables*. Leeds: NHS Commissioning Board, 16 July 2012.

Available at: http://www.commissioningboard.nhs.uk/files/2012/07/list-of-proposed-lsoas-ccg.xls

NHS Commissioning Board. *The Way Forward: Strategic Clinical Networks*. Leeds: NHS Commissioning Board, 26 July 2012.

Available at: http://www.commissioningboard.nhs.uk/files/2012/07/way-forward-scn.pdf

Public Health England Transition Team. *Structure of Public Health England. Factsheet.* London: Department of Health, 26 July 2012.

Available at: https://www.wp.dh.gov.uk/healthandcare/files/2012/07/PHE-structure.pdf

NHS Commissioning Board. *Review of Commissioning Support Units at Checkpoint 2*. Leeds: NHS Commissioning Board, 12 August 2012.

Available at: http://www.commissioningboard.nhs.uk/2012/08/10/cs-bulletin-issue4/

NHS Connecting for Health. *ODS Specification: non-legislative organisations* [Internet]. Leeds: NHS Connecting for Health, 6 December 2012.

Available at: http://www.connectingforhealth.nhs.uk/systemsandservices/data/ods/actchanges

1.8 Abbreviations

CCG Clinical Commissioning Group

CR Commissioning Region

CSU Commissioning Support Unit

DH Department of Health

DMIC Data Management and Integration Centres

GoR Government Office for the West Midlands

HPU Health Protection Unit

HWB Health and Wellbeing Board

KIT Knowledge and Intelligence Team

AT Area Team

NHS CB NHS Commissioning Board

PHE Public Health England

SHA Strategic Health Authority

1.9 Author

Diane Edwards, GIS Specialist Cancer Information, West Midlands Cancer Intelligence Unit.

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Chapter 1. Health geography Diane Edwards, West Midlands Cancer Intelligence Unit