

**NHS Herts Valleys Clinical Commissioning Group  
Board Meeting  
5 November 2015**

<b>Title</b>	Accountable Officer's Report	<b>Agenda Item: 5</b>
<b>Purpose (tick one only)</b>	Approval <input checked="" type="checkbox"/> Discussion <input type="checkbox"/> Consideration <input type="checkbox"/> Noting <input type="checkbox"/>	Information <input checked="" type="checkbox"/>
<b>Responsible Director(s) and Job Title</b>	Nicola Bell, Accountable Officer	
<b>Author and Job Title</b>	Nicola Bell, Accountable Officer	
<b>Recommendations/ Action Required by the Board</b>	The Board is asked to receive this report for information  The Board is also requested to formally ratify the recommendation it approved remotely that the CCG should not move to delegated primary care commissioning arrangements prior to April 2017.	
<b>Classification</b> <i>Is this report exempt from public disclosure? (ie. FOIA or DPA)</i>	No	
<b>Impact on Patients/Carers/Public</b>	None	
<b>Engagement with Stakeholders/Patient/Public</b>	Not applicable	
<b>Links to Strategic Objectives</b>	This links to all of our Strategic Objectives	
<b>Board Assurance Framework</b> <i>Does this report provide evidence of assurance for the Board Assurance Framework?</i>	The report provides evidence of assurance in relation to all of the strategic objectives in the BAF.	
<b>Does this report mitigate risk that is included in the Corporate Risk Register?</b>	N/A	
<b>Resource Implications</b>	None	
<b>Equality and Diversity</b> (Has an Equality Analysis been completed?)	Not applicable	
<b>Legal/Regulatory Implications</b>	Health and Social Care Act 2012	
<b>Sustainability Implications</b>	Not applicable	
<b>NHS Constitution</b>		
<b>Report History</b>	Not applicable	
<b>Appendices</b>	None	

## 1. System Leadership

### 1.1 West Herts Strategic Review – Your Care, Your Future

YCYF has reached a key milestone where the outcomes of detailed work to develop the future health and social care strategy for West Hertfordshire has cumulated in the publishing of a strategic outline case (SOC) identifying how we will shape and evolve care over coming years. This was presented to a meeting of all partner Boards on the 23<sup>rd</sup> October 2015. The meeting was positive and all partners expect to formally adopt the SOC through their own Boards over the coming weeks.

There was also a meeting with lead directors from the tripartite – NHS England, the Trust Development Agency and Monitor - in the middle of October to review progress and consider next steps following approval by Boards of the SOC. Again this meeting was positive and they were supportive of our approach and progress. We are awaiting the formal write up from them of the meeting.

### 1.2 Our Annual General Meeting

We held a very successful AGM in September which around 200 people attended. I would like to thank everyone involved in putting this excellent event together and generating such interest among the public.

### 1.3 Primary Care Co-Commissioning

As the Board are aware we started co-commissioning with NHS England for GP services in April of this year. The latest issue the Co-commissioning Board has been dealing with is whether or not the CCG should take on full delegated commissioning responsibility. After much discussion at localities, among the Executive team and with the Co-commissioning Board members it was agreed that we should recognise that this is the direction of travel but that we should not move to this in April of next year. We will discuss the pros and cons of full delegation as we learn from others who are already doing this over the next few months. If we wish to progress in that direction for April 2017 we will make that recommendation to the membership over the summer of 2016 and hold a member practice vote.

**The Board is requested to formally ratify the recommendation it approved remotely that the CCG should not move to delegated primary care commissioning arrangements prior to April 2017.**

### 1.4 Joint Executive with Herts County Council

As part of the governance arrangements with Herts County Council of the Better Care Fund we have established a joint Executive which has started to meet three monthly. The early sessions have focused on how we will work together to really develop integrated commissioning and a joint work programme has been produced. At the last meeting in October we discussed YCYF and agreed that we really need to ensure we have a collective commissioning response to this and that we should therefore engage with external partners who are leading the way on joint commissioning to help us

develop the required shared culture, values and priorities at pace. We have approached the Kings Fund to assist with this.

I will bring a formal report to the Board from these meetings in future.

## **1.5 Health and Wellbeing Board**

Nicolas and I regularly attend the three monthly Health and Wellbeing Boards. At the last meeting we discussed the real progress being made on some aspects of joint work around children's services but also discussed the work all partners across Hertfordshire have agreed to do to improve our collaborative working across children's services commissioning in general. NHSIQ, who have been working with ENH CCG, has started a programme of work with all children's commissioning managers and officers across HCC and the two CCGs which has been well received, and the CCG CEOs and HCC CEO and relevant Directors and our senior teams are also holding a facilitated meeting next week to ensure we are collectively providing the right leadership to really drive this forward for the children of Hertfordshire. On a very positive note the Children's and Young Peoples work, which I now chair, is progressing very well under the leadership of the two CCG children's commissioning managers. I would really like to thank Liz Biggs and Kate Barker for their hard work and commitment on this topic.

The Health and Wellbeing Board also discussed some very useful public health issues around planning and place and the carers strategy, all of which we are actively engaged in. The Board also received and endorsed an update on YCYF. The Health and Wellbeing Board Strategy is being updated and organisations are now getting involved in this development. Simon Eckett will lead this for HVCCG.

## **2. Operational Issues**

### **2.1 NHS England Area Team – Assurance**

We had our first quarterly assurance meeting of 2015/16 with NHS England in October. The meeting focused on operational target delivery, our financial position and the WHHT CQC position with some discussion on YCYF. We await the written outcome of the meeting. A couple of days before the meeting we received our final 2014/15 assurance letter confirming that in 2014/15 we were 'assured with support'. The ratings scale for 2015/16 has changed slightly and we will not get a final assessment now until the end of the year.

### **2.2 Carers Update - WHHT**

We are working closely with WHHT on a number of carer related projects:

#### **Carer Friendly Hospital Project**

Interviews are now completed and the project manager post has been offered. It is expected that the recruitment phase of this project will be completed within the next few weeks with a project start date sometime in November.

## **Frequent Attenders**

We are scoping a project to reduce frequent attenders to the hospital with mainly social care, system default / place of safety. The detail and methodology will be determined in line with the Cornwall project, over the next couple of weeks, and an expected start date of early November. We are also incorporating the learning from a similar RAID project to ensure the project achieves maximum outcomes and is measured against appropriate baselines.

## **Ward Seminar**

We are utilising the Grand Round forum (education for junior doctors) to promote more effective referral processes and closer working practices between ward staff clinicians and discharge staff. The aim is to establish appropriate referrals to the right place at the right time, first time and to provide a single point of access for consideration of alternative community based services via HertsHelp. The review of the first session is scheduled for the end of October. From this we hope to plan further sessions in line with improving communication and awareness to reduce delays.

## **2.3 Staff development and workforce information**

### **Mandatory training**

The CCG's compliance in all respects of training has decreased from the previous quarter to 82.30%. Reminders on accessing mandatory training is circulated through the Weekly News Roundup, sent to all staff and reminders have gone to Directors.

### **Learning Lunches**

Five learning lunch sessions ran during quarter 2. Topics covered included:

- Reflective Learning
- Bullying & Harassment
- Intro to Business Intelligence, Performance & Information Governance
- Special Educational Needs & Disability Reforms
- Campaign for Clarity

### **Management Development Programme**

The Management Development Programme aimed at Band 6 and 7 staff concluded at the end of quarter 2. Four sessions ran during the quarter. Participants were invited to provide feedback on their experience to their peers and managers. Overall the Programme was positively received.

Other in-house activities delivered included:

- Appraisal Briefing
- Risk Management
- Pre-retirement Seminar
- Risk Management for Managers
- Minute Taking

### **GP and Practice Nurse Development Programmes**

A dedicated Workforce Development Manager has been appointed to co-ordinate and lead this programmes. Currently two candidates are participating in the Practice Nurse Development

Programme. This was launched to create opportunities for expanding capacity in primary care, by offering tailored and flexible placements within General Practice. Three GPs have signed up to the GP Development Programme and have been allocated to Practices.

### **Continual Professional Development – Practice Nurses**

By the end of September 2015 a total of 103 practice staff booked on to Continuous Professional Development courses.

### **The Kings Fund Clinical Leadership Programme**

The King's Fund Programme has been commissioned to run from November 2015 to May 2016 in partnership with Luton CCG. The Programme has been designed to develop aspiring leaders within the CCG and its Member Practices, in the context of specific challenges within the healthcare system. Applications are subject to shortlisting and places are to be offered to a maximum of fifteen successful candidates.

## **2.4 Staff wellbeing**

The Wellbeing campaign is now in the autumn/winter phase. Recent campaigns include Alzheimer's awareness, in which the Alzheimer's Society visited Hemel One to provide a 'drop in' advice and support Service to staff. The stop smoking campaign 'Stoptober' was promoted with resources and information made available to staff. In recognition of World Mental Health Day, staff were given access to various resources and encouraged to 'make a pledge' to change their lifestyle to support their wellbeing. There was a very big drive with flu awareness which saw enormous success – our thanks go to Kevin Barratt who recently attended Hemel One to conduct in excess of 60 staff flu vaccinations.

Forthcoming campaigns include alcohol awareness, advice for a good night's sleep and a campaign to having a healthy Christmas.

The Wellbeing Champions will soon be reviewing the Wellbeing campaign for 2015 which will include obtaining staff feedback, after which they will work with the Staff Involvement Group to formulate the 2016 Wellbeing campaign.

## **2.5 Digital Road Maps**

The Five year Forward view made a commitment that by 2020 the NHS would be fully paperless and have interoperable electronic paper records. The first step of this process is for our health economy to develop 'local digital roadmaps' that are CCG led and will show how this will be achieved within Hertfordshire. We will work in conjunction with ENHCCG, HCC and all of our key providers to develop these roadmaps. We have already completed the first step of this process by submitting a countywide foot print document that shows the providers we will be working with and the governance structure this will work within to ensure that the Health and Wellbeing board have oversight of this workstream. Although ourselves and ENHCCG have different approaches to the interoperability challenge we are clear that, in the interests of patients and providers, we must work together on defining solutions to these challenges and the roadmap work will give us a framework to allow that to happen. As of 2016/17 digital roadmaps will be part of our planning process and assurance framework so it is vital we engage with all appropriate parties to ensure we have a strategy that delivers the Five Year Forward View. Within HVCCG 'Your Care, Your Future' demands that we deliver this agenda as without interoperability we will struggle to meet the needs of the new

models of care meaning how care is delivered will not change. Digital Roadmaps give CCGs the mandate to lead this workstream and ensure that, as a health economy, we deliver the desired outcomes.

### 3. Commissioning Executive Committee

#### Key areas of discussion and decisions made

Four meetings have taken place since the last CCG Board meeting and a summary of main areas of discussion and decisions is shown below:

- Quality outcomes, with a particular emphasis on recent provider CQC reports
- Performance against standards required by the NHS Constitution
- Financial performance and QIPP delivery
- Family safeguarding in Hertfordshire, which is part of the national innovation programme
- Policy to support clinicians in leadership roles in the CCG, to ensure clinical leadership is harnessed appropriately to drive the delivery of our overall strategy
- Approval of Hertfordshire’s multi-agency carers strategy
- Review of Hertfordshire Community NHS Trust Clinical Strategy 2015/16 to 2020/21
- Approval for the CCG to sign up to the National Wheelchair Alliance Charter
- Review of adult learning disabilities pathway
- NHS 111 and Out of Hours Update
- National winter pressures campaign
- Refreshing the Body Mass Index (BMI) threshold policy
- Update on the review and redesign of the Herts Equipment Service
- Approval to continue with procurement of the diagnostics element of the community cardiology pathway
- Review of CCG approach to practice clinical systems
- Review of Hertfordshire Community NHS Trust IM&T Strategy
- Approval to operate the Borehamwood Out of Hours base at Tier 2 level
- Review of the CCGs process to ensure implementation of NICE guidance
- Approval of Business Case for Postural Stability Classes to reduce the number of falls

#### Terms/Acronyms used in report

HVCCG	Herts Valleys Clinical Commissioning Group
SOC	Strategic Outline Case
YCYF	Your Care Your Future
ENH CCG	East & North Herts Clinical Commissioning Group
HCC	Herts County Council
CQC	Care Quality Commission

RAID	Rapid Assessment Interface & Discharge
IM&T	Information Management & Technology
NICE	National Institute for Clinical Excellence