

**NHS Herts Valleys Clinical Commissioning Group**  
**Board Meeting**  
**November 5<sup>th</sup> 2015**

<b>Title</b>	Locality Committee Reports Q2 2015/16	<b>Agenda Item: 13</b>
<b>Purpose (tick one only)</b>	Approval <input type="checkbox"/>	Discussion <input type="checkbox"/> Information <input checked="" type="checkbox"/>
	Consideration <input type="checkbox"/>	Noting <input type="checkbox"/>
<b>Responsible Director(s) and Job Title</b>	Simon Eckett, Director of Strategy, Planning and Delivery	
<b>Author and Job Title</b>	Caroline Humphreys, AD Localities and Primary Care Development	
<b>Recommendations/ Action Required by the Board</b>	<p>This report is an update on work undertaken by Localities in line with the terms of reference of Locality Commissioning Committees.</p> <p>The Board is asked to receive the reports from the four Localities.</p>	
<b>Classification</b> <i>Is this report exempt from public disclosure? (ie. FOIA or DPA)</i>	No	
<b>Impact on Patients/Carers/Public</b>	The work undertaken by the Locality Committee will have a positive impact on patients, carers and the public by ensuring their voices are heard and their needs are being met through the commissioning process.	
<b>Engagement with Stakeholders/Patient/Public</b>	Engagement with patients, the public and stakeholders is a key feature of the work of the Locality Committees which is evidenced through the end year reports.	
<b>Links to Strategic Objectives</b>	<ol style="list-style-type: none"> <li>1. We will continually improve engagements with member practices, patients, the public and carers to contribute to and influence the work of Herts Valleys CCG.</li> <li>2. We will commission safe, high quality services that meet the needs of the population, reducing health inequalities and supporting local people to avoid ill health and stay well.</li> <li>3. Work with health and social care partners to transform the delivery of care through the implementation of "Your Care, Your Future", the Strategic Review in West Hertfordshire.</li> <li>4. We will ensure that there is a financially sustainable and affordable healthcare system in West Hertfordshire.</li> </ol>	
<b>Board Assurance Framework</b> <i>Does this report provide evidence of assurance for the Board Assurance Framework?</i>	All BAF Risks Apply	
<b>Does this report mitigate risk that is included in the Corporate Risk Register?</b>	<p>This report relates to the following corporate risks:</p> <ol style="list-style-type: none"> <li>1. SO1/04 - SO1/26 ( engagement risks)</li> <li>2. SO2/01 – SO2/ 28 (commissioning risks)</li> <li>3. SO3/02 – SO3/08 (Your Care Your Future risks)</li> <li>4. SO4/03 – SO4/27 (finance risks)</li> </ol>	
<b>Resource Implications</b>	None	

<b>Equality and Diversity</b> (Has an Equality Analysis been completed?)	No
<b>Legal/Regulatory Implications</b>	None
<b>Sustainability Implications</b>	None
<b>NHS Constitution</b>	Supports the NHS Constitution
<b>Report History</b>	Locality update reports have been presented to the Board throughout the year.
<b>Appendices</b>	None

## 14.1 Dacorum locality

Reporting areas		Dacorum Locality
1	Advising HVCCG Board of Locality priorities	<ul style="list-style-type: none"> <li>Regular updates provided following the Dacorum Commissioning Committee via this report</li> </ul>
2	Advising members in the Locality of the work of the committee	<ul style="list-style-type: none"> <li>Hot Topics event on 14.10.2015 updating member GPs and practice managers of locality intentions</li> <li>Dacorum Commissioning plan meeting held on 07.10.2015 for all member practices, practice managers and patient representatives</li> <li>Ad-hoc telephone and email contact from the locality team to advise of priorities</li> </ul>
3	Consulting the Locality members on behalf of HVCCG Board	<ul style="list-style-type: none"> <li>Dacorum Commissioning plan meeting was held on 07.10.2015 for all member practices, practice managers and patient representatives. All attendees were advised of future intentions, asked for feedback and advised how they can submit their suggestions following the event</li> <li>Updates provided at formal events such as Hot Topics and via ad hoc email contact</li> </ul>
4	Supporting HVCCG Board deliver CCG objectives	<ul style="list-style-type: none"> <li>Implementing YCYF and consulting with all stakeholders to advise via patient events and internal meetings and through the MPCA and LIS.</li> <li>Ensuring practice work programmes and work areas are aligned to HVCCG objectives e.g. Practice action plans highlighting areas where quality and improvements can be made with particular regard to areas highlighted as problems in the practice performance reports</li> </ul>
5	Supporting members of the Locality to engage with HVCCG	<ul style="list-style-type: none"> <li>Hot Topics event held on 14.10.2015 was very successful with practice members attending</li> <li>Practice visits have also been taking place to meet with all members of practices and listen to and resolve concerns as well as providing CCG updates</li> </ul>
6	GP, Practice and Patient engagement	<ul style="list-style-type: none"> <li>Practice visits have also been taking place to meet with all members of practices and listen to and resolve concerns as well as providing CCG updates</li> <li>Hot Topics event as part of the MPCA</li> <li>Dacorum Commissioning plan meeting</li> <li>Regular informal contact with all parties via telephone, email and face to face</li> </ul>
7	Participation and engagement with other Localities on the development of HVCCG Commissioning plans	<ul style="list-style-type: none"> <li>CCG wide event (GP Forum) held at the beginning of the month to allow all member practices to come together and discuss concerns/views</li> <li>Dacorum Holistic Healthcare service is now fully recruited to and the service will begin on Dec 1<sup>st</sup>. A launch presentation will be given at the next Hot Topics event to ensure that all practices are aware. This is also discussed at our locality meetings to ensure that patient reps are aware and up to date.</li> </ul>
8	Development of Locality plans within overall context of HVCCG	<ul style="list-style-type: none"> <li>4 work streams have been identified as a priority for Dacorum. Each work stream has a clinical lead and are meeting regularly to progress.</li> </ul>
9	Participation in the development of clinical pathways in accordance	<ul style="list-style-type: none"> <li>Dacorum are currently welcoming applicants from member GPs for the clinical reference group. Once these positions have been recruited to there will be significant input into the development of pathways</li> </ul>

Reporting areas		Dacorum Locality
	with best practice	
10	QIPP	<ul style="list-style-type: none"> <li>• All practices are advised of the QIPP agenda at practice visits and a slot was given to the AD for QIPP at this months Hot Topics event. This gave practices the opportunity to seek clarity, raise concerns and understand the impact they can have</li> <li>• QIPP updates are a standing item on our DCC agenda</li> <li>• Transformation Progress report circulated on a monthly basis</li> <li>• Practices are encouraged to use the QAS and quality team also attend the locality meetings to provide updates</li> </ul>
11	Performance Reports	<ul style="list-style-type: none"> <li>• All practices are issued with performance reports to align with their action plans. These reports are discussed at practice visits and monitored on a monthly basis by the CCG</li> <li>• Standing agenda items for finance and quality on DCC agenda</li> </ul>

## 14.2 Hertsmere

Reporting areas		Hertsmere Locality
1	Advising HVCCG Board of Locality priorities	The Locality Plan on a Page has been amended to reflect the new Public Health priorities published in June 2015. There are two 'red' areas in Hertsmere: 'Statutory Homelessness' and 'Killed or Seriously Injured on roads'
2	Advising members in the Locality of the work of the committee	In Hertsmere all practices attend the Locality Commissioning Committee and send both the Practice Manager and a GP. Therefore on a monthly basis we have opportunity to share work and activity across all practices first hand. The locality team also meets with the practice managers each month and once every three months the team meets with a smaller cluster of practices on a rotating basis.
3	Consulting the Locality members on behalf of HVCCG Board	At each Locality Commissioning Committee there is a standing item which is for an HVCCG update. Both our HVCCG Board members attend the Locality Commissioning Committee and provide a verbal update. In addition the chair of the Locality provides a verbal update and goes through the locality briefing paper.
4	Supporting HVCCG Board deliver CCG objectives	At the Locality Commissioning Committee guests from the CCG provide updates about locality actions required to meet CCG objectives. We also have a standing update on finance and contracts. At practice visits issues are raised by practices and the locality teams to support delivery of objectives. We also hold TARGET events and in October, for example, held a session on dementia awareness which was attended by 120 practice staff.
5	Supporting members of the Locality to engage with HVCCG	Members are encouraged to engage through the Locality Commissioning Committee; through becoming a clinical lead or engaging with other committees such as the Co-commissioning committee; by attendance at the GP forum; through supporting the delivery of the Locality Plan.
6	GP, Practice and Patient engagement	GP engagement happens at a number of levels as stated above. Practice Manager engagement is on a daily basis through responding to queries and through sharing information as well as the practice managers meeting. We also held a joint practice induction for all nine practices – to cover topics for new members of the practice team. A second induction is planned for the new year. The locality team meets monthly with the patient group, which has representatives from a number (although sadly not all) of practices. Patient representatives attend the Locality Commissioning Committee as well as the sub-committees.
7	Participation and engagement with other Localities on the development of HVCCG Commissioning plans	The locality team works at many levels with other localities including at the HVCCG Board and its committees; through the Commissioning Executive; through Interloc (the inter-localities meeting); at CLO and support officer level via twice monthly meetings. The locality team has been involved with Your Care Your Future and we have held locality events on the developing strategy. The proposed Hub in Borehamwood has been the focus of a great deal of activity recently and this is a key delivery vehicle for Your Care Your Future proposed future models of care across the eight population segments identified.
8	Development of Locality plans within overall context of HVCCG	The Locality Delivery Plan is in the final draft stage and reflects the CCG priorities across urgent care, planned and primary care, children, young people and maternity, and mental health and learning disabilities as well as also addressing working with our partners in Hertsmere to address our Public Health priorities.
9	Participation in the development of clinical pathways in accordance with best practice	We have clinical leads representing the locality across the CCG workstreams (urgent care, planned and primary care, children, young people and maternity, and mental health and learning disabilities), a lead for cancer and also provide leads for shorter 'task and finish' activities e.g. baby jaundice. Our leads are expected to report back through the Locality Commissioning Committee and will also feed in locality views and issues to developing care pathways.
10	QIPP	The locality officers attend the CCG QIPP meetings and QIPP is discussed at the Locality Commissioning Committee under the financial updates.

Reporting areas		Hertsmere Locality
		The QIPP person at the CCG is being invited to attend a Locality Commissioning Committee in the near future.
11	Performance Reports	Performance reports are discussed in the locality at a number of levels: the locality sends a representative to the Quality and performance Committee and briefs the locality team about any significant issues; there is a standing item at each Locality Commissioning Committee on quality where performance reports are received quarterly from the quality team at the CCG; performance is also discussed at each practice visit using the performance packs. At the Locality Commissioning Committee we periodically also scrutinise smoking data; Chlamydia data; and other data such as GP access information.

### Item 14.3 St Albans and Harpenden

Reporting areas		St Albans and Harpenden Locality
1	Advising HVCCG Board of Locality priorities	Working in partnership with Children's Centre to reduce A&E Attendances in 0-4yrs age group. Increasing uptake of patients within a certain age group who have not returned their Bowel Cancer screening kits which might help detect early diagnosis of the condition.
2	Advising members in the Locality of the work of the committee	Various routes of communication either face to face, via email, encouraging Practices to register for our Intranet complimented by our Locality Engagement Portfolio. For example attending PM meetings, MH/LD Forums/LCCs/YCYF Stakeholder events and Practice visits.
3	Consulting the Locality members on behalf of HVCCG Board	Ensuring clinical programmes, service redesign and key workstreams are discussed within our Locality Engagement Portfolio (LEP) to raise awareness and to ensure clinical programmes receive Locality feedback and aspirations. For example, Accountable Lead Provider –Gynae Procurement, Rapid Response, MSK service redesign, AQP Counselling service provision, YCYF, Co-Commissioning, NHS111/GPOOH GP Services and CAMHS Review
4	Supporting HVCCG Board deliver CCG objectives	Through our LEP, MPCA, LIS. Ensuring work programmes and work areas are aligned to HVCCG objectives e.g. Practice action plans reflecting high volume areas where quality and improvements can be made, working in partnership with Children Centres to raise awareness of 0-4yrs A&E attendances, peer to peer education on Dementia/IAPT. Ensuring all Practices attend PC Cardiology upskilling
5	Supporting members of the Locality to engage with HVCCG	As above through our LEP, providing opportunities via GP Forums, TARGET events, Conversation Cafés, YCYF Stakeholder events, Practice visits, having local GPs as Clinical leads for HVCCG Clinical Programme areas and CRG membership
6	GP, Practice and Patient engagement	Over the past few weeks, our Locality Chair has attended various meetings with our Patient and support groups to ensure YCYF has taken on board and incorporated patients' views and aspirations. A very strong message from our patient groups is the potential for an SACH Urgent Care Centre /enhanced MIU. Also to have more planned care delivered on this site, as well as retaining some in patient services.
7	Participation and engagement with other Localities on the development of HVCCG Commissioning plans	This is a new area for our Locality, recently taking on board Watford and 3 Rivers (W&3R) partnership working with Children's centres. Rapid Response is imminently being rolled out to our Locality following successful implementation of service provision in Hertsmere and W&3R
8	Development of Locality plans within overall context of HVCCG	Demonstrated in areas of this report and will also be underpinned by outcomes of the developing YCYF strategies and clinical models of care.
9	Participation in the development of clinical pathways in accordance with best practice	Locality attended workshop in February for the rollout of the four high volume Paediatric pathways. October saw the rollout of the Enhanced Respiratory pathways, involvement in the Diabetes Foot pathway through the HVDCG and been made aware of potential new pathways coming from the MSK service review which is currently underway
10	QIPP	QIPP updates standard at LCCs, Transformation Progress report circulated. Transformation and QIPP workshop planned for 19 <sup>th</sup> November LCC. BI updates giving information on sanctions and challenges applied to Acute Trusts especially where HVCCG is the Lead Commissioner. Presentation on DXS, Practices encouraged to use the QAS, as well as the RIF service where it is hoped that advice received via this route may help to keep patients in a Primary Care or Community setting and not a referral into secondary care.
11	Performance Reports	Both Finance and Quality Leads regularly attend LCC to provide updates and expertise for these areas.

#### 14.4 HVCCG Board – Watford and Three Rivers

Reporting areas		Watford & Three Rivers Locality
1	Advising HVCCG Board of Locality priorities	Bi- monthly reporting via this document.
2	Advising members in the Locality of the work of the committee	Updates by Exec GP at Monthly Local Management Group (LMG), topics include Mental Health update. LMG agenda items align with HVCCG commissioning strategy and work streams to keep GPs informed of developments and ‘direction of travel’. Weekly GP email highlights topical issues and opportunities to engage with pathways work for example OOHs procurement and WGH UCC re-design working group.
3	Consulting the Locality members on behalf of HVCCG Board	10 <sup>th</sup> September, Your Care Your Future event discussing Models of Care, attendees included practice nurses and ‘jobbing GPs’, District Council and programme lead, as well as Commissioning leads. Delegated Commissioning update 8 <sup>th</sup> October.
4	Supporting HVCCG Board deliver CCG objectives	Supporting roll out of Living Well programme.
5	Supporting members of the Locality to engage with HVCCG	<b>14/27 Practice Visits</b> already completed, these have been successful to date as a result of productive conversations on a range of matters. Actions and feedback for contracting teams feature significantly, as do ideas for commissioning new services. These are all are being collated for a FAQ sheet to support ongoing visits and future commissioning intentions. The SLT representation has helped practices to understand the bigger picture. <b>GP Elections</b> , three current locality clinical leads re-elected for further two year tenure.
6	GP, Practice and Patient engagement	<b>Locality Patient Group</b> in August featured Your Care Your Future progress; 7 October Agenda item , Medicines Management wastage, patient reps very keen to support and take back to their own practice groups. September 19 <sup>th</sup> <b>Watford Big Family Sports Day</b> in town centre, we hosted a Health zone providing 106 mini health checks to passers-by, supported by Health Watch, Macmillan Support, Smoking Cessation , Slimmer’s World, Shape Up, Children’s Centres staff, local GPs, a PM , HVCCG WCL Locality team , Comms lead and patient representatives.
7	Participation and engagement with other Localities on the development of HVCCG Commissioning plans	Developing the Increasing Capacity monitoring framework to standardise across the three localities that are using this funding to provide additional appointments over the winter period. Interloc meeting- localities working more collaboratively areas discussed.
8	Development of Locality plans within overall context of HVCCG	A Task & Finish Group for development of plans for South Oxhey Hub has been initiated, mapping health needs and current services in order to identify gaps. There are already expressions of interest from local practices and partners to work collaboratively on an integrated model. Work has also started on identifying areas of work for 2016/17 such as pathway re-design that will instruct commissioning intentions for Sept 2016/17. We are supporting the roll out of TB screening to 10 practices in the locality with a higher prevalence of latent TB.
9	Participation in the development of clinical pathways in accordance with best practice	The locality’s priority is a Whole systems approach to reducing Paediatric attendances at A&E, though a variety of initiatives. Practices will use Increasing capacity funding for on the day urgent appointments for children from 4pm. And are also supporting the use of the Paediatric High Volume pathways.
10	QIPP	QIPP lead Annette Keen presented ‘Progress with QIPP – a GP perspective to the Local Management Group on 8 Oct LMG. Reminding GPs that the WCL locality paediatric pathways work , partnering with children centres, Minor Illness educational sessions and focused

Reporting areas		Watford & Three Rivers Locality
		additional appointments from 4pm supports a QIPP work stream.
<b>11</b>	Performance Reports	Quarterly contract and Quality lead review on the agenda for Locality Committee 22 <sup>nd</sup> October