

Report To:	Governing Body 9 April 2015
Title of Report:	Chief Officer's Report
FOI Exemption Category:	Open
Responsible Officer:	Matt Walsh Chief Officer
CCG Lead:	Matt Walsh, Chief Officer
Report Author and Job Title:	Matt Walsh, Chief Officer
Executive Summary:	This report updates the Clinical Commissioning Executive on current pertinent issues.
Finance/Resource Implications:	We will work at all times to ensure "Best Value" in the commissioning and delivery of services.
Risk Assessment:	We will work at all times to minimise any risks inherent in the delivery of commissioning of healthcare.
Legal Implications:	We act at all times to be compliant with existing legislation.
Health Benefits:	We work at all times to ensure the delivery or commissioning of clinically effective healthcare for the people of Calderdale and to promote health improvements and minimise health inequalities.
Staffing/Workforce Implications:	We work in compliance with the NHS Human Resources Framework.
Outcome of Equality Impact Assessment:	n/a
Sub Group/Committee:	None

New Care Models Programme - Vanguard

I am delighted to be able to inform the Governing body that Calderdale has been selected as one of 29 national Vanguard sites. This recognition is a testament to the work that we have been doing as an organisation and as a system through the lifetime of the CCG and opens up a major opportunity to bring in and share learning from others. The Vanguard bid was presented on behalf of the CCG, CHFT, the Pennine GP Federation and the local Authority. Our bid was constructed with the intention of using Vanguard to help us to define more clearly organisational forms which might more effectively deliver integrated care. Our bid was clear about our continued expectation that we will be supported in our ambition to work collaboratively across this system to create future models of care.

As part of our early work on this programme, we are anticipating a visit from the national team. I will ensure that the governing body is informed about the dates as we are notified by the national team. I believe that we have much to be proud of, and will ensure that the work that we have done on engagement continues to have a high profile in conversations we are having through Vanguard. We will also need to establish the right leadership arrangements to support this programme. I believe that it is important to regard this initiative as a support and added momentum to our existing work programme rather than something new.

Right Care, Right Time, Right Place: Hospital Services Programme

Calderdale CCG and Greater Huddersfield CCG are working together to set out a future model of care in relation to Hospital Services which reflects their Care Closer to Home Programmes and their Hospital Standards.

We have completed three clinicians' workshops.

- On 20th November, clinicians from both CCGs, considered different models of care (the providers' OBC and the NHS England five year forward view), the standards we want to achieve from our services and agreed that there are a number of potential longer term solutions and that further work and discussion is required before the CCGs will be ready to outline any proposed changes to Hospital Services.
- On 22nd January, clinicians from both CCGs developed Commissioners' thinking regarding the future provision of Hospital services.
- On 24th February senior clinicians from CHFT and both CCGs held a strategic session to bring together our collective thinking to date as CCGs and as a provider to begin to develop what our ideal model for the future provision of hospital services could look like. We agreed that we would continue this collective dialogue in order to reach a position where we could express a consistent view from the local health economy on our future hospital services.
- A further CCG clinicians' workshop is scheduled for 14th April.
- A joint CCG and CHFT clinician's workshop is scheduled for 16th April

The rescheduled development session with members of the Calderdale, Kirklees and Joint Health Overview and Scrutiny Committees was held on 17th March and a formal Joint Health Scrutiny session was held on 25th March. Monitor also presented to this session on their work with CHFT.

Co-commissioning Primary Medical Services

At the time of writing, the CCG remains on course to take on full delegated responsibility for Primary Medical services contracts on 1st April 2015. There is a considerable amount of work ongoing to ensure that the terms upon which that delegated responsibility operates are clear and that the agreement operating between NHS England and the CCG is legally sound on both sides of the relationship. Through all of the protracted discussions and negotiations on this, it has been important to hold onto the purpose behind the CCG governing body's decision to take on this additional responsibility. The opportunity to create a different conversation between Primary Medical Service providers in Calderdale and their commissioners to ensure that Calderdale patients benefit from high quality and resilient primary medical services moving forward. There are major opportunities to connect the conversations we are having about system change through Care Closer to Home and the Hospital Change programme with the work that we will be doing to strengthen primary care.

Better Care Fund

The Section 75 legal agreement, which underpins the Better Care Fund arrangements for 2015/16, has now been approved by NHS Calderdale Clinical Commissioning Group, Calderdale Metropolitan Borough Council and the Calderdale Health and Wellbeing Board. The CCG's approval was obtained under the delegation arrangements agreed at the Governing Body meeting on 12th February 2015. The Better Care Fund Programme Board and its supporting Better Care Fund Operational Commissioning Group will ensure effective oversight of the Plan and escalation as necessary into the Governance structures of the CCG and Council.

Through the National Better Care Fund Programme we have been offered support to further progress the review of the Health & Well Being Board and the governance arrangements which could underpin integrated strategic commissioning. We are taking up this opportunity to enable us to look at arrangements which are in place or under discussion in other areas and to learn from those developments.

CSU

The Yorkshire and Humber CSU has been unsuccessful in its bid to achieve a place on the Lead Provider framework. This is disappointing news for all Yorkshire and Humber CCGs and marks a requirement to move to new arrangements for support to our commissioning functions. NHS England has created a Transition board to enable Y&H CCGs to work with NHS England to agree those processes. We have agreed that a paper will be developed over the forthcoming couple of weeks, which will describe the governance arrangements, the work programme and the risks and issues relating to this agenda. There is a clear acknowledgement by all involved that we need to work to a common set of principles:

- All 23 Y&H CCGs are working together.
- Clarification is required quickly on a number of areas to enable further progress to be made.
- The aim is to provide sustainable services for all CCGs whilst being mindful of costs across the whole system and the implications upon CSU staff.
- Decisions to 'do, share and buy' will be made to the CSU Transition Board by the 31st March 2015. By this time, further clarity will be available regarding the timeline for implementation.
- All committed to supporting staff through the transition.

Q3 Assurance

As part of the ongoing assurance process of CCG, we will be discussing the progress we have made since Q2 as part of the Q3 update with NHS England. The main focus will be on the 6 domains of the assurance framework:

- Are patients receiving clinically commissioned, high quality services?
- Are patients and the public actively engaged and involved?
- Are CCG plans delivering better outcomes for patients?
- Does the CCG have robust governance arrangements?
- Are CCGs working in partnership with others?
- Does the CCG have strong and robust leadership?

Representatives from the CCG will be meeting the Supporting documentation is in the normal format with 6 domains and we will be submitting progress against each of these and describing the actions we are taking.

NHS England is also pursuing updates on 4 Key Lines of Enquiry as part of the Q3 update. This includes parity of esteem, health inequalities, integration including BCF and Delayed Transfer of Care – all key areas of focus for the CCG.

Public Health Responsibility Deal

The Staff Forum, on behalf of Calderdale CCG, has signed up to the Responsibility Deal core commitments and supporting pledges and the Health & Wellbeing collective Pledge. There is representation from each team and they meet monthly and provide opportunities for staff to hear about and discuss matters that affect their working experience, and to influence decisions made.

Through the Health & Wellbeing Pledge the Staff Forum have committed to improving the work life balance of their colleagues in the CCG. A number of activities have been arranged over the last year from pedometer challenges to 'round the world' cooking competitions and a number of charity events.

One Year Operational Plan Update

Development of the CCG's One Year Operational Plan for 2015/16 is at an advanced stage. The plan is important as it provides the basis from which we can share out plans with the public and our stakeholders. It also provides NHS England with assurance that our planning is robust and fit for purpose.

A high level view of the Plan was shared at our Governing Body and at the Health and Wellbeing Board in March 2015. Detailed content has been shared with our Governing Body in Development mode and at a staff workshop. These discussions provided an opportunity to strengthen the Plan and ensure it is truly reflective of our priorities. We have also received a small amount of feedback from NHS England on areas where we need more detail. The Plan is currently being updated and will be submitted to NHS England on 7 April, after which a communication plan will ensure that it is shared with a wide range of our stakeholders.

Noting delegation of authority to the Audit Committee for the approval of the annual report and annual accounts

Clinical Commissioning Groups are required to publish as a single document their Annual Report and Accounts.

The timetable for submissions this year is:

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| 12 noon 23 rd April 2015 | A full draft, as approved by the Chief Officer and the Chief Finance Officer, passed to the appointed auditors. |
| 12 noon 29 th May 2015 | Final Annual Report and Accounts submitted to NHS England.

Publication on the CCG's website. |

The Governing Body is asked to note that in line with the CCG's Constitution and Scheme of Delegation, authority is delegated to the Audit Committee for the approval of the full annual report and accounts. This enables the CCG to complete the production and necessary approvals within the required timescales.

In order to ensure full transparency in the process, all Governing Body members will be invited to the Audit Committee meeting on the 14th May when they carry out a 'page turn' exercise to review the draft Annual Report and Accounts.

Healthy Futures Programme Highlight Report

I have appended the March Update on the Healthy Futures Programme to this report.

Dr Matt Walsh
Chief Officer