


<b>Item Number: 5</b>	
<b>Name of Presenter: Phil Mettam</b>	
<b>Meeting of the Governing Body</b> <b>3 November 2016</b>	 <b>Vale of York</b> <b>Clinical Commissioning Group</b>
<b>Accountable Officer's Report</b>	
<b>Purpose of Report To Receive</b>	
<b>Rationale</b> <p>To provide an update on a number of projects, initiatives and meetings which have taken place since the last Governing Body meeting and any associated, relevant national issues.</p>	
<b>Strategic Priority Links</b> <input type="checkbox"/> Primary Care/ Integrated Care <input type="checkbox"/> Planned Care/ Cancer <input type="checkbox"/> Urgent Care <input type="checkbox"/> Prescribing <input type="checkbox"/> Effective Organisation <input type="checkbox"/> Financial Sustainability <input type="checkbox"/> Mental Health/Vulnerable People	
<b>Local Authority Area</b> <input checked="" type="checkbox"/> CCG Footprint <input type="checkbox"/> East Riding of Yorkshire Council <input type="checkbox"/> City of York Council <input type="checkbox"/> North Yorkshire County Council	
<b>Impacts/ Key Risks</b> <input type="checkbox"/> Financial <input type="checkbox"/> Legal <input type="checkbox"/> Primary Care <input type="checkbox"/> Equalities	<b>Covalent Risk Reference</b>
<b>Recommendations</b> <p>The Governing Body is asked to note the report.</p>	
<b>Responsible Chief Officer and Title</b>  Phil Mettam, Accountable Officer	<b>Report Author and Title</b>  Sharron Hegarty, Head of Communications and Media Relations



## **GOVERNING BODY MEETING: 3 NOVEMBER 2016**

### **Accountable Officer's Report**

#### **1. CCG's Financial Position 2016-17 and Turnaround progress**

- 1.1 The CCG is operating under Legal Directions issued by the NHS Commissioning Board (NHS England) and which were effective 1 September. The CCG submitted an Improvement Plan to NHS England in line with the Legal Directions on 6 October and is awaiting formal feedback. The CCG is developing a wider Medium Term Financial Strategy and the first draft of the 2017/2019 Financial Plan is due to NHS England on 1 November in line with the national timetable. These will set out the actions required to operate within its annual budget for the financial year 2017/18 and thereafter, as required by the Directions.
- 1.2 The Improvement Plan included an updated risk assessment of QIPP plans and other mitigations, which increased the risk adjusted 2016/17 forecast deficit to £24.1m and this is the position that is reflected in the financial performance report for the end of September. The plan also outlines a number of measures to deliver the planned deficit of £13.3m in 2016/17 and the CCG is working with all partner organisations to close the remaining gap.
- 1.3 The year to date financial position at the end of September is £8.29m worse than planned. Key areas of pressure are acute contracts with hospital providers, continuing health care and high-cost mental health placements outside of the main mental health contract. The CCG is forecasting a year end deficit at the end of September of £17.34m which is £3.99m behind plan. There is further unmitigated risk of £6.77m which takes the reported risk adjusted position to £24.1m.

#### **2. NHS England's rating of local cancer services**

- 2.1 Local cancer services have been rated as one of seven top performing services in country by NHS England.
- 2.2 Based on data published over the last two years, the overall rating for cancer services has been based on four important indicators - early diagnosis, one year survival, 62 day waits after referral, and overall patient experience.

#### **3. Developing a new mental health facility for the Vale of York**

- 3.1 In partnership with Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV), the provider of mental health services in the Vale of York, the CCG is progressing with its work to develop a new facility by 2019 by launching a formal consultation on proposals that include the types of services that will be provided, the proposed number and configuration of beds and information about possible sites.

3.2 The formal consultation events, scheduled to take place across the Vale of York footprint, began on the 24 October 2016. The views and experiences of stakeholders are very important and these will play an essential role in shaping plans for the best possible solution for the facility's service users, their carers and staff.

#### **4. Humber Coast and Vale Sustainability and Transformation Plans (STP) area footprint**

4.1 The STP's financial plan was submitted in early October 2016 and the STP Delivery Plan was submitted on the 21 October 2016.

4.2 The STP has established work-streams covering:

- Urgent and Emergency Care
- Out of Hospital services
- Acute and specialised
- Cancer
- Mental Health
- Strategic Commissioning
- Primary Care

The CCG has representation on each of these work-streams and work that focuses upon the Scarborough, Ryedale and the Vale of York locality. A key focus of this work has been the establishment of the financial position across the locality and this has informed the development of the CCG's Financial Recovery Plan.

4.3 The CCG is engaged in planning discussions for 2017-18 and 2018-19 through the STP locality and work-streams.

4.4 The Council of Representatives has endorsed the required changes in the NHS Vale of York Constitution to allow for the formal establishment of the Joint Commissioning Committee for the Sustainability and Transformation Plan footprint.

#### **5. Council of Representatives**

5.1 At its latest meeting on the 20 October 2016, the CCG's membership discussed the formation of a CCG Clinical Executive that will concentrate on the development and invigoration of the organisation's clinical work. Members also received an update on the CCG's Improvement and Financial Recovery Plan.

## **6. Emergency Preparedness, Resilience and Response**

- 6.1 The CCG's self-assessment against the Emergency Preparedness, Resilience and Response (EPRR) core standards provided 'substantial' assurance that the organisation is resilient and has the ability to provide safe patient care in an emergency situation. The self-assessment rating was approved by the Governing Body on 6 October 2016 and submitted to NHS England.
- 6.2 Following the Local Health Resilience Partnership meeting on 15 September 2016, the CCG's EPRR Lead met with partners to agree roles and responsibilities for responding to health protection incidents or a community disease outbreak. Work continues to confirm the lead commissioners and the teams responsible for providing staff to vaccinate children and adults in North Yorkshire and York.

## **7. Winter**

- 7.1 In line with NHS England guidance, it has reduced the number of Resource Escalation Action Plan (REAP) levels from six to four new Escalation levels:
- Steady State
  - Moderate pressure
  - Severe pressure
  - Extreme Pressure

The Escalation Plan was approved by the Urgent Care Working Group in October 2016. It will be discussed at the newly created A&E Delivery Board in November 2016.

- 7.2 To provide extra cover and resilience over the winter months, the CCG is working on increasing the amount of personnel on its on-call rota.

## **8. Better Care Fund**

- 8.1 The first quarterly returns for 2016-17 Better Care Fund plans were submitted at the end of September 2016. Quarterly monitoring has highlighted challenges in linking interventions to outcomes, such as a reduction in non-elective admissions. This is because, on its own, the Better Care Fund cannot deliver improved performance and it should be aligned, and recognised as part of the wider system's approach to delivering health and care.
- 8.2 Partners are developing a report that covers Better Care Fund performance across the whole population which can inform discussions with the relevant Health and Wellbeing Boards.

- 8.3 Section 75 Agreement has been signed for the York Better Care Fund plan. This sets out the investment and expenditure expected for the year including a risk share between the CCG and City of York Council for some elements of the Fund.
- 8.4 The Better Care Fund plans for North Yorkshire and the East Riding of Yorkshire will be reflected through a variation in the current Section 75 agreements.

## **9. The journey towards Accountable Care**

- 9.1 Agreeing a way forward to achieve an Accountable Care System has been the main focus of recent work with the CCG's partners. Discussions have included taking the positive work of the local Integrated Transformation Board and Provider Alliance Board through a newly established Accountable Care Partnership Board. The proposal includes creating delivery groups that will support the board in its work to develop New Models of Care schemes that best serve the needs of local population.

## **10. Wave One NHS RightCare**

- 10.1 NHS RightCare Programme focuses upon reducing unwarranted variation to improve health and outcomes and make the best use of available resources. It forms a critical part of the local approach and in our work to reduce unwarranted variation in terms of outcomes and expenditure, the CCG, as a Wave One CCG Leader, will be using
- 10.2 NHS RightCare Programme tools and methodology address issues that will continue to be assessed as part of the CCG's Improvement and Assessment Framework.

## **11. National plans and strategic issues**

### **11.1 Patient choice planning and improvement guide published**

NHS England and NHS Improvement have co-developed a CCG choice planning and improvement guide for CCGs to assess how well patient choice is working in the services they commission and where improvement is required. The guide aligns with the Choice Framework published by the Department of Health.

### **11.2 Supporting the Government's Prevent Strategy**

A letter has been sent from NHS England to all CCG Accountable Officers and Executive Nurses seeking support for the Government's Prevent strategy, which aims to reduce the threat to the UK from terrorism. In particular, CCGs have been asked to ensure that NHS mental health providers engage with the legal obligation for health representation on Prevent Channel panels.

### **11.3 CCG 360 degree stakeholder survey 2017**

The annual CCG 360 degree stakeholder survey will be conducted in early 2017. The survey forms part of the CCG annual assessment and provides an opportunity for CCGs, their stakeholders and GP member practices to answer questions about system relationships to enable further progress and improvement, support the local health economy and health outcomes for patients.

### **11.4 Developing mental health services for veterans in England**

NHS England has published a report into the findings from an engagement on NHS veterans' mental health services. Views were received from over 1,270 veterans, their families, services charities, mental health clinicians and other individuals and organisations involved in the care of veterans with mental health difficulties. The findings are now being reviewed, along with the outcome of three pilots NHS England recently funded to test enhanced models of mental health care for veterans, to help inform improvements to current NHS veterans' mental health services and shape future services from April 2017.

### **11.5 Engaging local people on Sustainability and Transformation Plans**

Patients and the public play an important part in the development of local Sustainability and Transformation Plans to improve health and care and deliver the NHS Five Year Forward View. NHS England has published guidance on engaging local people and this builds on engagement initiatives that are already taking place in many parts of the country. The guidance sets out how local areas can ensure people and communities are at the heart of this work through engagement and consultation.

### **11.6 Long Term Conditions Year of Care Commissioning Programme: handbook published**

This publication is the main output of the NHS England Long Term Conditions Year of Care Commissioning Programme, which worked to change the way services are both commissioned and provided so they offer meaningfully, person-centred, coordinated care.

### **11.7 Improving the lives of care home residents and increasing integration of health and care services**

NHS England has published two further common frameworks for local health and care systems wanting to develop and implement new ways of working. The frameworks are based on the learning so far from the primary and acute care system and enhanced health in care homes vanguards to describe the

key elements of both models. The frameworks follow on from the multispecialty community provider merging care model framework and contract which was launched in July 2016.

## **11.8 General Practice Forward View**

NHS England has published the latest measures it is implementing to help general practice cope with increasing demand, boosting GP numbers and tackling burnout as part of the General Practice Forward View. A national £19.5 million NHS GP Health service will be introduced in January 2017, aimed at improving access to mental health support for general practitioners and trainee GPs. In addition, the Induction and Refresher scheme will be revamped to speed up the time it takes for GPs to return to practice in England.

## **12. Recommendation**

12.1 The Governing Body is asked to note the report.