

Chief Officer's Report

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Purpose

This report informs the Governing Body about national/local developments in the past month.

GMS Contractual Arrangements

An agreement has been reached following negotiations between the BMA's General Practitioners Committee (GPC) and NHS Employers (on behalf of NHS England) on changes to the GMS contract for 2014/15. These will include supporting emerging strategic objectives for primary care, providing more proactive care for people with more complex health needs, empowering patients and the public, giving parity of esteem to physical and mental health, promoting more consistently high standards of quality, and reducing inequalities. The attached letter to NHS England Area Teams sets out the key changes and suggests that NHSE work with clinical commissioning groups (CCGs) to develop and implement local strategic plans to strengthen the quality of general practice services and make more effective use of NHS resources. (**Appendix A**)

Urgent and Emergency Care Review – End of Engagement Report Published

In June 2013 NHS England launched a period of engagement on the first stage of the Urgent and Emergency Care Review to gather opinions from NHS staff, patients and the public. The purpose of this engagement exercise was to ask people and organisations to work with NHSE to develop and improve the evidence base for change; and help to develop the principles and system design objectives on which they will build a stronger, more sustainable urgent and emergency care system for everyone.

The report that they have published outlines the changes proposed to make in the community, general practice, ambulance and hospital services.

A copy of the report is attached (**Appendix B**).

NHS Mandate 2014/15

The Government has published the NHS Mandate for 2014-2015. The Mandate to NHS England sets out the Government's objectives for the NHS, and is published by the Secretary of State every year. Below is a summary of the Mandate's key points and objectives:

- NHS England must take forward the relevant actions set out in the Government's response to Robert Francis' report on Mid Staffordshire.
- The Mandate sets out some details of the Government's Vulnerable Older People's Plan, including an expectation of rapid progress from April 2014.
- The Mandate sets out an objective for NHS England, working with clinical commissioning groups, to contribute to a new system-wide ambition of avoiding an additional 30,000 premature deaths per year by 2020. This will be achieved by supporting earlier diagnosis of illness, reducing variation between hospitals in avoidable deaths and ensuring people have access to the right treatment. In addition, NHS staff are asked to use every contact they have with people as an opportunity to help them stay well.
- NHS England needs to make measurable progress towards supporting people with on-going health problems to live healthily and independently. This will be achieved by better

empowering patients to manage and make decisions about their own care. NHS England should also look to achieve an increase in the use of technology to assist with this. NHS England should play a role in improving the way that care is coordinated and centre on the person as a whole, rather than specific conditions.

- NHS England has a key role to play in enabling local commissioners to stimulate the development of innovative integrated provision. This will involve assisting in removing barriers to integrated care and supporting the integration pioneers.
- NHS England needs to make progress in ensuring that the diagnosis, treatment and care of people with dementia in England, is among the best in Europe. NHS England has agreed a national ambition for diagnosis rates that by 2015, two-thirds of the estimated number of people with dementia in England should have a diagnosis, with appropriate post-diagnosis support.
- NHS England should **"shine a light" on variations in care and foster a revolution in transparency**. As part of this there needs to be more reporting of results at local authority, CCG, provider and consultant-led team level. They will also need to develop systematic clinical audit and patient-reported outcomes experiences measures and give consideration to making it easier for patients' feedback on their care.
- NHS England will need to ensure that any **changes to local health services** are put forward by clinicians and that the changes meet four tests: strong public and patient engagement; consistency with current and prospective need for patient choice; a clear clinical evidence base; and support from local commissioners.
- NHS England has an objective to **put mental health on a par with physical health**. The Mandate states that NHS England should work with CCGs to make progress on ensuring crisis services are in place which are accessible, responsive and as high quality as other emergency services. Adequate liaison psychiatry service needs to be in place to achieve this. NHS England will also need to extend more open access to the Improving Access to Psychological Therapies programme particularly for children young people and those out of work.
- In addition, NHS England will need to work with the Department of Health to develop a range of costed options to **help improve waiting times for mental health services**. Improved standards will need to be implemented by 2015, with a phased approach, depending on affordability.
- Following the abuse witnessed at **Winterbourne View**, NHS England must ensure CCGs work with local authorities to ensure that vulnerable people, particular those with learning disabilities receive safe and high-quality care.
- NHS England should continue to reduce avoidable harm and make measureable progress by 2015 to embed **a culture of patient safety** in the NHS, including through improved reporting of incidents.
- NHS England has an objective to get the best health outcomes for patients by **strengthening the local autonomy** of CCGs, health and wellbeing boards and local providers of services. The Government will hold NHS England to account for achieving this.
- NHS England has an objective to work with Monitor to "support the creation of a fair playing field". This has changed from the draft wording which previously said NHS England and Monitor should "drive progress" on the fair playing field.

A link to the full refreshed Mandate can be found below

<https://www.gov.uk/government/publications/the-nhs-mandate>

Chair of the Health & Wellbeing Board

Councillor Ken Wyatt has returned to the position of Chair of the Rotherham Health & Wellbeing Board and we welcome him back as a 'participating observer' on the CCG Governing Body.

Healthwatch Newsletter Nov/Dec 2013

The latest Healthwatch newsletter is attached (**Appendix C**).

Communications Update

- We are working with communications colleagues across the Local Strategic Partnership to develop an approach to promoting 'Rotherham' as a place with the aim to improve its reputation.
- The winter communications campaign has commenced. We currently have a radio campaign running on Rother FM and media relations activity is ongoing. Awareness materials are currently in production and will shortly be distributed to public information points across the Borough.
- We are currently reviewing and developing our communications plans to reflect our full-time in-house communications resource.