

CHIEF OFFICER'S REPORT

Lead Director:	Chris Edwards	Lead Officer:	n/a
Job Title:	CCG Chief Officer	Job Title:	n/a

Purpose

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

New Chair for Rotherham Local Safeguarding Children Board

A former national adviser on children's services has been appointed as the new Chair of the Rotherham Local Safeguarding Children Board (LSCB).

Christine Cassell has more than 40 years' experience working in children's services and education. Her career has included teaching, psychology, policy development and management roles. For the past ten years her focus has been on improvement activity in local authorities.

She has worked as a Children's Services Adviser for the Department for Education (DfE) and with the Children's Improvement Board, a national programme to establish sector-led improvement in children's services.

She is currently the Independent Chair of Derby City and Derbyshire Safeguarding Children Boards. She took over the Derby City Safeguarding Children Board in the aftermath of Operation Retriever, one of the first major child sexual exploitation (CSE) investigations, and the Derby Safeguarding Children Board has driven improvements to the local understanding of CSE and the multi-agency response.

Christine will be stepping down from the Derbyshire post as she takes over Rotherham Safeguarding Children Board. She is due to start in post later this month (November).

CCG Assurance Framework 2015/16 Delegated Functions - Self-certification

To support ongoing dialogue, CCGs are asked to provide a self-assessment of their level of assurance for each Delegated Function.

Appendix (i)

Comprehensive Spending Review - Headlines

- NHS budget, currently £101bn, to rise to £120bn by 2020-21
- The health service to get upfront cash injection of £6bn next year
- NHS in England expected to make £22bn in efficiency savings
- An extra £600m earmarked for mental health services
- Grants for student nurses to be scrapped and replaced by loans
- Cap on training places for nurses scrapped, with goal of increasing numbers by 10,000
- New social care "precept" in council tax of up to 2% to allow local councils to raise £2bn for social care
- Better Care Social Fund to be increased by 1.9%
- £15m raised from charging VAT on sanitary products to be given to women's health charities

The link below will take you through to the autumn statement in full and other supporting documents.

<https://www.gov.uk/government/publications/spending-review-and-autumn-statement-2015-documents>

The Changing Face of GP Services

The CCG hosted an event on the 19th November 2015 at New York stadium. This was well attended and generated a wealth of feedback which will be used to inform both the CCG Annual Commission Plan and Primary Care Strategy. A report is currently being developed and will come to a future governing body meeting.

Appendix (ii)

HealthWatch Newsletter October/November 2015

Appendix (iii)

The Medicines Waste Campaign Is Now Live

NHS Rotherham CCG's Medicines Waste Campaign has gone live and all GP Practices and Community Pharmacies will display a poster, leaflets and have a pad of reporting forms to support the campaign. Posters and leaflets are also available for any other community organisations or buildings.

Appendix (iv)**Communications Update**

- A full page feature on self care and winter health messages appeared in the Rotherham Advertiser to coincide with Self-Care Week (16th – 22nd November). The main article described how self care and social prescribing helps you to look after yourself.
- Positive coverage has been received on the medicines waste campaign. An interview with Dr Avanthi Gunsekera was aired on Rother FM and also featured in a news article in the Rotherham Advertiser. The campaign has been received well by patients and a care home, who have used the telephone line to report waste problems.
- A small booklet has been co-designed with local young people, including Looked After Children, to provide relevant health service information to help them get the right care, first time. The booklet distribution channels include; youth groups, school nurses and GP practices.
- Advanced media training has been organised for CCG executive leads and GPs, including TV style interviews. The training will take place early in the New Year.

CCG Assurance Framework 2015/16 Delegated Functions - Self-certification

CCG Name or joint committee of CCGs	
Quarter/year to which certification applies	Q2 – 2015/16

1. Assurance Level

To support ongoing dialogue, CCGs are asked to provide a self-assessment of their level of assurance for each Delegated Function (as appropriate) .		
	Assurance Level	Change since last period
Delegated commissioning	Assured as good	No change
OOH commissioning	Assured as good	No change

2. Outcomes

Briefly describe progress in last quarter towards the objectives and benefits the CCG set out in taking on delegated functions, in particular the benefits for all groups of patients <maximum 200 words>
Rotherham CCG continues to progress implementation of its strategy for general practice and workforce plan. From October, almost all practices commenced a local phlebotomy service provision with the remaining practices (6) to have this in place by the end of December. This brings this service closer to home for all patients. Final preparatory work took place for PMS disinvestment and reinvestment taking effect from October with this all now actioned. RCCG has reinvested in phlebotomy, minor surgery, aligning with care homes, joint injections and ring pessary changes.

3. Governance and the management of potential conflicts of interest in relation to primary care co-commissioning (this section should be completed by those CCGs which undertake joint commissioning with NHS England as well as those that have delegated commissioning arrangements)

	Co-commissioning	OOH commissioning
Have any conflicts or potential conflicts of interest arisen during the last quarter?	Yes	No
If so has the published register been updated?	No	No
Is there a record in each case of how the conflict of interest has or is	Yes	Not applicable

planned to be managed?		
Please provide brief details below and include details of any exceptions during the last quarter where conflicts of interest have not been appropriately managed <maximum 200 words>		

4. Procurement and expiry of contracts

Briefly describe any completed procurement or contract expiry activity during the last quarter in relation the Delegated Functions and how the CCG used these to improve services for patients (and if and how patients were engaged). <maximum 250 words per Delegated Function>
Chantry Bridge GP practice reprocurement concluded during Q2 with no successful provider identified. A managed dispersal of patients commenced in September and Chantry Bridge ceased practicing from 31 October 2015.

Local Incentive Schemes	
Is the CCG offering any Local Incentive Schemes to GP practices?	Yes
Was the Local Medical Committee consulted on each new scheme?	Yes
If any of those schemes could be described as novel or contentious did the CCG seek input from any other commissioner, including NHS England, before introducing?	No
Do the offered Local Incentives Schemes include alternatives to national QOF or DES?	No
<i>If yes, are participating GP practices still providing national data sets?</i>	Choose an item.
What evidence could be submitted (if requested) to demonstrate how each scheme offered will improve outcomes, reduce inequalities and provide value for money? <maximum 250 words for each Delegated Function>	
The Local schemes are primarily driving appropriate activities from secondary to primary care e.g. dermatology, joint injections, phlebotomy, anti-coagulation facilitating care closer to home. Care home assignment and case management are also central to Rotherham's strategy for improving and providing consistency in patient care. This scheme has been subject to CCG evaluation in October.	

5. Availability of services

Briefly describe any issues raised during the last quarter impacting on availability of services to patients (include if and how patients were engaged). <maximum 250 words for each Delegated Function>
As detailed above – Chantry Bridge dispersal.

	Delegated commissioning	OOH commissioning
How many providers are currently identified by the CCG for review for contractual underperformance?	0	0
And of those providers, how many have been reviewed and there is action being taken to address underperformance?	0	0
During the last quarter were any providers placed into special measures following CQC assessment?	No	No
If yes, please provide brief details of each case and how the CCG is supporting remediation of providers in special measures <maximum 50 words per case>		
In the last 12 months has the CCG published benchmarked results of providers OOH performance (including Patient experience)	No	
If yes, please provide link to published results:		

6. Internal audit recommendations

	Co-commissioning	OOH commissioning
Has internal audit reviewed your processes for completing this self-certification since the last return?	Yes	No
If so, what was their conclusion and recommendations for improvement? <maximum 200 words for each Delegated Function>		
Rotherham CCG has received significant assurance in relation to a review of primary care co-commissioning which included review of the Q1 self-assessment. No additional recommendations were made in relation to the completion of the self certification.		

Use this space to detail any other issues or highlight any exemplar practice supporting assurance as outstanding

7. CCG declaration

I hereby confirm that the CCG has completed this self-certification accurately using the most up to date information available and the CCG has not knowingly withheld any information or misreported any content that would otherwise be relevant to NHS England assurance of the Delegated Functions undertaken by the CCG.

I confirm that the primary medical services commissioning committee remains constituted in line with statutory guidance.

I additionally confirm that the CCG has in place robust conflicts of interest processes which comply with the CCG's statutory duties set out in the NHS Act 2006 (as amended by the Health and Social Care Act 2012), and the NHS England statutory guidance on managing conflicts of interest.

Signed by Chris Edwards CCG Accountable Officer



Name: Chris Edwards
Position: CCG Chief Officer
Date: 13 November 2015

Signed by John Barber Audit Committee Chair



Name: John Barber
Position: Lay member – Chair of the Audit committee
Date: 13 November 2015

Please submit this self-certification to your local NHS England team and copy to england.primarycareops@nhs.net using the email subject 'Delegated functions self-certification.'



EVENT

THE CHANGING FACE OF GP SERVICES

19th November 2015, New York Stadium, Rotherham, S60 1AH

In April 2015, Rotherham Clinical Commissioning Group took on the responsibility for commissioning GP services in Rotherham.

This gives us some great opportunities, but also some huge challenges.

- We know that demand is increasing, and that we have more people living longer with long term conditions, who need – and will continue to need – services that meet their needs.
- We also know that some practices are struggling to recruit staff.
- Some people struggle to get appointments when they want them.
- New technology offers different ways of working – but it isn't appropriate for everyone!
- It would be great to have really active patient groups in every GP practice – how can we do this?

To help us look at these issues, we will be running two facilitated sessions on the 19th November, 2–4pm and 5–7pm.

We want to make sure that these sessions are lively, with great discussions, and are accessible and attractive to a wide range of people. We also want discussions to be impartial and we want people to think differently about these issues – to make this happen, these sessions will be led by external, independent facilitators. We can promise you that they will be different, and really engaging!

We also promise that Rotherham CCG will use the information from this event to inform both our GP strategy and the commissioning plan for 2016–17.

Places on the sessions will each be limited to 50 people and ideally we would like the following people to attend:

- Patients, carers and Patient Participation Group representatives
- Community group representatives and Voluntary Sector organisations
- GP practice staff – all grades and roles
- Social care staff
- Health and Wellbeing Board members
- Elected members

TO BOOK A PLACE ON ONE OF THE SESSIONS AND TO DISCUSS ANY SUPPORT NEEDS WITH US:

EMAIL: HELEN.WYATT@ROTHERHAMCCG.NHS.UK

CALL: 01709 302042



Welcome to the Healthwatch Rotherham Newsletter

UPDATED VERSION: October / November 2015

Recent Impacts



Two Transformation Plans are happening around the Rotherham CAMHS service. One of these is a national initiative and the other plan is a response to a Contract Review Notice issued by the CCG as a result of concerns raised by Healthwatch Rotherham. The National transformation plan brings some additional funding with it. Healthwatch Rotherham has put in a bid for a part time Young Persons Advocacy Worker. This position would be initially funded up to April 2016.



The outcome of a complaint at Dinnington Group Practice is that they are having a new phone system installed that will enable them to record all telephone conversations. The reception staff at the practice are also to be reminded about the complaints process.



St Ann's Surgery have updated their complaints policy and have also put this policy on their website and on display within the Practice.. This was done following a complaint supported by Healthwatch Rotherham that the complaint process was not clearly visible in the surgery and on the website.



Following a complaint raised with Rotherham Hospital a meeting was arranged with the Integrated Medicine Department. The hospital responded with both the Chief Operating Officer and the Head of Nursing from the Division of Medicine writing letters to the complainant expressing their sincere condolences. Not only has the patient experience been shared as part of the Hospital patient story for future learning, but the complainant has accepted an offer to present their story at one of the Protected Learning Time events. The Hospital has openly stated that they are grateful for the feedback and are to make the necessary changes to improve the experience of patients and their relatives at the Trust.



A complaint was made about the care received at Rotherham Hospital and at a meeting the staff were very apologetic and appeared genuinely concerned about the poor care the person had received. The Trust has since integrated wards A1 and A2 and created a cardio-respiratory ward on ward A1. A comprehensive programme of staff training has been undertaken, basic welfare checks (intentional rounding) have been introduced and the trust is planning to introduce a new Compassion in Practice Programme in the coming months.



The hospital are using 4 Healthwatch Rotherham advocacy cases as examples to be discussed in team meetings with the objective being to improve practice and communication.



The Changing Face of GP Services 19th November - New York Stadium

What is it about?

This event will be really important, it will inform the Rotherham Clinical Commissioning Group's future plans for GP services.

What are the aims of the event?

We really want a wide group of people to work together to appreciate the great services we have, and to consider how services might be different in the future.

Who should attend?

Patients and Patient Participation Group Members; Healthwatch members; GP staff; staff from other health bodies; RMBC staff; elected members; Voluntary and Community Organisations

How will it work?

There will be two sessions, both will cover the same material - this is to enable as many people as possible to attend. Both sessions will be limited to around 50 people, one will run from 2-4pm, and one from 5-7pm, so **booking is really important!**

The sessions will be independently facilitated, using pictures and words, so we hope they will be interesting and accessible to everyone. We also hope that this approach will really help everyone to work together to think differently!

How do I book?

Telephone Helen on 01709 302042

Email Helen.wyatt@rotherhamccg.nhs.uk



Healthwatch Rotherham has teamed up with a new service that will give you the chance to make a comment about any health service, anytime, with a simple text from your mobile phone, while it is fresh in your mind.

Textocracy is free to use as part of your regular mobile plan. You don't require any wifi or internet connection.

It is anonymous, and you can say what you want to in your own words about an experience you are having with any health service. **SEND YOUR Text 01709 242232** to have your voice heard.

This is how it works:

Please store the number
01709 242232

in your phone and have
your say by **text**.

- Next time you are using a local health and social care service and you have an experience that you would like to comment on, whether it is good or bad, or if you have a suggestion or something you want to say, just text it straight to 01709 242232.
- You will get a message acknowledging your text.
- Healthwatch Rotherham will be able to take all the texts that are received and use the data you provide to feed back important information to local services that will help them to improve.
- Your number will not be kept or used at any time.

Leave feedback now:

www.healthwatchrotherham.org.uk

Telephone: 01709 717130 Email: info@healthwatchrotherham.org.uk
Healthwatch Rotherham, 33 High Street, Rotherham, S60 1AP



The Medicines Waste Campaign Is Now Live!

NHS Rotherham CCG's Medicines Waste Campaign has gone live and all GP Practices and Community Pharmacies will display a poster, leaflets and have a pad of reporting forms to support the campaign. Posters and leaflets are also available for any other community organisations or buildings. Please contact us if you require any further information on 01709 308999.

Local pharmacy experts have estimated that around £1.5 million of NHS money is lost a year in Rotherham through medicines waste alone, money that could be better spent on caring for patients.

In 2013 alone, over one billion prescription items were given out to patients in England at community pharmacies – an average of 2.7 million items every day and 18.7 items for every person living in the country.



If anyone has medication that is piling up and doesn't know what to do about it, tell the CCG Medicines Management Team and they will sort the problem out.

You can report by:

- 1) Telephone; 01709 308999**
- 2) Completing the form at your GP practice or local pharmacy**
- 3) Email; medicines.waste@rotherhamccg.nhs.uk**
- 4) A web form is in progress and so you will soon be able to report online also**

Resources can be accessed via the following Link;

<http://www.rotherhamccg.nhs.uk/medicines-waste> **2.htm**