

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.

Sustainability and Transformation Plan (STP)

The South Yorkshire and Bassetlaw Sustainability and Transformation Plan (STP) was published on the 14th November 2016. It sets out the vision, ambitions and priorities for the future of health and care in the region and is the result of many months of discussions across the STP partnership, including with patient representative groups and the voluntary sector.

The link to the plan and summary is [here](http://www.smybndccgs.nhs.uk/what-we-do/stp). <http://www.smybndccgs.nhs.uk/what-we-do/stp>

CCG IAF Checkpoint Feedback Letter from 5th September 2016

Dr Kitlowski and I met with NHS England on the 5th September 2016, to discuss the Improvement and Assessment framework. The confirmation of that discussion has been received and is appended to this report.

Appendix i

Annual Vote of Confidence

I am really pleased to report the results of the annual vote of confidence. Section 2.2.3e of the Constitution requires an annual vote of confidence in the commissioning arrangements. This has been carried out via survey monkey with the vote closing on the 14th October. Each GP member practice was required to respond, and there has been 100% response to the survey. The members were sent the GPMC annual report and asked to respond to 2 questions. The results are shown below.

1. Do you have confidence in the executive teams of the CCG?

(97%) 30 out of 31 practices said 'Yes'.

2. Do you have confidence in the direction of travel?

(97%) 30 out of 31 practices said 'Yes'.

In comparison to last year's result question 1 has remained the same at 97% with question 2 moving from 91% last year.

Further to this on the 16th November the CCG Strategic Clinical Executive voted to retain Dr Kitlowski as Chair of the CCG. With Dr Kitlowski and Dr Cullen being re-appointed as Chair and Vice Chair of the SCE.

Declaration of Interests

Work is on-going to ensure the CCG is managing conflicts of interest in line with statutory guidance. The recruitment process is now being changed for the recruitment of staff Band 7 and above, all GB members, appointed members and Lay members, will be asked to declare any interest via a form which they will bring along to interview.

Primary Care - Rotherham Response to the GP forward view

A separate plan on the GP Forward View was submitted to NHS England on the 21st October.

The key priorities for Rotherham are:

- Implementing a quality contract for general practice – this consists of 14 standards with key delivery requirements to provide a consistent primary care offer across Rotherham e.g. all GP urgent appointments to be seen within 1 working day and routine appointments within 5 working days
- Every practice undertaking productive general practice by March 2017 – this is a support programme which NHS England are funding to develop practices to undertake LEAN techniques and review elements of practice e.g. front/back office, planning and scheduling
- Developing the primary care workforce – Working with practices to consider alternative roles and support the training of new primary care practitioners e.g. Clinical Pharmacists, newly qualified nurses, student nurses, apprentices, care navigators
- Developing the Federation arrangements in Rotherham to strengthen general practice – Rotherham currently has a Limited Liability Partnership consisting of all 31 practices but does not have an infrastructure to support its role and development. The LLP are being supported to develop its infrastructure
- Roll-out of telehealth and other IT to support general practice capacity – Telehealth has been piloted in 4 practices and evaluated well for releasing capacity, reducing DNA, improving patient experience and reducing administrative costs and the offer will be rolled out to all practices along with remote consultation.

SCE Portfolios

The SCE have recently reviewed the GP portfolios to ensure all the RCCG areas are met. A list of the Lead GPs for each portfolio is attached.

Appendix ii

Communications Update

- The winter communications campaign 2016/17 was launched to coincide with Self Care Week in mid-November and runs in conjunction with the national 'Stay Well This Winter'. Communications activity is based on local insight, building on previous campaigns to encourage a reduction in unnecessary attendances at A&E and GP practices and an increase in self-care.
- Media coverage has been received on the Social Prescribing Mental Health evaluation in the South Yorkshire Star and associated Johnston Press publications.
- Information has been distributed throughout the borough on the Working Together public consultations for Hyper Acute Stroke and Children's Surgery. Local public meetings are taking place throughout the consultation period, to understand the views of Rotherham people.
- NHS Rotherham CCG has worked closely with the Rotherham Advertiser on a monthly Health and Wellbeing feature. Current campaign adverts and editorial that were provided by the CCG were used in the November feature and include Stay Well this Winter, Norovirus and Right Care, First Time.

Direct 0113 825 0665
Date: 10/11/2016

NHS England – North (Yorkshire & the
Humber)
Oak House
Moorhead Way
Rotherham
S66 1YY

Dr Julie Kitlowski, Chair
Chris Edwards, Chief Officer
Rotherham CCG

Dear Julie and Chris

RE: Improvement and Assessment Framework Checkpoint Meeting

Thank you for meeting with us on 5 September for your CCG IAF checkpoint meeting. The purpose of this letter is to provide a summary of our discussion.

We discussed delivery of the 4 hour standard at Rotherham Hospital. At the time of meeting, performance was 91.6% representing continued volatility in the local urgent care system. STF trajectories were not achieved in July, but achieved in August. Ian Atkinson noted that system performance is circa 95% when walk in centre data are included, although we will continue to monitor delivery of Type 1 activity once novation of the WIC contract has completed.

You informed us that the A&E delivery board will undertake a full review of winter and escalation plans, with sign off by the end of September. We explored plans for sustainable improvement in ED performance, and the importance of transformation in the urgent care system, and improvements in medical staffing.

Ian Atkinson provided an update on the current performance position, and that although further improvement work is required to secure recovery in the 6 and 18 weeks waiting times standards, recovery and access standards were met in July. The IAPT national Intensive Support Team had undertaken a visit and made a number of important recommendations for service improvement, which will be followed up in discussions with between the NHSI, NHSE, the CCG and the Trust.

We discussed continuing healthcare, and specifically the PUPOC cases. We recognised the significant work managed by Doncaster CCG to deliver the recovery trajectory, whilst maintaining the integrity of the process. We acknowledged that the September trajectory is not likely to be met, and that a CCG specific recovery plan would be required indicating completion of all cases by January 2017. You confirmed that the CCG is in regular contact with John Pattinson in NHS England, and Doncaster CCG concerning progress.

Collaborative commissioning arrangements continue to be developed across SYB although we acknowledged that the establishment of the joint executive committee has been delayed. Collaborative work continues regarding hyper acute stroke and children's services, and we agreed that it is essential for the sustainability of services that the implementation of these plans continues at pace.

We discussed CCG plans for primary care transformation, and the availability of national funding to support this; you will work with Karen Curran, Head of Co-commissioning on this.

Thank you for your continued work to secure improvement in health services and outcomes for your population. Please do not hesitate to contact me should you wish to discuss this letter, or require any further information.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Alison Knowles', written in a cursive style.

Alison Knowles
Locality Director – NHS England North (Yorkshire and the Humber)

SCE PORTFOLIOS

GP	Portfolio
All (Nettie Nettleton 302020)	<ul style="list-style-type: none"> • PLTC
Anand Barmade (Sue Howard 302149)	<ul style="list-style-type: none"> • Clinical Referrals Management Committee • Diabetes
Phil Birks (Deborah McGarvey 302632)	<ul style="list-style-type: none"> • Acute & Community Contract • Community Transformation • MSK
Russell Brynes (Tracy Kenyon 428723)	<ul style="list-style-type: none"> • RDaSH • Community Transformation • Dementia • Neurology • Conflict Champion
David Clitherow (Tracy Kenyon 428723)	<ul style="list-style-type: none"> • Emergency Centre/Acute Childrens • Respiratory • Urgent & Emergency Networks • YAS & Ambulance Services/PTS
Richard Cullen Vice Chair (Melanie Robinson 302154)	<ul style="list-style-type: none"> • Governance/Finance • IT • Cancer • Children's CAMHS and Maternity • Health and Wellbeing board • CHC • Social Prescribing • Specialised Commissioning • Working Together/STP
Avanthi Gunasekera (Deborah McGarvey 302632)	<ul style="list-style-type: none"> • End of Life Care • Medicine Management • Cardio Vascular Disease
Julie Kitlowski (Wendy Commons 302009)	<ul style="list-style-type: none"> • Community transformation/integration • Health & Well Being Board • Public Health • Patient and Public Engagement • Rotherham Partnership • Working Together/STP
Jason Page (Sue Howard 302149)	<ul style="list-style-type: none"> • GP Commissioning • GU/Renal

Admin Support Contract – in blue