

NHS Rotherham - Clinical Commissioning Group Governing Body – January 2014

Chief Officer's Report

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Purpose

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

Ways of Working Survey

Ipsos MORI were commissioned by NHS Clinical Commissioners to undertake an independent survey of CCG leads in England, in order to understand how the ways of working designed to frame relationships between NHS England and CCGs are being modelled. Clearly, as new organisations developing new relationships, implementing the ways of working within six months is challenging. The survey is intended to provide a baseline, serving to stimulate conversations between CCGs and NHS England about how relationships can develop further. NHS Clinical Commissioners will be seeking to repeat the survey in 2014 to track progress from this early stage.

The report (**Appendix A**) shows that at a local level CCGs and Area Teams are working together well, but this is usually due to close personal relationships and is not consistent across the country. Concerns were also highlighted about co-commissioning and primary care commissioning, as well as the desire for a more mutual assurance process.

NHSCC has written to Sir Malcolm Grant, Chair of NHS England (**Appendix B**) highlighting both the positive relationships with Area Teams and the issues with room for improvement. Some of the implications from the letter were discussed with NHS England Area Team at our Quarter 2 Assurance meeting on Monday 9th December. These are:

- CCGs taking control of primary care commissioning
- Budget impact of specialist commissioning
- Assurance meetings being mutual rather than one way

Everyone Counts: Planning for Patients 2014/15 to 2018/19

Describes NHS England's ambition for the years ahead and its on-going commitment to focus on better outcomes for patients. It outlines the vision for transformed, integrated and more convenient services, set within the context of significant financial challenge. (**Appendix C**)

NHS Clinical Commissioning Groups Code of Governance.

At its meeting in August, the CCG Governing Body received the 'draft' code of governance noting that it was not dissimilar to that NHS Rotherham CCG already had in place. The Institute of Chartered Secretaries and Administrators (ICSA) has now published details of the new code of governance.

It outlines governance principles that support clinicians, and those that work with them, to perform their commissioning activities and help to maintain public trust in clinicians and the NHS. The code was developed by health service professionals for health service professionals. It is a voluntary document, but CCGs are encouraged to adopt the code's principles to include a statement in their annual report explaining how these principles have been applied. The code of governance is available at: <https://www.icsa.org.uk/clinical-commissioning-groups-code>

Equality Delivery System 2

NHS England has refreshed the EDS and it will now be known as “EDS2”. It was launched on 4th November 2013 and is more streamlined and simpler to use compared with the original version. NHS organisations are encouraged to make EDS2 work for them, use it flexibly to embrace key local health inequalities and adapt its processes and content to suit their local needs and circumstances.

The refreshed EDS2 has arisen out of NHS England’s commitment to an inclusive NHS that is fair and accessible to all. (**Appendix D**)

Better Care Fund (formerly the Integration Transformation Fund)

The £3.8bn Better Care Fund (BCF) was announced by the Government to ensure a transformation in integrated health and social care. The ‘Better Care Fund’ is a single pooled budget to support health and social care services to work more closely together in local areas. To ensure that we implement the fund efficiently & effectively a task group will be set up and will operate to meet the requirement of developing a joint BCF plan to be endorsed and adopted by the Health & Wellbeing Board (HWBB) by April 2014.

Terms of Reference for the Task Group have been agreed and the CCG will be represented by the Chair, Chief Officer and Chief Finance Officer.

This work will need to be completed by 14 Feb 2014 when a plan has to be submitted to NHS England.

Information Governance Update

The attached table (**Appendix E**) details minor amendments made to the CCG’s information governance policies following transition and in order to meet the IG Toolkit Assessment deadline. The Audit and Quality Assurance Committee (AQuA) approved these revisions at its November meeting.

Members will recall the previously reported issues around the use of Person Confidential Data within the CCG following the Caldicott review. NHS Rotherham CCG has now received interim accredited safe haven status. Accredited Safe Havens (ASHs) are “specialist, well-governed, independently scrutinised environments” and the only place where de-identified personal confidential data can be stored and linked with other potentially identifying data outside of the Health and Social Care Information Centre (HSCIC) environment.

The Secretary of State for Health recently approved the NHS England application for support under Regulation 5 of the Health Service (Control of Patient Information) Regulations 2002 (Section 251 Support). This allows CCGs and Commissioning support Units (CSUs) to process Personal Confidential Data (PCD) which are required for invoice validation purposes. Further information can be found in the attached letter from NHS England’s Chief Data Officer. (**Appendix F**)

Living Wage

The Remuneration Committee has agreed that the CCG adopts the living wage for any relevant existing and new employees. The living wage is higher than the national minimum wage and is calculated to reflect the minimum pay needed to meet the basic cost of living. It is a voluntary initiative promoted by organisations such as the Living Wage Foundation and there is no statutory obligation on an employer to pay it. The Living Wage outside London is £7.65 an hour (from 4 November 2013). The nearest higher A4C pay point is point 3 on Band 2, £15,013 or £7.67 per hour.

The Governing Body is asked to **endorse** this decision.

Appointment of a New SCE Member

Interviews will take place on 29th January 2014 to appoint a new Strategic Clinical Executive (SCE) member to succeed Dr David Polkinghorn who leaves at the end of March 2014.

Y&H Academic Health Science Network (AHSN)

As partners of the network we have recently received the network's Performance Half Yearly Annual Report for 2013/14 'Adopting Excellence, Seeking Opportunity' from its Interim Chair, Sir Andrew Cash. (**Appendix G/Gi**)

Substantive Appointment - Director (South Yorkshire & Bassetlaw) NHS England

Eleri de Gilbert has been substantively appointed as Director (South Yorkshire & Bassetlaw) NHS England. (**Appendix H**)

Communications Update

- Media coverage received during the last month includes stories about winter health and the £1.3m allocation, GP LES extension and The Rotherham Hospital Foundation Trust Strategic Option decision, which includes our statement.
- Plans are being developed to actively increase coverage of good news health stories for Rotherham patients.
- A CCG communications plan has been produced for 2014/15. The plan on a page from it is to be included in our Commissioning Plan.
- The winter 'Choose Well' campaign has been implemented throughout December and will continue. Messages are focusing on promoting the availability of services in the community, such as Pharmacy First and self-care.