

Direct 0113 82 47511 Date: 4 May 2017 NHS England – North (Yorkshire & the Humber) 3 Leeds City Office Park Meadow Lane Leeds LS11 5BD

Dr Richard Cullen, Chair Chris Edwards, Accountable Officer Rotherham CCG

Dear Richard and Chris,

RE: CCG 2016/17 ANNUAL REVIEW

Thank you for meeting with us on 12 April 2017 for your Annual Review Meeting. The purpose of this letter is to provide feedback on the key issues we discussed, and to confirm next steps for the publication of the 2016/17 Annual Performance Assessment.

As you will be aware, NHS England has a statutory duty to conduct an annual performance assessment of each CCG. The Government's Mandate to NHS England specifies the four 'Ofsted-style' headline categories to be used: Outstanding; Good; Requires Improvement and Inadequate.

Whilst the methodology for the calculation of the 2016/17 Annual Performance Assessment has not yet been published, it is likely that the Quality of Leadership (QoL) indicator will be significantly weighted, and will account for 30% of the overall judgement alongside the two finance indicators accounting for 20%. The remaining 50% will be made up of the rating against the six clinical priority areas. Each of the six clinical priority areas has an independent national panel that will make an assessment; in June 2017 you will be given a rating on each of these six clinical areas using Ofsted terminology which will then contribute to the overall rating.

Reflections on 16/17

We discussed the CCG's key achievements in 2016/17 and particularly the focus the CCG has on improving outcomes for the population of Rotherham. We celebrated the success of the CCG's leadership team, which presents a coherent plan for the CCG, but also undertakes a significant leadership role across Rotherham at place, and across the wider SYB STP footprint. We discussed the significant strides the CCG has made in developing relationships across the system, enabling partnership working, with particular reference to primary care; embedding general practice in the

core CCG strategy with the formation of the community interest federation as a key partner, and the development of joint initiatives with the Local Authority. You presented a number of key achievements and we discussed in detail the CCG's work on: medicines management, demand management, clinical thresholds and social prescribing, all of which have not only had a significant impact in Rotherham, but have been adopted across CCGs across South Yorkshire and Bassetlaw.

We discussed performance across mental health and learning disabilities, and you articulated the CCG's focus on this for the population of Rotherham. Successful work undertaken in collaboration with RDASH has resulted in a significant improvement in performance in IAPT services, although we acknowledged that this remains a challenge. We also discussed your innovative solution to integrated physical and mental health, with the establishment of the *Ferns* dementia ward.

We reflected on the transformation of urgent and emergency care in Rotherham, and agreed that the new model delivered from the new Emergency Centre fully aligns to the national strategy. We acknowledged that whilst the new model will mitigate a number of the challenges TRFT have faced throughout 16/17, workforce will remain a challenge. The outcome of the Sustainable Hospitals Review will be important to determine the future model for TRFT and your patients.

Operational and Financial Plans for 2017-19

The CCG's operational and financial plans have been submitted and approved locally for 2017-19. The financial plan achieves all business rules and includes challenging, but realistic efficiency savings. We acknowledged that there is limited mitigation available.

All contracts were agreed by the December 2016 deadline and activity trajectories are agreed, and in the main are aligned to contracts.

We discussed the key risks with TRFT and their sustainability, and we acknowledged that the Trust's control total has not yet been agreed, and that work is ongoing between the Trust and NHS Improvement in order to resolve this.

You described the robust approach undertaken to QIPP planning, and your QIPP is fully aligned to delivery plans.

Finally, we congratulated you on collectively agreeing the SYB financial control total.

CCG "Place Strategy"

We discussed the CCG strategy to move to an Accountable Care System (ACS) model and we discussed the future contracting model. We acknowledged that place

is where the majority of the required transformation will occur but that the development of effective system wide commissioning for hospital services will be essential for the health and care of your residents.

Wider STP Implementation

We discussed the wider STP implementation and in particular, the Sustainable Hospitals Review. We discussed the importance of commissioner leadership in reviewing services to ensure the best possible outcomes for our patients across South Yorkshire & Bassetlaw, and I encouraged you to continue to ensure that the Rotherham voice is heard.

It is clear from our discussions that the CCG is continuing to improve and is delivering well through your leadership and the hard work of the organisation. We took time to recognise the contributions from Julie Kitlowski, Chair and Keely Firth, Director of Finance, and thanked them both as they retire.

I will write to you again in June / July with your finalised Annual Assessment Results. In the meantime, please do not hesitate to contact Alison Knowles or Mark Janvier should you require any further information.

Yours sincerely

Moira Dumma

Director of Commissioning Operations