Item Number: 5	
NHS VALE OF YORK CLINICAL COMMISSIONING GROUP GOVERNING BODY MEETING	NHS Vale of York Clinical Commissioning Group
Meeting Date: 5 June 2014	
Title: Chief Clinical Officer Report	
Responsible Chief Officer and Title	Report Author and Title
Dr Mark Hayes Chief Clinical Officer	Sharron Hegarty Communications Manager
Strategic Priority	
Not applicable	
Purpose of the Report	
This report provides an update on a number of projects, initiatives and meetings which have taken place since the last Governing Body meeting and any associated issues.	
Recommendations	
The Governing Body is asked to note the report.	
Impact on Patients and Carers	
Through CCG management processes and governance planning, stakeholder involvement and engagement ensures an improved experience for patients and carers	
Financial and organisational sustainability assures the work locally to deal with winter pressures.	
Impact on Resources (Financial and HR)	
Financial implications around management decisions are included in the CCG's financial planning for 2014-15	
Risk Implications	
Not applicable	
Equalities Implications	
Agreed policies have been assessed for equality impact Sustainability Implications	
Financial and organisational sustainability is assured through CCG management processes and governance planning.	

GOVERNING BODY MEETING: 5 JUNE 2014

Chief Clinical Officer's Report

1. Purpose of the Report

To provide an update on a number of projects, initiatives and meetings which have taken place since the last Governing Body meeting and any associated issues.

2. Co-commissioning of primary care services

- 2.1 In his speech to GPs and other NHS health professionals at the Annual Conference of NHS Clinical Commissioners in London on 1 May 2014, Simon Stevens, NHS England Chief Executive, announced the option for local CCGs to co-commission primary care in partnership with NHS England.
- 2.2 In his address, Simon Stevens noted the following related driving factors to this agenda:
 - Improved service integration requirement within constrained funding
 - CCG influence to work with "patients, local communities and local clinicians to exercise more clout over how services are developed"
 - Requirement for new and properly resourced models of primary care (in parallel with specialised commissioning)
 - The need to drive up care quality, cut health inequalities in primary care and secure local NHS sustainability
- 2.3 In May 2014, NHS England wrote to CCGs and Area Teams detailing how CCGs could submit expressions of interest to develop new arrangements for co-commissioning of primary care services and the work proposed through the NHS Commissioning Assembly to support CCGs and Area Teams in developing co-commissioning arrangements.
- 2.4 CCGs have been asked to provide their suggestions and proposals in exploring and developing primary care co-commissioning within the expression of interest to include: the CCGs involved, intended benefits and benefits realisation (linked to the 5 year strategy), scope of co-commissioning (e.g. monitoring performance, negotiating local contracts, decisions on new providers and practice mergers, amongst others), nature of co-commissioning (e.g. from greater influence in primary care commissioning to delegated responsibilities and all other

alternatives), timescales (e.g. initial plans around phased cocommissioning responsibility), governance (e.g. managing conflicts of interest), engaging practices and local stakeholders, monitoring and evaluation.

2.5 The CCG will be exploring these opportunities with its local stakeholders.

3. Improving mental health services for the Vale of York community

- 3.1 As a prelude to a transformation in the provision of mental health services, the CCG is holding a range of consultation events throughout the summer 2014. Staying true to its promise of involving the community in helping to shape decisions about local healthcare, the process for the creation of a new Mental Health Strategy will include an assessment of the nature and site of a new York Mental Health Hospital that the CCG is determined to provide for the people of the Vale of York and help to determine the range of services that should be provided in the community setting with particular attention paid to those based in Primary Care.
- 3.2 The first of these events to involve local community in shaping local mental health services took place on 23 May 2014. More than 60 people attended the CCG's first DISCOVER! event which was hosted with the Partnership Commissioning Unit. Those who attended have agreed to take forward discussions and gather information from more members of the local community. These opinions will help to shape the CCG's future commissioning decisions for mental health services.
- 3.3 Three more events are planned to take place throughout the summer 2014.

4. CCG's Annual Report

The CCG has prepared its first annual report. Providing details of the CCG's annual accounts and an introduction from the Chair of Council of Representatives on behalf of all member practices, the report will be discussed at the CCG's next meeting of the Audit Committee on 2 June 2014 and submitted to NHS England no later than 6 June 2014.

5. Communications

- 5.1 The CCG continues to keep a positive and high profile in the local media. A series of published media releases have helped to raise awareness of engagement activities and provide the best balance of information and support that helps to inspire the community to take the lead in their own healthcare.
- 5.2 From a reputational management perspective the CCG continues to monitor discussions, articles and messages in the media and online. The CCG will continue to manage its reputation by ensuring that clear, consistent messages are available to the media, partners, patients and the public about its commissioning planning activities and intentions.
- 5.3 I have personally met with a journalist from the Health Service Journal (HSJ). The interview focused upon the CCG's work both in the past year and its aspirations for the next five years and beyond.

6. Bootham Park Hospital and Limes Trees Unit

- 6.1 In April 2014, the CCG announced that it is committed to invest in local mental health services and its belief that it is a fundamental requirement to live up to the ideal of "parity of esteem" between physical and mental health.
- 6.2 Confirming comments that the CCG has received recently from service users, the recent Care Quality Commission (CQC) report highlighted concerns about the physical state of Bootham Park Hospital and the Lime Trees Unit. Bootham Park Hospital was built in 1774 and it has served the people of York well for 240 years but the time has come for it to be replaced.
- 6.3 The report identified a number of issues that can only be resolved by moving to alternative accommodation. In the case of Bootham Park Hospital the fact that it is a Grade 1 listed building means there are restrictions to any improvements that can be made to the fabric of the building.
- 6.4 The CCG recently announced that its review of mental health services is an opportunity to define the best possible model of care to design a state of the art hospital facility.

6.5 The services provided at Lime Trees are commissioned by NHS England and they are working closely with Leeds and York Partnership NHS Foundation Trust to move into more suitable accommodation.

7. Commissioning prioritisation

The CCG has a number of key decisions to make in relation to priorities for future investment and disinvestment. Individual decisions cannot be made in isolation and therefore the CCG is developing a framework, including criteria, to support the Governing Body in making these decisions. This will be based on examples of best practice used by other CCGs across the country and the CCG will report back to the Governing Body at its meeting on 7 August 2014 when it is expected that key decisions will be made.

8. Meetings

- 8.1 Maintaining the CCG's links with its key stakeholders, senior colleagues and I have attended a number of meetings around developing new ways of working through stronger partnerships and strategic planning.
- 8.2 I had a one to one meeting with Bill McCarthy, National Director of Policy at NHS England, and I personally met leaders from stakeholder organisations to discuss the CCG's Strategic Plan for 2014-2019.
- 8.3 I took part in the following meetings:
 - Discussions between the CCG and York Teaching Hospital NHS Foundation Trust colleagues about Novartis
 - A meeting about the Selby Hub
 - Executive to Executive meeting with Yorkshire Ambulance Service
 - NHS Yorkshire and Humber Provider Chief Executives and CCG Accountable Officers meeting
 - Joint Senior Management Team meeting with the Partnership Commissioning Unit
 - A session at North Yorkshire County Council with John Rouse, Director General Social Care at the Department of Health
 - The East Riding Health Overview and Scrutiny Committee with Rachel Potts (Chief Operating Officer)
 - The CCG's Council of Representatives meeting

- 8.4 With colleagues from the CCG Senior Management Team:
 - I visited Bootham Park Hospital with Rachel Potts, Tracey Preece (Chief Finance Officer) and Lucy Botting (Chief Nurse)
 - I visited The Retreat with Dr Louise Barker, Paul Howatson (Senior Innovation and Improvement Manager), and Richard Dalby (General Manager at the Partnership Commissioning Unit).
 - I hosted meetings with visitors from ESSEC Business School in France

9. Public and Patient Engagement

As referred to in 3.1, the CCG is hosting a range of public and patient engagement events about DISCOVER! – the official name for the process to gather opinions that will shape future commissioning decisions and the delivery of services for mental health.

10. Annual Report

The CCG is now working on its Annual Report. The information will be provided to the CCG's Audit Committee meeting on 2 June 2014. The final report will be provided to NHS England by 6 June 2014.

11. CCG Senior Management Team Discussions and Decisions

The CCG's Senior Management Team (SMT) discussed and approved the following:

- Agreed a placement for a Finance Management Trainee
- Approved appointment of an Innovation and Improvement Facilitator
- Agreed a Management Trainee placement in the Innovation and Improvement Team
- Approved a 12 month GP trainee post
- Accepted recommendations from York and Scarborough Medicines Commissioning Committee
- Supported the recommended option to procure risk tool RAIDR
- Approved Terms of Reference for the Programme Delivery Steering Group
- Supported the appointment of a full time Lead Pharmacist
- Supported the proposal for the CCG to become a signatory to the 'All Trials Petition'
- Agreed the implementation of a policy that GPs should either allow community nurses to record prescribing on their system or alternatively prescribing should be done by GPs themselves

- Agreed a contract for Translation and Interpretation Services
- Agreed that Andrew Phillips would represent the CCG on the Academic Health and Science Networks

12. Recommendations

The Governing Body is asked to note the report.