


Item Number: 5	
Name of Presenter: Phil Mettam	
Meeting of the Governing Body 1 December 2016	 Vale of York Clinical Commissioning Group
Accountable Officer's Report	
Purpose of Report To Receive	
Reason for 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, relevant national issues.	
Strategic Priority Links <input type="checkbox"/> Primary Care/ Integrated Care <input type="checkbox"/> Urgent Care <input type="checkbox"/> Effective Organisation <input type="checkbox"/> Mental Health/Vulnerable People <input type="checkbox"/> Planned Care/ Cancer <input type="checkbox"/> Prescribing <input type="checkbox"/> Financial Sustainability	
Local Authority Area <input checked="" type="checkbox"/> CCG Footprint <input type="checkbox"/> City of York Council <input type="checkbox"/> East Riding of Yorkshire Council <input type="checkbox"/> North Yorkshire County Council	
Impacts/ Key Risks <input type="checkbox"/> Financial <input type="checkbox"/> Legal <input type="checkbox"/> Primary Care <input type="checkbox"/> Equalities	Covalent Risk Reference and Covalent Description
Recommendations The Governing Body is asked to note the report.	
Responsible Chief Officer and Title Phil Mettam, Accountable Officer	Report Author and Title Sharron Hegarty, Head of Communications and Media Relations

Annex: Humber, Coast and Vale Sustainability and Transformation Plan included for members and available at <http://www.valeofyorkccg.nhs.uk/about-us/governing-body-meetings/>

GOVERNING BODY MEETING: 1 DECEMBER 2016

Accountable Officer's Report

1. Turnaround, Legal Directions and the CCG's 2016-17 Financial Position

- 1.1 In line with the Legal Directions the CCG's Governing Body submitted an Improvement Plan to NHS England on 6 October 2016. The plan, which specifically responds to the recommendations of the Capability and Capacity Review of 28 January 2016, focuses upon key areas. The plan has been approved by NHS England and is now being implemented by the CCG.
- 1.2. In line with the national timetable, and as required by the Directions, the CCG has also developed a wider draft Medium Term Financial Strategy and the first draft of the 2017-19 Financial Plan was submitted to NHS England on 1 November 2016. The CCG continues to work with NHS England on a Financial Recovery Plan that sets out the actions required to operate within the allocated budget for 2017-18 and thereafter.
- 1.3 Alongside the appointment of a new Accountable Officer, actions to align resources with local challenges include the commencement of an internal reorganisation, the creation of a project management resource to support planning and the creation of a Clinical Executive committee.
- 1.4 In its work to comply with the Legal Directions, the CCG's Governing Body has committed to:
- improve capability to deliver the requirement in 2016-17;
 - create more capacity through a combination of renewed focus;
 - functional convergence with other CCGs;
 - more effective decision-making;
 - lead the co-creation of a service future the clinical community can support;
 - continue to deliver against the NHS Constitution and national pledges;
 - transform the reputation of the CCG across the Vale of York and wider Sustainability and Transformation Plan footprint.
- 1.5 The Improvement Plan included an updated risk assessment of QIPP plans and other mitigations which increased the risk adjusted 2016-17 forecast deficit to £24.1m and this is the position that is reflected in the financial performance report for the end of September. The plan also outlines a number of measures to deliver the planned deficit of £13.3m in 2016-17 and the CCG is working with all partner organisations to close the remaining gap.

2. Developing a new mental health hospital for the Vale of York

- 2.1 In partnership with Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV), the provider of mental health services in the Vale of York, the CCG continues to consult with the local population on the development of a new mental health hospital.
- 2.2. To be able to co-create a facility with patients and the public it is important that the local community shares their views on the proposed number and configuration of beds and tells us what their preferred site is. The views and experiences of stakeholders are very important and these will play an essential role in shaping plans for the best possible solution for the hospital's service users, their carers and staff. To ensure as many views as possible are collated, the CCG has extended the deadline for the consultation to the 16 January 2017.

3. Cancer Services

- 3.1 In partnership with NHS Scarborough and Ryedale CCG and York Teaching Hospital NHS Foundation Trust, the CCG will be rolling out a £230K recovery package for cancer services over the next three years.
- 3.2 A Cancer Care Co-ordinator role will be piloted at Millfield Surgery with a view to rollout the scheme to practices in the City and Vale area.

4. Humber, Coast and Vale Sustainability and Transformation Plan

- 4.1 The Humber Coast and Vale Sustainability and Transformation Plan (STP) was published on the 21 November 2016.
- 4.2 The Humber, Coast and Vale STP is a set of proposals that taken together aims to improve health and wellbeing, improve standards of care, quality and safety for patients and restore financial balance to the local healthcare system.
- 4.3 The plan is the first stage in a programme of work undertaken by a partnership of local authorities, NHS commissioners and providers and a process of engagement with the public about the proposals in it will begin shortly.

5. Council of Representatives

- 5.1 At its latest meeting on the 17 November 2016, the CCG's membership received an update on the public consultation to deliver a new mental health hospital for the Vale of York, the CCG's plan to meet the GP Five Year Forward View and an update on the local Improvement and Financial Recovery Plan. Members also discussed a number of amendments required to the CCG's Constitution.

6. Emergency Preparedness, Resilience and Response

- 6.1 NHS England has agreed that the CCG offers 'Substantial Assurance' in its compliance rating for Emergency Preparedness, Resilience and Response (EPRR).
- 6.2 Partners at NHS England issued the Operational Pressures Escalation Levels (OPEL) Framework in November 2016 and all CCGs now report the new levels at the weekly winter calls.
- 6.3 On-Call Directors have agreed the 24/7 rota to cover the Christmas and New Year Bank Holidays. Following the floods in December 2015, and in order to make the rota more robust, the CCG has agreed that one Director will be on-call with another acting as 'reserve' in case of emergencies.
- 6.4 Following the publication of the 'Joint Doctrine: The Interoperability Framework', NHS England has arranged Joint Emergency Services Interoperability Programme (JESIP) training for NHS personnel involved in Emergency Planning. To understand the structure for managing the local multi-agency response to emergencies based on the Civil Contingencies Act (2004), the CCG's EPRR Lead attended the JESIP training session on the 21 November 2016
- 6.5 The start and finish lines for the Tour de Yorkshire 2017 were announced earlier this month. Tadcaster has been identified as one of the locations.

7. Optimising outcomes from elective surgery

- 7.1 Maximising opportunities for improving health is a critical element in achieving a sustainable health service into the future. The CCG has a statutory responsibility to improve the health of the Vale of York population and to provide individual patient-centred care for health promotion, prevention, diagnosis, treatment and rehabilitation.
- 7.2 The Vale of York Prevention and Better Health strategy has been developed to demonstrate how focusing efforts on prevention, self-care and shared decision making can support a shift in the way health care resources are valued and to empower patients in the Vale of York to become more active participants in shaping their health outcomes.
- 7.3 From January 2017, the CCG will no longer routinely commission elective surgery for patients with a BMI of 30 or above or those who are recorded as a current smoker. Elective surgery will be considered when criteria are met. The criteria are:

		Optimising health outcomes		
Patient BMI	BMI of 30 or above	Reduce BMI to less than 30 or lose 10% of body weight	or	Postpone elective surgery for 12 months
Smoker status	Patient is recorded as a current smoker	Stop smoking for at least two months	or	Postpone elective surgery for six months

7.4 Local clinicians will ensure that patients fulfill all the necessary criteria and provide evidence of any clinical indications before patients are referred to secondary care. All other cases will be referred, with evidence about clinical exceptionality, for consideration by the Individual Funding request panel.

7.5 There are exclusions to this commissioning position that are currently in the process of being drawn up. The draft list is:

- patients requiring emergency surgery or with clinically urgent need e.g. cholecystectomy, surgery for peripheral vascular disease;
- patients requiring surgery for diagnostic endoscopy procedures such as gastroscopy, colonoscopy, nasopharyngolaryngoscopy, laparoscopy, hysteroscopy and cystoscopy;
- patients receiving surgery for the treatment of cancer or the suspicion of cancer;
- patients referred for bariatric surgery (weight management exclusion only);
- any surgical interventions that may be required as a result of pregnancy;
- children under 18 years of age;
- vulnerable patients who will need to be clinically assessed to ensure where they may be able to benefit from opportunities to improve their lifestyle, that these are offered. This includes patients with learning disabilities, significant cognitive impairment or severe mental illness.

8. Better Care Fund

8.1 The Section 75 agreement in the process of being signed for the North Yorkshire Better Care Fund (BCF) plan. The agreement does not include risk share and in line with outcomes from the BCF Escalation Panel meeting, investment has increased slightly from 2015-16 levels.

- 8.2 A planning timetable for 2017-18 BCF plans has been proposed. A workshop delivered by NHS England for the Yorkshire and Humber region is scheduled for the 12 December 2016 to support the planning round.
- 8.3 The alignment of national metrics to BCF schemes remains a challenge at local and national levels. To overcome the challenge the BCF Performance and Delivery Group for the Vale of York footprint has developed controls that will inform monitoring returns, help to understand the impact of investments and inform future planning.

9. National plans and strategic issues

9.1 Strategic direction for health services in the justice system 2016-20

NHS England has published a Strategic Direction for Health Services in the Justice System, developed in collaboration with criminal justice and health partners, service users and their families, clinicians, providers and the third and independent sector. The Strategic Direction is a commissioning strategy which sets out the ambition to improve health and care outcomes for those in secure and detained settings, and support safer communities and social cohesion. It aims to narrow the gap in terms of health and care outcomes between those in the criminal justice system or other detained settings and the rest of the population. It also aims to reduce the number of people who are detained as a result of untreated health problems and to ensure continuity of care post release.

9.2 Modern slavery

All NHS staff have a duty to respond to modern slavery. This duty includes knowing what modern slavery is, what to look out for and how to report it. An important issue for all NHS staff, this is particularly relevant for those who work directly with patients.

9.3 Armed Forces and their families commissioning intentions

NHS England has published its Armed Forces and their Families Commissioning Intentions 2017-18 to 2018-19 which provides information to commissioners of healthcare services about changes and planned developments in the commissioning and delivery of services for the Armed forces and their families registered with a Defence Medical Services (DMS) practice by NHS England.

9.4 Health and Justice commissioning intentions 2017-18

NHS England has published its Health and Justice Commissioning Intentions 2017-18. It outlines priorities for the commissioning of services in secure and detained settings in England. It also sets out priorities for liaison and diversion services, sexual assault referral centres and major national programmes. The document has been developed to support NHS England's overarching strategy, The Strategic Direction for Health Services in the Justice System: 2016-20.

9.5 Stay Well This Winter campaign

Public Health England (PHE) has launched its Stay Well This Winter campaign. In addition to the flu vaccination programme, the campaign is also urging those with long term conditions to prepare for winter by taking measures to ward off common illnesses. In partnership with PHE, NHS England is encouraging people to seek advice from pharmacists at the first sign of a winter ailment, make sure they have their prescription medicines before the Christmas period, and keep their homes warm.

9.6 World antibiotics awareness

NHS Improvement, Public Health England, NHS England and the Chief Medical Officer for England have been working together to mark World Antibiotic Awareness Week to raise awareness of the global healthcare threat of antimicrobial resistance.

9.7 Proposed action to cut sales of sugary drinks: staff encouraged to engage in consultation

NHS England's Chief Executive Simon Stevens is calling on patients, the public and NHS staff to have their say in a 10-week consultation on plans to cut the sales of sugary drinks sold in hospitals. In the Five Year Forward View, Simon Stevens committed to improving the health of NHS England's workforce. Rising rates of obesity amongst NHS staff are not only bad for personal health, but also impact on sickness absence and the NHS's ability to give patients credible and effective advice about their health. The consultation proposes levying a fee for any vendor of sugar-sweetened beverages on NHS premises.

9.8 Patients' experience of mental health services: latest statistics

NHS England has published the latest statistical information on patients' experience of mental health services in the NHS. More than 13,000 patients

gave feedback on their experiences of mental healthcare services provided in the community, sharing what worked well for them and what they felt needed improvement. NHS England has also produced a diagnostic tool to help NHS managers and the public understand what feeds in to the Overall Patient Experience Scores and to see how scores vary across individual NHS provider organisations.

10. Recommendation

10.1 The Governing Body is asked to note the report.