

To: All Members and Officers of the Health
and Wellbeing Board.

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Date: 14 May 2015

Dear Sir/Madam,

Health and Wellbeing Board - Thursday, 21st May, 2015

I have recently forwarded to you a copy of the agenda for the next meeting of the Health and Wellbeing Board.

I am now able to enclose, for consideration at next Thursday, 21st May, 2015 meeting of the Health and Wellbeing Board, the following reports that were unavailable when the agenda was printed.

9. **Clinical Commissioning Groups Annual Reports - TO FOLLOW** (Pages 1 - 4)

Duncan Whitehouse, Democracy Manager

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Topic:	CCG Annual Reports
Date:	21 May 2015
Board Member:	Alan White
Authors:	Duncan Whitehouse, Democracy Manager
Report Type	For information

Purpose of the Report

1. The CCGs (Clinical Commissioning Groups) are currently in the process of finalising their Annual Reports for 2014-15. This report provides a high level summary of some of the key messages emerging collectively from the Staffordshire CCGs Annual Reports and how their activity links to the Board's Living Well Strategy, the prioritisation of prevention and early intervention and the focus on patient voice.

Background

2. CCGs are required through Paragraph 5 of Section 14Z15 of the National Health Service Act 2006 (as amended) to provide an annual report to the NHS Commissioning Board in accordance with the relevant guidance. The structure and content of the reports are highly prescribed through relevant guidance. Detailed scrutiny of the annual reports sits with the CCGs Governing Body, its auditors and ultimately the NHS Commissioning Board as opposed to the Health and Wellbeing Board.
3. The Board has a role in ensuring CCGs plans link to the Health and Wellbeing Strategy and to that end a narrowly defined role in being consulted as part of the preparation of the annual reports. In undertaking a high level assessment of the annual reports analysis was based on the extent to which linkages could be drawn to:
 - the alignment with the Board's Living Well Strategy
 - the fit with the Board's preventative agenda, and
 - the mechanisms through which customer experience has, and is, informing planning.
4. This report brings together some key themes which the Board may wish to reflect on. It may also wish to consider what work is needed in terms of fulfilling its statutory role going forward of providing an opinion as to whether CCG Commissioning Plans have taken proper account of, and contribute to,

the delivery of the Living Well Strategy. The fulfilment of the Board's statutory role in this area is considered elsewhere on this agenda.

Key Themes

5. All of the CCGs have been actively involved in the development and approval of Staffordshire's Better Care Fund submission. For 2015-16 this amounts to a pooled budget of £105 million. The pooling of funding clearly aligns to the ambitions set out in the Health and Wellbeing Strategy with a focus on frail elderly pathways, the prioritisation of early intervention with people who are struggling to maintain their independence, integrating commissioning, integrating provision and locality-based commissioning.
6. All of the CCGs have actively engaged with Health and Wellbeing Board over the past 12 months and have contributed to and facilitated activities at the request of the Board. They all highlight how commissioning intentions have been integrated with the Joint Strategic Needs Assessment.
7. All of the annual reports highlight progress on key commissioning priorities that link to supporting groups prioritised in the Living Well Strategy. Examples include:
 - Stafford and Surrounds and Cannock Chase CCGs *frail elderly* pilot to proactively manage frail elderly patients through identification, risk stratification and holistic treatment plans for those at risk. This is in partnership with South Staffordshire and Shropshire Healthcare Foundation Trust and GP First.
 - Stafford and Surrounds, Cannock Chase, North Staffordshire and Stoke on Trent CCGs work with NHS England and Macmillan Cancer Care to transform the way cancer and end of life care services are commissioned. The aim is to deliver *joined up services* across the county, improve patient experience and detect cancer earlier.
 - East Staffordshire CCGs Improving Lives Programme which seeks to create a Prime provider service model for adults *with long term conditions and the frail elderly*, key cohorts identified in the Living Well Strategy.
 - North Staffordshire's CCGs development of a Front of House GP Led service in A&E to treat those that do not require emergency care combined with the development of an ambulance diversion scheme diverting urgent patients to the appropriate Walk in Centre thus reducing pressures on A&E services.
 - North Staffordshire's community triage service working with the Police and Crime Commissioner with the Police teaming up with community psychiatric nurses to reduce section 136 detentions and provide preventative support to those in need.

8. The reports also highlight a wider range of preventative activities including:

- Local activity in support of the national Choose Well campaign, directing people to the best options for medical help.
- Working closely with GP Practices to improve flu immunisation rates.
- Close joint working with Public Health around NHS health checks, weight management and smoking cessation.

9. All the annual reports highlight how the CCGs intend to seek and utilise patient voice and wider stakeholder engagement to positively impact on commissioning decisions and the management of quality and outcomes. Examples given as to how patient voice and community engagement is being utilised to inform strategic planning and prioritisation include:

- Cannock Chase and Stafford and Surrounds CCGS listening to feedback of patients and local residents regarding proposals to reduce the hours at the Minor Injuries Unit at Cannock Chase Hospital.
- How feedback from local communities prioritising long term condition care and care for the frail elderly contributed to East Staffordshire CCGs prioritisation of the Improving Lives Programme.
- North Staffordshire CCGs engagement exercise of people accessing A&E services and the engagement of the public in the debate around the model of care that supports patients discharged from hospital, in their own homes.

The Board would encourage the capturing of further case study examples in future reports of where patient voice is having a direct impact on the strategic priorities of the Board.

10. All of the annual reports highlight examples of collaborative working that are shaping innovative approaches to addressing local needs.

11. The annual reports highlight the development of the Commissioning Congress consisting of the 6 Staffordshire CCGs. The Congress has been established to avoid unnecessary duplication, share good practice and foster streamlined services for patients.

12. A key issue remains the risks relating to the financial sustainability of the health and care economy across Staffordshire and Stoke on Trent. East Staffordshire, Cannock Chase and Stafford and Surrounds CCGs all highlight controlled deficits for the period. Accountability rests with the individual organisations to manage and address deficits that exist for their organisation. There is however an ongoing need for leadership, collaboration and where

appropriate challenge from across commissioners, providers and regulators to continue to drive innovation and transformation at pace to ensure a health and social care system across Staffordshire and Stoke on Trent that is fit for purpose and sustainable. One of the key risks remains the delivery of the ambitions of the system within a financially challenged environment.

Recommendations

The Board is asked to:

- Note the key themes highlighted in the report.
- Consider the report alongside the discussion under agenda item 8 in respect of the Board's ongoing role of providing an opinion as to whether CCG Commissioning Plans have taken proper account of, and are delivering against, the Living Well Strategy. This will be reflected in the Board's Forward Plan.