



AGENDA ITEM NO: 7.0.

Meeting Title/Date:	Governing Body - 19 November 2019		
Report Title:	Chief Officer Report		
Paper Prepared By:	Jerry Hawker	Date of Paper:	5 November 2019
Executive Sponsor:		Responsible Manager:	
Committees where Paper Previously Presented:			
Background Paper(s):			
Summary of Report:	To provide the Governing Body with an update on national, regional and local developments pertinent to the provision of care in Morecambe Bay and to discharging the statutory duties of NHS Morecambe Bay Clinical Commissioning Group.		
Recommendation(s):	The Governing Body is asked:- 1) Note the content of the paper. 2) Ratify the approval of the Lancashire and South Cumbria Joint Committee of CCG's (Item 11.0).		
			Please Select Y/N
Identified Risks: (Record related Assurance Framework or Risk Register reference number)			
Impact Assessment: (Including Health, Equality, Diversity and Human Rights)			
Strategic Objective(s) Supported by this Paper:			Please Select (X)
Better Health - improve population health and wellbeing and reduce health inequalities			X
Better Care - improve individual outcomes, quality and experience of care			X
Delivered Sustainably - create an environment for motivated, happy staff and achieve our control total			X
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Chief Officer Report – November 2019

1.0 Commissioning Committee Meetings

1.1 MBCCG Commissioning Committee meetings

The Executive Committee (EC) met on the 24th September, 8th October and 22nd October. In addition to the standing items on Quality, Finance and Performance, key discussion items included; Audiology procurement, NHSE/I Single Operating Framework, Eating Disorder services, Clinical Leadership arrangements, CHC Overdue reviews business case.

The following decisions were made for note by the Governing Body.

- The Executive Committee approved the final stage of the procurement of a Lancashire & South Cumbria wide procurement of the Any Qualified Provider (AQP) Plus Audiology service. This will now enable the final award of contract to be made to the successful bidders.
- The Executive Committee reviewed and agreed an updated Bay Financial Recovery Plan (FRP) to be submitted to NHSE/I. The FRP presented an improved system forecast year end position of £5.5M variance to control total, representing an improvement of £6M on previously reported position.
- The Executive Committee reviewed the proposed investment in Eating Disorder services across Morecambe Bay CCG in-line with the Mental Health Investment standard and the 2019/20 Annual plan agreed by the Governing Body. The Executive Committee approved the investment in-line with the MHIS and requested that the final service specification be reviewed and agreed by the committee.
- The Executive Committee reviewed and supported a number of draft ICS documents including an outline case for change for acute paediatrics, an update on the LD clinical modelling work, and a proposed action plan regarding the future of Mental Health commissioning across Lancashire & South Cumbria.
- The Executive Committee approved a Lancashire & South Cumbria business case to address the significant level of outstanding CHC reviews. (see separate report item)
- The Executive Committee received the latest draft analysis on resource utilisation. This analysis is still in development but will provide a detailed analysis of how Morecambe Bay CCG resources are deployed across each ICC / PCN. The analysis is intended to support reductions in unwarranted variation and to improve our ability to demonstrate how resources are targeted to reduce inequalities.

1.2 Lancashire & South Cumbria Joint Committee of Clinical Commissioning Groups (JCCCG)

The JCCCG meeting on the 7th November 2019 was cancelled after consideration of the rules regarding purdah (general election).

2.0 Lancashire & South Cumbria Integrated Care System (ICS) Update

The Lancashire & South Cumbria Integrated Care System (ICS) board and Senior Leaders Executive (SLE) met several times in September and October. Key themes discussed were:

- Much attention and focus has been on developing the Lancashire & South Cumbria Long Term plan in response to the National NHS LRP. Draft plans have been submitted to NHSE/I which covers our ambitions for the future for the people of LSC, including detailed plans regarding a focus on “population health”, service transformation, activity, finance and workforce.

- Further to the ICP responses to the proposed new ICS Governance arrangements, the Chief Officer has been part of a Task & Finish group responsible for concluding arrangements. The latest governance proposals are to be presented to the ICS Board on the 6th November 2019. A verbal update will be provided to the Governing Body.
- On the 16th October an ICS workshop was held facilitated by Sir David Dalton. The workshop focused on governance arrangements and how the system can improve its decision making processes.

3.0 NHS England / NHS Improvement Single Operating Framework (SOF)

As reported at the September GB there is a new Single Operating Framework (SOF) which has replaced the CCG Assurance Framework (IAF) and the Trusts single operating framework used by NHSI. The new SOF is aligned to the intention to have single oversight of local systems (ICPs) rather than individual statutory organisations. In practice due to legislation this is still a bit “clunky”, but a step in the right direction.

The Q1 Assurance meeting was held on Tuesday 1st October with representatives from the CCG, UHMB and LCFT present. Not unsurprisingly there was a focus on quality matters including Urology services, Learning Disabilities and Mental Health; Performance including A&E and RTT performance and of course our financial position.

Overall the meeting went very well and the system (ICP) was largely complemented on its progress. The need to deliver the financial control total, improve A&E performance and reduce the number of 52 week breaches were the three areas of high expectation on delivery.

The Assurance letter issued after the meeting reaffirmed the areas of focus, and confirmed the requirement for the CCG (and partners) to sign off the Bay Winter plan (see separate agenda item) and submit an updated Financial Recovery Plan.

4.0 Alfred Barrow Health Centre

On the 6th November the new Alfred Barrow Health Centre was officially opened with representatives from the CCG, Healthcare Partners, County and District Councils and Construction Company representatives. Dr Geoff Jolliffe Chair of Morecambe Bay CCG officiated the opening ceremony with Pamela Reid, the longest continuously serving local NHS employee, with 52 years’ service, revealing a commemorative plaque.

The new healthcare centre brings together three local GP practices together with community services, mental health services and a pharmacy. The new centre also houses the local ambulance station and health support services for the ship yard.

The Health centre will open to the public on the 11th November 2019.

The Governing Body is asked to join in celebrating the opening of the new centre, recognising the significant commitment and effort made by CCG staff in contributing to the successful development and opening of the health centre.

5.0 CHC Overdue Reviews

As of September 2019 there were 4000 reviews outstanding across Lancashire & South Cumbria (LSC) with nearly 2800 overdue against the requirements set in the NHS CHC framework. This places LSC amongst the worst performing in the country, with Morecambe Bay a notable out-lier with over 700 outstanding reviews. Ensuring that timely reviews are undertaken are critical for ensuring patients receive the right care at the right time and that NHS funding is targeted at areas of greatest need. Following an extensive review, the LSC IPA Programme Board has developed a business case in partnership with Midlands & Lancashire CSU (MLCSU) and CHS Healthcare to

address all overdue reviews over a phased 18 month period. This will ensure that all CCGs are delivering the best possible care, improving compliance against the National guidelines and support the proposed new models for delivering Continuing Healthcare services (pending a separate business case).

All CCG's have been approached to support funding of the programme with an anticipated return on investment over an 18 month period. For Morecambe Bay CCG the business case sets a maximum investment level of £104,000 in 2019/20 and £242,000 in 2020/21.

After considering carefully the importance of improving patient care, balanced against the financial investment, the Executive Committee has approved the non-recurrent investment, pending agreement from all other LSC CCGs.

Pending final approval of the business case, the programme will be managed by the IPA Programme Board.

5.0 Clinical Leadership

Over the last few months a review of the Clinical Leadership has been undertaken with an aim to balance clinical leadership within the CCG with the increasing need to support Clinical leadership across new and emerging system approaches. The review had to consider:

- Clinical leadership as set-out in the CCG's Constitution,
- Emerging Clinical leadership and priorities established within Bay Health & Care Partnership.
- The importance of clinical leadership in our Integrated Care Communities and Primary Care networks
- Retaining a strong clinical leadership in discharging the CCG's duties around finance, quality and performance.
- Clinical leadership in the Integrated Care System

The Executive Committee has supported the following position moving forward recognising the need for continued flexibility:

- The CCG Clinical Chair and the five Executive GPs will continue to provide clinical leadership on the Governing Body and Membership Council.
- Dr Lauren Dixon (Clinical Lead Primary & Community Care) and Dr Andy Knox (Population Health) will focus their time on the Bay Health & Care Partnership as part of the ICP Leadership team and their associated system roles and responsibilities. Their attendance at internal CCG meetings will therefore be reduced accordingly.
- Dr Rahul Keith, Dr Sara Arun and Dr Jim Hacking will assume the key clinical leadership roles within the CCG, together with Geoff Jolliffe as Clinical Chair. They will cover all the CCG statutory responsibilities including quality, performance, and service developments accountable through the Executive Committee.
- The CCG will continue to appoint Clinical leaders to undertake specific roles within the CCG e.g. Diabetes, Women and Children; however these roles will be increasingly task specific rather than covering generic "service areas".

6.0 Mental Health Update

Pleased to confirm that after considerable work by all parties the transfer of mental health and learning disabilities services in South Cumbria from Cumbria Partnership Foundation Trust (CPFT) to Lancashire & South Cumbria Foundation Trust (LSCFT) successfully took place on the 1st October 2019, aligned to the delivery of the priorities set-out in the CCG's initial commissioning intentions focused on improving the quality of services in South Cumbria and supporting the commitment to more integrated services.

In concluding the transfer arrangements the CCG has committed up to an additional £500,000 investment in 2019/20 to support recruitment of new clinical staff in South Cumbria (with up to £1.6m recurrent full year funding from MHIS in 20/21).

Following discussions with NHS Improvement/NHS England, agreement has been made to increase capacity and capability in the management and clinical leadership in South Cumbria. This has included additional support from the CCG, UHMB and expertise from Northumbria, Tyne & Wear Foundation Trust (NTW). A single oversight (mobilisation) board has been established as part of the Lancashire & South Cumbria Mental Health Improvement Board.

7.0 Better Care Fund

7.1 Lancashire Better Care Fund Plan 2019/20

In line with national requirements the Lancashire Better Care Fund Plan 2019/20 was completed and submitted by the required date of 27th September. It is now subject to the regional and national assurance process. Following the submission of a small amount of further supporting evidence, positive feedback has been received indicating likely approval. Due to the lateness of the start of the process the plan is in effect a bringing together of existing spending plans rather than a more ambitious approach.

While the plan covers the Lancashire Health and Wellbeing Board area it has been developed in consultation with colleagues in Blackburn with Darwen, Blackpool and South Cumbria so as to continue towards greater cooperation and integration at ICP level.

7.2 Better Care Fund 2020/21

On 4 September 2019 the Government set out the results of the 2019 Spending Round. These included the confirmation that the Better Care Fund will continue into 2020/21.

“As the NHS works with local government on plans for enhanced and improved Primary and Community services, they should also be working together on continued integration of health and social care, as well as alignment to wider local government services such as housing.”

The NHS contribution to adult social care through the BCF will increase by 3.4% in real terms in 2020-21 and the improved Better Care Fund and Winter Pressures Grant will continue at the 2019/21 level.

8.0 SEND Update

8.1 Lancashire County Council

Following on from the joint Ofsted and CQC inspection in November 2017, the local area expects a re-visit inspection this Autumn. The last SEND Board took place on 16th September 2019 and spent time reviewing its self-assessment in readiness for the inspection. The previous inspection had highlighted 12 areas for action including joint commissioning and working with partners. There has been progress in most areas and the Board heard reports on all areas to seek assurance.

There are four areas that have not progressed sufficiently - acceleration plans have been produced to demonstrate the immediate action partners propose to take in order to rectify this. The current acceleration plans are for:

- Quality of Education, Health and Care plans
- Diagnostic pathways for autistic spectrum disorder across the local area
- Improved outcomes of children and young people who have SEN and/or disabilities
- Lack of accessible information on the local offer

The Neuro-Developmental pathway was presented; local commissioners and providers are now undertaking a gap analysis and developing local implementation plans.

The Board considered work underway for Preparing for Adulthood (transitions) which the previous SEND inspection had highlighted as an area of concern. Although progress has been made in health care transitions the board is seeking greater assurance on the wider collaborative transition agenda.

8.2 Cumbria County Council

The SEND inspection took place in March 2019; the local area received 9 significant concerns.

Cumbria County Council has worked with partner organisations to produce a draft written statement of action (WSOA) to address the significant concerns. Ofsted and the Care Quality Commission have now evaluated the written statement of action re-submitted by us on 7 October 2019. The statement of action was deemed to be fit for purpose in setting out how the local area will tackle the significant areas of weakness identified in the published report letter.

The written statement of action will be published on local websites, so that parents, carers, children and young people can understand the actions we are taking to improve the effectiveness of the local area in identifying and meeting needs and improving outcomes for children and young people with special educational needs and/or disabilities.

9.0 Funding For Hospices

In August 2019, plans were announced to provide £25 million in funding for hospices and palliative care services in England in 2019 to 2020. On 29th October NHS England confirmed the allocation that each Clinical Commissioning Group will receive.

For Morecambe Bay CCG a non-recurrent allocation of £164,000 has been confirmed. The CCG is waiting for confirmation of when the funding will be released to the CCG and plans will then be developed with the Hospices and other “end of life” partners to agree best use of this funding.

10.0 Change in oversight arrangements for Quality of Inpatient Care for people with a learning disability and / or autism

The Long Term Plan published in January this year reconfirmed our commitment to reduce the health inequalities faced by people with a learning disability, autism or both so they can live happier, healthier, longer lives. The Long Term Plan quality of inpatient care commitments include:

- improving the quality of specialist inpatient care for all people with a learning disability, autism or both across the NHS and independent sector, with a specific focus on reducing the use of restrictive practice; and
- reducing the number of people that access specialist hospital care away from their own area.

The Secretary of State for Health and Social care has announced that an early action needs to be ensuring that every person who is placed out of area has a minimum of a 6 or 8 weekly site visit from their commissioner. It is expected that NHS England specialised commissioning teams and all Clinical Commissioning Groups (CCGs) will be making plans for local delivery of this commitment, to be fully operational not later than the end of December 2019.

The Secretary of State also announced the expectation that, for CCG-commissioned inpatient care, the host CCG will take responsibility for the oversight of any issues relating to quality and safety from a commissioning perspective.

The CCG has commenced working with CCGs across Lancashire & South Cumbria to agree how best to effectively introduce the new requirements. Further NHSE guidance is expected by the year end.

11.0 Lancashire & South Cumbria Joint Committee of CCG's Terms of Reference

Further to previous reports to the Governing Body, the Terms of Reference for the Lancashire & South Cumbria Joint Committee of CCG's have been revised to better reflect the roles and responsibilities of the Committee particularly in-line with the emergence of system working across the ICS.

A final version of the Terms of Reference is attached for **ratification by the Governing Body** following agreement made at the October Governing Body development meeting.

12.0 Capital Funding

I am pleased to confirm the UHMB has been named as one of the 21 Trusts that will be able to access seed funding as part of the £2.7 Billion capital programme announcement by the Government. The seed funding will be used to develop plans to deliver new care services and hospital infrastructure by 2030. Lancashire Teaching Hospital (LTH) has also been named in the 21 and as a consequence both Trusts are working with the ICS and CCGs to ensure a system wide approach is taken.

Further details are still awaited and need to be considered in line with the new NHS Infrastructure Plan (HIP) published recently by the Government.

Jerry Hawker
Chief Officer
November 2019