

## Chief Officer's Report

<b>Agenda item 8, paper 4</b>	
<b>Author:</b>	Ralph McCormack, Interim Chief Officer
<b>Relevant Committees or forums that have already reviewed this paper:</b>	None
<b>Action required:</b>	To note
<b>Attached:</b>	None
<b>CCG Strategic objectives relevant to this paper:</b>	Core business: relevant to all / most objectives
<b>Risk</b>	There are no risks on the assurance framework and / or risk register relating to items in this report.
<b>Compliance observations:</b>	<b>Finance:</b> Not applicable
	<b>Engagement :</b> Areas of specific engagement are covered within this report
	<b>Quality impact:</b> Not applicable
	<b>Equality impact:</b> Not applicable
	<b>Privacy impact:</b> No issues identified
	<b>Legal:</b> Not applicable

## **EXECUTIVE SUMMARY**

### **1. Sustainability and Transformation Plan**

At the last Governing Body meeting in July, I explained that we had submitted our draft Sustainability and Transformation Plan (STP), created in collaboration with North West Surrey CCG, Guildford and Waverley CCG and local healthcare providers. Through the plan, we have started to explore the opportunities that closer working could bring to patients and the local healthcare system across our collective STP area known as Surrey Heartlands.

Taking into account feedback from NHS England, a further submission will be made at the end of October. The STP is a key part of our planning for next year and will help inform our commissioning intentions.

We have already started looking at six clinical areas which present good opportunities to collaborate on with our Surrey Heartland partners. Workstreams are in place to further explore these areas.

### **2. Managing Conflicts of Interest**

Governing Body Members will be aware that new guidance was issued in June on managing Conflicts of Interest and CCGs are now updating local policies and procedures. This work is being led for us by Jo Silcock, who has been working with various departments to bring together our different systems and create a fit for purpose policy.

The revised policy and supporting systems will not only ensure that interests are registered in a way that is appropriate and transparent but will also enable staff and GPs to report gifts, hospitality, honorariums and sponsorship. New forms have been designed, linking electronically to a revised database and the publication of interests (where appropriate). The Audit Committee is overseeing the detail of implementation of the new guidance.

### **3. Improving Access to Psychological Therapies**

Since the Improving Access to Psychological Therapies (IAPT) programme was introduced by NHS England in 2008, the treatment of adult anxiety disorders and depression in England has significantly changed. According to figures from the NHS, over 900,000 people now access IAPT services each year, and the NHS' Five Year Forward View for Mental Health has committed to expanding services further, and improve quality.

By 2020/21 NHS England would like IAPT services to expand nationally to enable at least 1.5m adults to access these evidence-based treatments a year. There is a clear need for support for people who are suffering from depression, anxiety and stress.

Next month we are commencing a campaign to promote the IAPT services available in the Surrey Downs area. Anyone aged over 18 and registered with a GP in our area can access free help and support via five different organisations we have commissioned to work with us. This campaign will include advertising on Eagle Radio, leaflets, posters and working with the media. We want to encourage people who may be finding it difficult to cope to make contact with our free service to improve their own mental health and wellbeing. Please do visit our website [www.surreydownsccg.nhs.uk/gethelp](http://www.surreydownsccg.nhs.uk/gethelp) for more information, and look out for our campaign.

#### 4. Junior Doctors Strike

At the time of writing, the British Medical Association (BMA) had suspended the industrial action planned for week commencing 12 September. However, the BMA has been clear in stating that the remaining programme of industrial action will, for the current time, stay in place. The BMA Council is proposing that junior doctors will stage a full withdrawal of labour for five days, between the hours of 8am and 5pm during the following periods: 5-7 October (weekend covered) and then 10-11 October; 14-18 November; and 5-9 December.

As with the previous industrial action that took place earlier in the year, we will liaise with all our providers to ensure that the correct processes are in place to manage services during this time. We hope that a resolution can be made regarding the talks with the Secretary of State on the introduction of a new contract, with minimal negative impact on patient care in Surrey Downs.

#### 5. Heads of Service Development Programme

We are working with our Heads of Service, as a senior leadership group, to see how we can work smarter and more effectively as an organisation. This will bring benefits right across Surrey Downs Clinical Commissioning Group, as well as developing our staff.

A series of workshops will be held over the coming months, enabling our Heads of Service to take time out to look at where we want to go as an organisation, and link in with the broader business plans. The programme has the support of the Executive Management Team and is being independently facilitated.

#### 6. BoardPad

Following on from our Governance Review, we have investigated implementing a paperless solution which will eliminate the need for paper copies of documents for our Governing Body and committee meetings, and at the same time improve collaboration.

We have chosen a solution called "BoardPad" and by the end of November, documents for all formal meetings will be available to committee members on a tablet device rather than in hardcopy. Governing Body papers will still be available for the public to download from our website at [www.surreydownsccg.nhs.uk/governingbody](http://www.surreydownsccg.nhs.uk/governingbody).

BoardPad is intended to reduce time spent by individuals and teams looking for documentation and papers, enable annotation, and provide opportunities for online collaboration. We look forward to using the solution at future meetings.

#### 7. Surrey Health and Wellbeing Board

At a meeting on 26 May 2016, attended by Dr Claire Fuller as our Surrey Downs CCG representative, the Surrey Health and Wellbeing Board discussed:

- **Domestic Abuse** - Board members agreed to consider how IRIS could be embedded as a means of referring cases of domestic abuse across Surrey.
- **Air Quality** - The Board would formally determine whether or not to include air quality as part of the Joint Health and Wellbeing Strategy.

- **Sustainability and Transformation Plans** - Members agreed that STPs should be considered in public at a future Health and Wellbeing Board meeting.

At a public meeting on 9 June 2016 the Board discussed:

- **Board Business (Surrey’s Joint Health and Wellbeing Strategy and Board response to Charters)** - The Board agreed to sign off the updated Surrey Joint Health and Wellbeing Strategy; give feedback on the draft dashboard once it had been circulated; and agreed to the suggested standard response to requests to sign Charters
- **Priority update: Promoting emotional wellbeing and mental health** - The Board noted the progress achieved against delivery of the Surrey and NE Hants Emotional Wellbeing and Mental Health Strategy actions; and supported identified challenges, in particular to ensure mental health was embedded in their organisations’ strategic approaches
- **Pharmaceutical Needs Assessment** - The Board approved the supplementary statement to the 2015 Pharmaceutical Needs Assessment; noted the plan to produce a full review of the Pharmaceutical Needs Assessment by April 2018; and agreed to receive an update on work being done for the 2018 Pharmaceutical Needs Assessment Revision at its meeting on 8 June 2017
- **Digital Roadmaps** - The Board noted the summary Local Digital Roadmap (“LDR”) ahead of its submission to NHS England on 30 June 2016. The finalised version of the LDR would be sent to Board members following its submission to NHS England.

At a private meeting on 12 July 2016 the Board discussed:

- **Transforming Justice in Surrey** - The Board agreed to ensure the Transforming Justice Programme was linked to the Multi-Agency Safeguarding Hub (MASH); the Transforming Justice Programme would ensure the Women’s Justice Project and the MASH would link in with the East Surrey Clinical Commissioning lead when it was rolled out; the Board requested a future update on the findings of the pilot in relation to care pathways for women offenders
- **Health and Wellbeing Approach to communications and Engagement** - The Board agreed with the approach and asked the Health and Wellbeing Board Communications Sub-Group to finalise the document and publish online
- **Healthwatch Surrey Annual Report 2015-16** - The Board recognised the progress made by Healthwatch Surrey and supported the refreshed mission, vision and priorities
- **Health and Wellbeing Board review and forward planning** - The Board agreed the forward plan for 2017 which would be published with the September 2016 Board meeting agenda.

<b>Date of paper</b>	30 September 2016
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