

Title of paper:	Chief Officer's Report		
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Date:	27 th February 2015		
Meeting:	Governing Body		
Agenda item:	07	Attachment:	03
For:	Information		
Executive Summary:			
This report covers the following areas:			
<ul style="list-style-type: none"> • Whistleblowing • Vanguard Bid • Primary Care • Developing an elective care strategy • Surrey Health and Wellbeing Fund (Better Care Fund) • Governing Body and Committee Review Process • CCG Website • Roadshows for Commissioning Intentions • Diabetes service mobilisation 			
Compliance section			
Please identify any significant issues relating to the following			
Risk Register and Assurance Framework	A number of these areas are on or are linked to the CCG risk register and / or assurance framework - Vanguard Bid, Primary Care, Developing an elective care strategy, and the Better Care Fund.		
Patient and Public Engagement	Roadshows for Commissioning Intentions are specifically highlighted.		

Patient Safety & Quality	There is a particular link between whistleblowing and patient safety
Financial implications	Vanguard Bid, Primary Care, Developing an elective care strategy, and the Better Care Fund all have strong financial components.
Conflicts of interest	New conflict of interest guidance has been issued specifically with regard to developments in primary care.
Information Governance	Information sharing will be a particular feature of a successful Vanguard bid.
Equality and Diversity	No specific issues
Any other legal or compliance issues	The Vanguard bid may require organisations to exploit legal arrangements for partnership working to the full.
Accompanying papers (please list): Chief Officer's Report; summary of principles and actions on NHS Whistleblowing.	
Summary: What is the Governing Body being asked to do and why? The Governing Body is asked to NOTE the report	

Whistleblowing

You will be aware that new policy continues to be made as a result of Sir Robert Frances' 2013 report into Mid Staff Hospital. This month has seen the publication of new proposals for NHS whistleblowing. The aim of this work was to ensure that

- NHS workers can raise concerns in the public interest with confidence that they will not suffer detriment as a result
- appropriate action is taken when concerns are raised by NHS workers
- where NHS whistleblowers are mistreated, those mistreating them will be held to account.

The CCG has had a whistleblowing policy since its inception but this has recently been revised and is being consulted on with our staff before being re-issued next month.

The CCG fully supports robust whistleblowing policies in the providers it commissions services from and sees these as an essential part of ensuring that the public can have confidence in the care it is receiving from the NHS. A key aspect of Sir Robert's proposals is that existing employment legislation does not provide whistleblower's with sufficient protection. He therefore sets out 20 principles for the NHS to take action against, and recommends that progress against these is reviewed annually. A summary of these is attached.

For more information please go to <http://freedomtospeakup.org.uk/>

Vanguard Bid

In January NHS England and its national partners announced a new programme to focus on the acceleration of the design and implementation of new models of care in the NHS.

As set out in the Five Year Forward View, rapid progress is needed to speed up the development of new care models for promoting health and wellbeing and providing care that can then be replicated more easily in other parts of the system.

Through the New Models of Care Programme, individual organisations and partnerships, including those with the voluntary sector, have been invited to apply to be 'vanguard' sites. These organisations will have the opportunity to work with national partners to co-design and establish new care models, tackling national challenges in the process.

NHS Surrey Downs CCG and its local partners including CSH Surrey and Epsom St Helier NHS Trust submitted a bid in time for the deadline of Monday, 9 February 2015. If successful we would receive a support programme of:

- technical expertise with peer learning, and removal of barriers to change;
- practical support across a number of areas such as designing patient-centred care, and increasing community involvement;
- clinical workforce redesign; using digital technology to rethink care delivery;
- the optimal use of infrastructure;
- development of ideas around legal, contractual, procurement and capitated payment arrangements.

Primary Care Developments

As you know we have a view as a CCG that the development of primary care is essential to managing the whole system, and we have therefore been proactive and ambitious in seeking to take on the co-commissioning of primary care with NHS England and to develop specific projects through initiatives such as the Prime Minister's Challenge fund.

Since the last meeting we have submitted proposals in both the above areas, and I will provide an update on progress at the Governing Body meeting. What is encouraging is the outcome of the dialogue with member practices, which gives us a much clearer level of support despite the complexities and tensions in the system.

Developing an elective care strategy

The Executive has now commenced work on the development of an elective care strategy, which will be a key component of our future approach to balancing access and effectiveness with our financial challenges. Initial works suggests a focus in three areas:

- service redesign as part of a long term programme of rolling review;
- contractual efficiency and demand management;
- and continued focus on referral support, making clearer links between this and service redesign.

Better use of data will be key to the above, particularly contracting and demand management.

Surrey Health and Wellbeing Board Update

The January meeting of the Health and Wellbeing Board focused on the Better Care Fund. Feedback from the national assurance team highlighted the following:

- Making clearer how our plan meets the 'national conditions' such as 7 day services to support people leaving hospital, sharing information and protecting social care services;
- Providing more evidence around how organisations such as acute hospitals and community services will be involved and how the plan aligns to other strategies and plans;
- Agreeing how decisions will be made, who has what responsibilities and which responsibilities are shared;
Making the proposed local initiatives clearer which are found in 'Annex 1' of the plan;
- Clearer explanation of what our targets are and how we'll know if we've met them for example reducing the number of older people (65 and over) to care homes, increasing the number of older people still at home 91 days after discharge from hospital into reablement / rehabilitation services and a reduction in the number of patients occupying a hospital bed who are ready for discharge, but awaiting other services before they can be discharged.

For more information go to <http://www.healthysurrey.org.uk/a/6194717-7963965>

Governing Body and committee review process

As you know a key principle of good governance is that organisations should review their own culture and processes and seek to improve the way they work. This is particularly important to Surrey Downs CCG as it is facing some significant transformational and financial challenges.

We will therefore be reviewing the way both the governing body and the committees function to ensure these continue to improve to meet these challenges. These reviews will cover a wide range of areas and we are sharing our approach with NHS England to ensure that there is a mutual confidence that the outcomes will help us adapt to meet the future.

CCG Website now live

I am very pleased to report that the CCG's new web site is now functioning. This is important as it means we should be able to communicate with and listen to our public and our stakeholders far more effectively. The new site offers a number of important benefits and adopts our recently agreed corporate branding.

Benefits of the new CCG website include the following.

- As the current website is no longer supported by Microsoft, the new website ensures continuity of information available
- It's clearer, easy to navigate and has better accessibility options, including a google translate function and more in-depth search function
- More visual signposting to services, including an interactive map of the Surrey Downs area, with key links to GPs and local providers
- A specific area of the site dedicated to CCG projects, where members of the public can access up to date information on what we are doing and how they can be involved
- More information about CCG services, including how services are hosted Surrey-wide

Roadshows for Commissioning Intentions

Over Christmas and the New Year, the Communications and Engagement Team held community roadshows in Dorking, Leatherhead, Epsom and Esher town centres to present our 2015/16 commissioning intentions to the public. The roadshows were deemed a great success and saw the team hold conversations with over 100 local people about our plans for the future of health and care services across Surrey Downs. Similar community engagement events and projects will be taking place this year to provide patients and members of the public opportunities to feed in their views on the commissioning and redesign of services.

Diabetes service now mobilised

Our innovative new service to tackle rising levels of diabetes in the Surrey Downs area is now fully operational. The service, which was developed in partnership with local GPs and Diabetes UK, enables patients to receive specialist treatments closer to home, within their own GP practices or at well-equipped centres in Dorking, Leatherhead, Molesey and Epsom.

The illness already accounts for an estimated 10% of national NHS budgets, 80% of which is spent on treating avoidable complications such as blindness, limb amputation and stroke, and the forecast is that more people will develop the disease in years to come.

On behalf of the Governing Body I would particularly like to thank Gavin Cookman, our lay member for Governance, and Dr Stewart Tomlinson, Clinical Lead for Diabetes for all their hard work in bringing this to fruition. The new service has been developed in line with nationally recognised best practice following consultation with local clinicians and people living with diabetes and is an excellent example of multidisciplinary working.