



**NHS Castle Point & Rochford CCG
Governing Body
Public Part I
31st January 2019**

Agenda item 06

Accountable Officer's Report

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Status: For noting

Appendices to this report	
Appendix 1	<ul style="list-style-type: none">• None
Associated Papers	
Papers previously considered by this CCG	<ul style="list-style-type: none">• N/A
CCG Policy Documents	<ul style="list-style-type: none">• N/A
External Documents	<ul style="list-style-type: none">• N/A

Full Report

1. National Updates

1.1 NHS Long Term Plan

NHS England published the [NHS Long Term Plan](#) Monday 7th January 2019.

The plan has been drawn up to make the NHS fit for the future and to get the most value for patients out of every pound of taxpayers' investment. In summary, the plan sets out how we need to do much more to improve the physical and mental health of the nation through better prevention and detection of diseases such as cancer.

Health and social care organisations in south east Essex are committed to the delivery of the plan, sharing an ambition to improve the well-being and lives of the people they serve. We would like to provide assurance that local plans are fully in line with the ambitions of the NHS Long Term Plan with a shared goal of overcoming the challenges that the NHS faces, such as staff shortages and growing demand for services.

More information on the NHS Long Term Plan can be found on a dedicated microsite: <https://www.longtermplan.nhs.uk/>, a two page summary along with a stakeholder briefing from a south east Essex perspective has been circulated.

1.2 Consultation events on items which should not be routinely prescribed in primary care

As part of NHS England's consultation, a series of events are taking place which professionals and patients are invited to. They will outline proposals for a number of items, including blood glucose testing strips and needles, and offer an opportunity for people to share their views. Dates and booking details are available on the NHS England website, where you can also find more information on the consultation. If you have any questions about the consultation or these events, please email england.medicines@nhs.net.

1.3 Missed GP appointments costing NHS millions

More than 15 million general practice appointments are being wasted each year because patients do not turn up and fail to warn surgeries that they will not be attending. Each appointment costs an average of £30, putting the total cost to the NHS at more than £216 million pounds on top of the disruption for staff and fellow patients. Read more [here](#). Local communications has been re-issued to help reduce missed appointments.

1.4 Promotion of the 2019 GP Patient Survey

NHS England has launched the 2019 GP Patient Survey (GPPS) which runs until March 2019. The survey provides unique information about patients' experiences, and is used alongside other important data sources to better understand the performance of the primary care system in England.

Promotional posters have been circulated to CCG patient groups and can be downloaded [here](#) (available in 14 languages).

Local Updates

2.1 Help Us Help You - winter communications

We continue to promote the Help Us Help You winter campaign which aims to reduce pressure on both primary and secondary Care.

Strong local social media engagement over Christmas saw the two CCGs reach over 17,000 people, with the posts about guide to health services across south east Essex shared 173 times – a lot of these were shares from local community groups. On Twitter, we had around 7,000 impressions. The PDF was downloaded around 300 times across both websites.

2.2 Planning the Future Event Outcomes and Next Steps

On 13 December 2018, a special meeting of the Joint Clinical Executive Committee was held to explore, with our system partners and others, what our priorities should be for the coming year in line with the health needs of our populations.

At the meeting, we had presentations from Public Health (Essex County Council and Southend Borough Council), the Directors and table discussions were had to identify key priorities and ideas for future QiPP.

Together with our combined CCG Clinical Executive Committees, we had representatives from Southend University Hospital NHS Foundation Trust, Essex Partnership University Foundation Trust, CCG Assistant Directors and the Eastern Academic Health Science Network.

This paper has been prepared to summarise the themes from this event and for the Clinical Executive Committee to provide feedback and approve the agreed priorities for the coming year.

Feedback from the Planning for the Future Event

A large number of ideas were generated by GPs, CCG staff and other stakeholders at the event on 13 December 2018. The top 5 identified priorities were as follows:

- a. Prevention
- b. Making First Contact Count
- c. Personal Responsibility
- d. Care Navigation
- e. Whole Patient Care

There was consensus in the room that any priorities should be digitally enabled and structural changes should not be discounted if they underpin transformation resulting in improved quality of care or improved access to services.

‘System wide’ was also a key theme with partnership working across commissioners, providers, third sector and local authorities identified as particularly key.

The CCGs are currently undertaking the planning round looking at activity assumptions, financial targets and operational planning. The thematic priorities identified above, if approved by CEC, will therefore be incorporated into the

planning assumptions and will drive the programme of work for the CCGs over the next year.

A report will be brought back to CEC and the Governing Bodies by the end of March with the final plan for 2019/20 including a programme of work, key milestones and timelines for completion.

2.3 Patient Engagement

The CCG continues to work closely with the Locality Development Managers in order to maximise patient engagement opportunities on behalf of the CCG and understand more about local issues and wider community support. The last two months has seen engagement with the below groups/organisations/audiences:

Rochford Extended Services, Elim Ministers (Rochford/Rayleigh), Canvey Island Community First Response and Southend Citizens Advice Bureau.

CAVS AGM took place on 14 November 2018. Tricia D'Orsi, Chief Nurse was invited to the event to give an overview of the Primary Care Strategy and was an opportunity to share the CCG's Primary Care Strategy video which was well received by the audience.

Knightswick, Canvey Island Health and Wellbeing Stand on 3rd January 2018. Promoting New Year health related messages.

Look ahead, and at the time of writing this report, the CCG is also due to take part in the below:

LD Community Hub, The Attic, Eastern Esplanade, Southend. The CCG will be represented at an initial joint planning meeting on 10 January 2019 to explore how the hub site will work and gain some levels of commitment from different services. The meeting is being led by Southend Borough Council who are keen to have CCG involvement in the development of a future model for the LD community.

Livewell Health and Wellbeing event, Clements Hall, Rochford Essex on 12 January 2019. The CCG are supporting the event with a view to promoting health related messages which will also be attended by the Locality Development Team, Provide and Community Agents.

EPUT Health Facilitation Nurses. The Patient Engagement Officer continues to work closely with the nurses exploring joint engagement opportunities to promote STOMP and LD Annual Health checks. J9 Training on 10th January 2019. **J9 is an initiative. The CCG is working with the Castle Point and Rochford Community Safety Partnership to raise awareness and to help victims of domestic abuse by becoming a J9 venue to help stop domestic abuse and help victims get the support they need within Castle Point Borough and Rochford District.**

Women's Institute. The CCG have been invited to present at a meeting of the Women's Institute at the Hadleigh Fire Station on 31 January 2018. The meeting will be themed around "Taking Care of Yourself" and the CCG have

been asked to present a talk in connection to the elderly, falls and safety in home.

2.4 Brexit Update

Commissioners are expected to ensure that their contracted health and care services are ready to manage the risks arising in a 'no deal' exit from the EU.

Commissioners are advised to continue with their business continuity planning, taking into account this national guidance, incorporating local risk assessments and escalating any points of concern on specific issues to the relevant mailboxes that have been designated for escalations.

Our EPRR team are working closely with the local commissioners, providers and Local Health Resilience Partnership to ensure that we have plans, risks and assurances in place as outlined in this Department of Health and Social Care guidance. The guidance requires the assessment of risks associated with EU Exit. This will cover the areas detailed below.

- Communication and escalation
- Reporting assurance and information
- Supply of medicine and vaccines
- Supply of medical devices and clinical consumables
- Supply of non-clinical consumable, goods and services
- Workforce (including professional registration and qualification recognition)
- Finance (including reciprocal healthcare, research and trials and costs associated with Brexit)
- Data sharing, processing and access to information

2.5 Allied Healthcare

On the 5th November 2018 the Care Quality Commission (CQC) informed all Local Authorities that Allied Healthcare were at risk of financial collapse, requesting immediate action by organisations to plan for the protection of people receiving care. The CCG'S have worked with the Local Authority and CCG locally to ensure that there is no impact on any patients in receipt of care packages from this provider. Interim alternative providers remain in place to support the transition of care provision if this is required.

2.6 Stopping over medication of people with a learning disability, autism or both (STOMP)

STOMP is a national project involving many different organisations within health and social care, which are helping to stop the over use of psychotropic medicines and the overuse of multiple medicines (polypharmacy) in these client groups. STOMP is about helping people to stay well and have a good quality of life.

NHS Castle Point and Rochford CCG and Southend CCG have a combined client group of 900 cases. The CCGs through the Quality Team and Medicine Management Team are working closely with our acute and community care providers to review the population using STOMP principles to ensure that the right medication is being given at the right time.

The CCGs Medicine Management Team has produced and shared a list of known service users who will need review with the Learning Disability Team within EPUT to start to progress. A Flagging system is now operation on SystmOne so all professionals who have access can identify and update onto this system at GP Practices. A request has been made to the provider service to provide a trajectory date of completion of this piece of work.

The CCGs have submitted to NHS England by request a survey monkey update on the current position for this quarter.

2.7 Transforming Care

Delivering the Transforming Care Programme (TCP) to achieve the agreed reduction in the numbers of people with learning disabilities and / or autism in hospital continues to be a significant priority for NHSE and the Transforming Care Partnerships. The targets for this have been set at a Transforming Care Partnership Board level - which locally includes the 7 CCGs and 3 Local Authorities of Essex, Southend and Thurrock.

Simon Leftley from SBC and Cathy Grtizner lead this process on behalf of the organisations as of January 2019 Tricia D’Orsi will act as the lead Essex Director of Nursing to support this programme. Tricia D’Orsi Chief Nurse is the Nurse Lead and is currently taking handover of this work stream.

Essex has 28 patient transforming care patients currently inpatients for January 2019. On the 7 January 2019, the actual number of health funded in-patients with learning disabilities for NHS Castle Point & Rochford CCG and NHS Southend CCG was 6 patients (summarised in table 1 below). For this reporting period one patient (NHS Castle Point and Rochford CCG) was discharged home with a supportive care package.

Table 1. Number of CCG Funded Inpatients by CCG.

	Castle Point & Rochford	Southend
CCG Funded Beds	2	4
NHSE Funded Adult Secure Beds	0	2
NHSE Funded CAMHS Beds	0	0

2.8 Primary Care Workforce

Mid and South Essex Sustainability Transformation Partnership (STP) Training Hub

On the 7 December 2018, NHS England Regional Team hosted the Mid and South Essex STP Checkpoint meeting to discuss the workforce initiatives and the progress made to date.

The CCG Workforce Team led by Tricia D’Orsi was congratulated on the progress made thus far with regards to the implementation of the workforce plan to support the Mid and South Essex Primary Care Strategy. . Positive feedback was given on the work undertaken further development of the locality teams.

NHS England acknowledged that there has been an improvement seen in the data quality for doctors and nurses obtained by member practices. A continued piece of work is underway with the CCG leads and member practices to ensure that the data that is recorded by NHS Digital is accurate and up to date. It was also recognised that the STP has allocated notable financial commitments to the development of the Training Hub and Workforce Team to ensure continuity of the projects including the pastoral packages offered to support existing and new GPs in the area.

2.9 GP Retention Intensive Support Site (GPRISS)

The Mid and South Essex STP has 'Intensive Support Site' status for a local GP Retention funding allocated by NHS England. The STP is required to design and implement a local programme from September 2018, and completion by March 2019. Guidance published by NHS England sets out the availability of new funding in 2018/19 to further support delivery of the commitment set out in the General Practice Forward View (GPFV) to ensure an additional 5,000 extra doctors working in general practice by 2020. This is with a key focus on supporting general practitioners (GPs) who are at risk of leaving or who have already left the profession.

The local GP retention fund is restricted to the following groups:

- GPs who are newly qualified or within their first five years of practice;
- GPs who are seriously considering leaving general practice or are considering changing their role or working hours;
- GPs who are no longer clinically practicing in the NHS in England but remain on the National Performers List (Medical).

On the 30 November 2018, the MSE STP GPRISS team received a site visit from Ian Biggs, Director of Primary Care Workforce and Infrastructure for the national NHS England team to discuss progress made. Various different presentations were made on the following subjects:

- The meeting was chaired by Tricia D'Orsi as Executive Lead for the STP.
- Dr Brian Balmer presented the Primary Care Strategy that informs the workforce requirements and the case for change required in our STP
- Caroline Russell presented the estimated costs to implement the Primary Care Strategy across the STP
- Dedicated change facilitator presented the ethos and approach to implement the 15 minute appointment pilot
- Training Hub team presented the progress made with GP Trainees, GPs in the mid and late career and what the impact has been

A dedicated telephone number and email account has been created for individuals to have an impartial discussion about their future aspirations. A database has been established to ensure that all enquiries are logged and captures the initial discussion and actions. A personalised action plan is then generated which incorporates the personalised support packages for themselves and their families if relocating.

The STP has been allocated 77 individual 1:1 coaching opportunities for GPs to access and is actively encouraged to participate in three 90-minute free sessions. To date, five GPs have mentioned to the Training Hub that they have completed the application form. We are waiting to receive an update from NHS England concerning the total places allocated to date. Active promotion from the Training Hub and the Primary Care CCG Leads is currently underway and Dr Sunil Gupta has developed.

3. Recommendation

The Governing Body is asked to **Note** the report from the Interim Accountable Officer.