

NHS Cumbria CCG Governing Body	Agenda Item
2 December 2015	7

Clinical Commissioning Group Annual Assurance 2014/15
Purpose of Report:

As part of the Health and Social Care Act 2012 and the NHS Act 2006 (Amended) NHS England has a statutory duty to conduct a performance assessment of each CCG. It does this through a quarterly and annual assurance process.

NHS England Cumbria and North East Team met with the Directors of NHS Cumbria CCG on 24th June 2015 for the 2014/15 annual assessment. The attached letter summarises this meeting and previous quarterly assurance meetings during the year and sets out the key points and agreed actions.

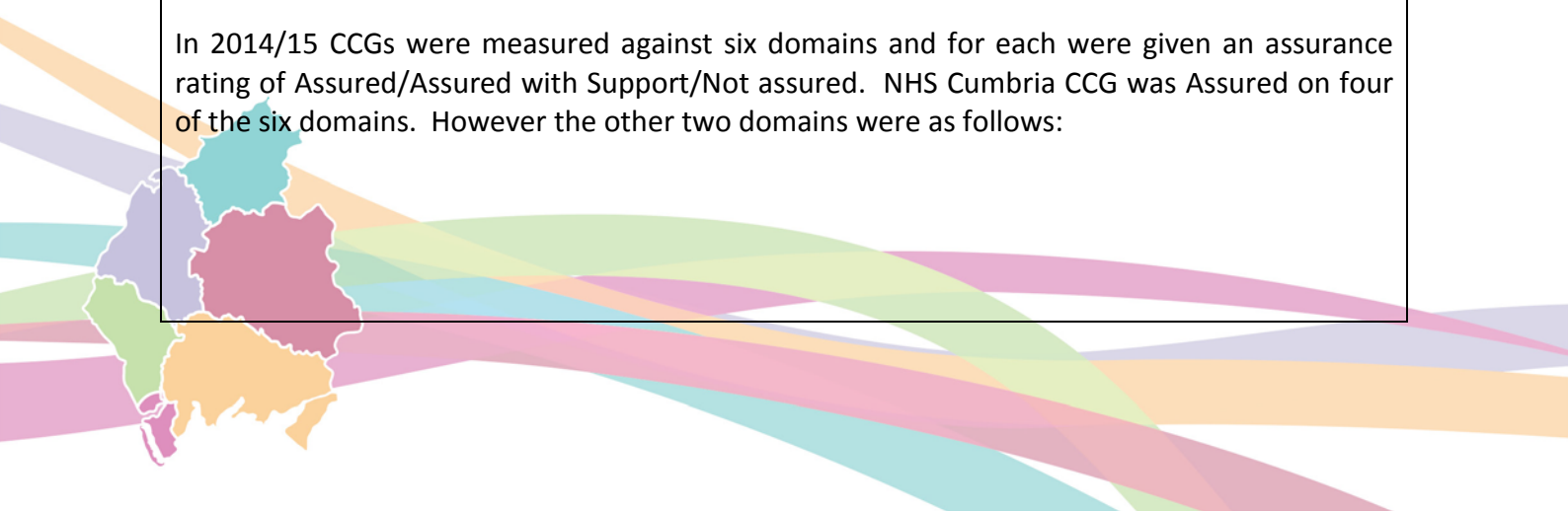
This letter is required to be published on the NHS Cumbria CCG website.

Key Issues/Considerations:

The letter sets out:

- Key areas of strength or good practice
- Performance against NHS constitutional standards
- Response to the NHS Five Year Forward View
- Adherence to NHS Statutory Duties
- Emergency Preparedness, Resilience and Response (EPRR)
- Key areas of challenge
- Key interdependencies and associated issues
- CCG Transformational Programmes
- Development needs and agreed actions

In 2014/15 CCGs were measured against six domains and for each were given an assurance rating of Assured/Assured with Support/Not assured. NHS Cumbria CCG was Assured on four of the six domains. However the other two domains were as follows:



- Domain 1 – Are patients receiving clinically commissioned, high quality services – Assured with Support
- Domain 3 – Are CCG plans delivering better outcomes for patients – Not Assured

The content of the letter identifies the reasons behind these decisions.

Recommendations:

The Governing Body is asked to take note of the details of the letter, in particular the key points and the actions agreed, and to note the requirement to publish the letter on the CCG website.

CCG Objectives:

This letter and its publication on the CCG website relates to the following objectives of the organisation:

3. Stabilise, keep safe and “problem solve” the current system
5. Develop our system leader role and our effectiveness as a partner
9. Develop a sustainable system financial plan
10. Maintain and lead a healthy CCG

Statutory/Regulatory/Legal/NHS Constitution Implications

As part of the Health and Social Care Act 2012 and the NHS Act 2006 (Amended) NHS England has a statutory duty to conduct a performance assessment of each CCG. The CCG is required to publish the summary assurance letter from NHS England onto its website.

Assurance Framework:

This report provides assurance against risk:

1. There is a risk that CCG is not delivering key NHS constitution targets
4. There is a risk that the CCG is unable to produce a credible 5-year strategic plan that is clinically sustainable and financially viable for the whole health economy.

Finance/Resource Implications:

None

Implications/Actions for Public and Patient Engagement:

Publication of the Annual Assurance letter onto the CCG website is a requirement to enable the general public access to the letter.

Equality Impact Assessment:

Publication of the Annual Assurance letter on the CCG website ensures equality of access for the public to information regarding the performance of NHS Cumbria CCG in relation to its statutory duties and responsibilities.

Lead Director	Hugh Reeve, Interim Chief Clinical Officer
Clinical Director	Hugh Reeve, Interim Chief Clinical Officer
Presented By	Hugh Reeve, Interim Chief Clinical Officer
Contact Details	hugh.reeve@cumbriaccg.nhs.uk
Date Report Written	26 November 2015

Dr Hugh Reeve
Clinical Chair
NHS Cumbria Clinical Commissioning
Group
Lonsdale Unit,
Penrith Hospital
Bridge Lane,
Penrith,
CA11 8HX

NHS England - Cumbria and North East
Waterfront 4
Newburn Riverside
Newcastle upon Tyne
NE15 8NY
Email address – t.rideout@nhs.net

Telephone Number – 0113 825 1507

7th October 2015

Dear Hugh

Clinical Commissioning Group Annual Assurance 2014/15

Many thanks for meeting with us on 24th June 2015 to discuss the annual assessment of Cumbria Clinical Commissioning Group (CCG), and establish the actions and development priorities for the coming year. This letter is a summary of the assurance meetings that we have held over the last year and provides a synopsis of the improvements and ambitions for future development laid out against the assurance domains. This is the final review using the six domains. Subsequent assurance meetings will be held on the basis of the new assurance framework with its five components: well led organisation, delegated functions, performance & outcomes, financial management and planning.

I am grateful to you and your team for the work you had done to prepare for the meeting and the open and transparent nature of our discussions. The meeting provided a helpful and candid conversation with a number of concerns discussed and a number of key actions agreed. This letter sets out the key points we covered in the discussion.

Key Areas of Strength / Areas of Good Practice

We would like to acknowledge the overall progress the CCG has made to date with the ongoing establishment of the organisation and in addressing local issues and challenges. The work in relation to major strategic and service transformation is complex and challenging. We recognise that Cumbria CCG want to be a successful CCG delivering the best outcomes for their patients. We have noted the support you are receiving from the North of England Commissioning Support Unit (NECS).

The CCG has made good progress around the 'Better care together programme' and is delighted that the programme now has confirmed Vanguard status. Good progress

is also being made with the 'Together for a healthier future programme'; we look forward to these programmes delivering real benefits to the people of Cumbria.

We congratulate you on achieving financial balance in a particularly financially challenged environment, acknowledging good performance in delivering your cost improvement programme. QIPP delivery will be challenging this year, good engagement with GP's will be key to its success.

Action: CCG to maintain progress with the improvement programmes.

Action: CCG to continue to do everything possible to deliver QIPP 15/16.

NHS Constitution standards

Constitutional standards remain a concern as the system appears fragile given the scale and breadth of challenges, which also include workforce. The capacity modelling has improved, but NHS England needs further reassurance around the constitutional standards recovery trajectories.

Particular challenges for the CCG include accident and emergency (A&E) targets, ambulance targets, 6 week diagnostics, elective care waits, cancer 62 day waits and healthcare associated infection (HCAI). NHS England acknowledges the efforts made by the CCG to improve the situation in the past year.

Action: CCG as system leaders to strive to meet all constitutional standards.

Action: NHS England to pursue and discuss escalation arrangements with Trust Development Agency (TDA) for North Cumbria University Hospital Trust. NHS England to convene a conversation with Health Education England, particularly in relation to medical recruitment.

During the meeting we discussed concerns around the Child and Adolescent Mental Health Services (CAMHS). It was acknowledged that the service is improving however the improvements are not at the pace expected by the CCG.

Action: CCG to remain focused on providing a reliable and safe CAMHS service.

Five Year Forward View

The CCG has started work to adapt its local strategy to incorporate the Five Year Forward View into its work. This has still to translate into a clear long term plan to implement the Five Year Forward View and we are expecting to see timescales by which this will be shared for discussion. There is a need to prioritise capacity, which is difficult with so many issues to address. The CCG acknowledged they need to be efficient and focussed in addressing the issues.

Action: CCG to prioritise work programme. Support offered from NHS England with phasing, sequencing and prioritising.

NHS Statutory Duties

We have received your annual report and accounts and through these reports are assured that the CCG is meeting all of its statutory duties.

Discussions throughout the year have demonstrated the focus and action taken within the CCG on addressing parity of esteem. The CCG have made new investments in mental health services in Cumbria which recur through the Better Care Fund including significant investment in Psychiatric Liaison and additional investment in CAMHS services. The progress made in the development of the Cumbria wide crisis care concordat (CCC) action plan which was submitted to the Department of Health in March 2015 is to be commended.

Significant time and effort has gone into collaboration with strategic partners for example the multi-agency/stakeholder partnership group to lead on the development and implementation of a joint CCG and CCC mental health strategy (The Cumbria Five Year Mental Health Strategy).

Action: *CCG to maintain and enhance relationships with partners.*

Emergency Preparedness, Resilience and Response (EPRR)

I would like to take this opportunity to thank you for your commitment to the work of the Local Health Resilience Partnership in the past year and in particular the undertaking of the on-call provision, a major component of your role as a Category 2 Responder as defined in the Civil Contingencies Act.

You may recall in her letter of the 20th May 2015, the NHS England National Director of NHS Operations and Delivery, set out the expectations for the 2015-16 EPRR assurance process which NHS England will use in order to be assured that NHS England and the NHS in England are prepared to respond to an emergency and has resilience in relation to continuing to provide safe patient care. As in the 2014 – 15 assurance process, this year's self-assessment against the NHS England core-standards is a fundamental element of how your CCG is prepared to respond to an emergency and I would wish to thank you in advance of the October submission date for your support in undertaking this vital piece of work.

Key Areas of Challenge

The CCG is working within a particularly financially challenged health economy with many historical quality and safety issues still having an impact.

It was noted that the CCG is currently not achieving delivery of the required financial surplus and that it faces considerable risks in relation to potential tariff modification proposals from acute providers.

It has some unique challenges, including significant inequalities in health outcomes. There is a 19.5 year gap between the wards with the highest and lowest life

expectancies in the county, with life expectancy in some areas 8.4 years below the national average.

The work done through the Public Health Alliance to deliver an improved model of health prevention/early intervention work in Cumbria shows great promise. We look forward to progress with outcome measures that will be defined in line with this model of care during 2015/16.

The CCG outlined key challenges for the year ahead in delivering the necessary efficiencies and in meeting the constitutional standards given competing pressures and the need for radical change within the current health economy. We acknowledge that all of these challenges are fully recognised within the CCG.

Action: CCG to monitor activity closely during 2015/16.

Action: CCG to consider and plan for the potential impact of tariff modification proposals.

Action: NHS England to pursue and discuss escalation arrangements with TDA for NCUHT.

Key Interdependencies and Associated Issues

During the meeting we discussed the positive progress around the primary care agenda highlighting a shared vision and operating model. Primary Care is a key integral component of the Success Regime that needs to have equal priority with secondary care.

You detailed the event on 17th September to clarify the vision and operating model for Primary care, and we look forward to good progress and continued focus on the co-commissioning agenda.

Action: CCG to produce operational model and continue focus on co-commissioning.

CCG Transformational Programmes

Progress has been made in changing pathways for high risk cardiac and gastrointestinal bleed patients within North Cumbria but we feel that the pace of progress on the other pathways identified for change (stroke services and the pathway for deteriorating patients) has been slower than we would have hoped. As noted earlier, the achievement of Vanguard status for the Better Care Together Programme will support transformation in South Cumbria.

The Success Regime will become the main vehicle for service transformation in the future and NHS England recognises the need for all parts of the system (providers, commissioners and regulators/assurers) to work together for the benefit of the patients of Cumbria.

Action: The CCG to actively engage in the Success Regime.

Development Needs and Agreed Actions

The overall assurance category for the CCG following the local Quarter 4 review and completion of the regional/national moderation process is not assured. Assessment against the individual domains is noted below.

Domain	Assurance rating
1. Are patients receiving clinically commissioned, high quality services?	Assured with support
2. Are patients and the public actively engaged and involved?	Assured
3. Are CCG plans delivering better outcomes for patients?	Not Assured
4. Does the CCG have robust governance arrangements?	Assured
5. Are CCGs working in partnership with others?	Assured
6. Does the CCG have strong and robust leadership?	Assured

During the meeting we discussed the Vanguard project recognising the need to progress at pace. The CCG and its partners need to agree a route map and set definitive timescales.

Action: CCG to share plan with NHS England.

The six domains of the outgoing assurance framework still provide a platform for continuing organisational development of the CCG and they also will inform the well led organisation component of the new assurance framework.

Action: Guidance for new assurance framework to be shared with CCG as soon as published.

Overall we would like to congratulate you on the progress you have made over the last year and the achievements you have made. The work today is dependent on the planning for tomorrow with radical change required. NHS England is heartened by the efforts of the CCG and its honest and open approach to the challenges it faces.

Thank you again to you and your team for meeting with us and for the open and constructive dialogue. I hope this letter provides an accurate summary of our discussions and notes the areas for ongoing development going forward. We look forward to continuing to work with you to improve the health and wellbeing of the residents of Cumbria.

Yours sincerely



Tim Rideout
Director of Commissioning Operations