

**REPORT TO MERTON CLINICAL COMMISSIONING GROUP
GOVERNING BODY**

Date of Meeting: 24th September 2015

Agenda No: 05

Attachment: 04

Title of Document: Clinical Chair and Chief Officer Report	Purpose of Report: To note
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Executive Summary: This report covers the main updates and activities undertaken by the Clinical Chair and Chief Officer in a number of strategic and operational areas.	
Key sections for particular note (paragraph/page), areas of concern etc: Governing body recruitment, governance changes and new assurance framework	
Recommendation(s): The Governing Body are asked to note this paper and to ask any questions relevant to the content	
Committees which have previously discussed/agreed the report: Nil – this report is provided for the Governing Body	
Financial Implications: Each of the areas discussed within the paper have a financial element to some extent. However, there is nothing extraordinary for noting in relation to finance.	
Implications for CCG Governing Body: <ul style="list-style-type: none"> • For note and discussion 	
How has the Patient voice been considered in development of this paper: <ul style="list-style-type: none"> • The patient voice has been considered particularly in the following areas: <ul style="list-style-type: none"> ○ East Merton Model of Care, patient engagement group 	

Other Implications: (including patient and public involvement/Legal/Governance/Risk/Diversity/ Staffing)

Nil of note

Equality Assessment: Each of the areas discussed within the paper have an equalities element to some extent. However, there is nothing extraordinary for noting in relation to equalities.

Information Privacy Issues: Nil of note

Communication Plan: (including any implications under the Freedom of Information Act or NHS Constitution) Aspects of the report are communicated through the appropriate internal and external communications channels.

Merton Clinical Commissioning Group Clinical Chair and Chief Officer Report

September 2015

1 Introduction

This is the first combined report for the Clinical Chair and Chief Officer to the Governing Body of Merton CCG. It covers the strategic developments and operational matters since the last Chief Officer's update to the Governing Body in July.

2 Clinical Chair Update

2.1 Governing Body recruitment

I am aware that I briefly covered this at the last Governing Body meeting, but I would like to congratulate Peter Derrick on his reappointment as a lay member of the Governing Body for Merton Clinical Commissioning Group (CCG). This is for a further two years, until September 2017 during which he will remain as Vice Chair of the Governing Body and Chair of both the Audit and Governance Committee and the Finance Committee.

I would also like to say a huge thank you to Mary Clarke, our outgoing Independent Nurse. Mary was instrumental in setting up Merton CCG and I would like to wish her the very best in her future endeavours. I am pleased to announce that we have appointed Sally Thompson to the role of Independent Nurse. Sally joins us with extensive knowledge in both general and mental health nursing gained in a number of health sector organisations. These include Guys Hospital and the Royal College of Nursing where Sally held a number of senior positions, including that of the Director of the Department of Nursing Policy and Practice. Most recently, and in an attempt to improve the patient experience, her career developed as a Director of Nursing in Mental Health. From here, Sally began to work independently and is responsible for the delivery of a range of challenging projects and roles related to quality and safety across the health sector.

We are currently in the process of recruiting to the Secondary Care Consultant and the Lay Member for Public and Patient Involvement. These interviews are within the next two weeks. We will then be recruiting to one of the Governing Body GPs, and that job is about to go out to advert. That concludes appointments to the Governing Body within this cycle.

2.2 Governance changes

As the Governing Body is aware, we have undertaken a review of our governance and are currently aiming to use a portion of our seminar in October to hold an in public discussion about changes to the governance and the required constitutional

changes. The Chief Officer has been working directly with NHS England to ensure they are aware and are content with the changes proposed.

The main drivers for our changes are

- To ensure the constitution reflects how we operate
- To increase public involvement within the organisation
- To provide a structure to enable clinical leadership to flourish
- To ensure that our member practices are able to be actively involved in clinical commissioning

2.3 South West London Commissioning Collaborative (SWLCC)

I am very pleased that we are having an update today of the work of SWLCC programme. This has been a clear area of focus for us both over the past two months and we have been working closely with NHS England and our Acute Provider colleagues. We held a deliberative event in Merton on 9th September where we went through the current issues that we are grappling with across South West London.

At this event we covered the following clinical areas with a range of people from our population

- Cancer
- Children and Young People
- Mental Health
- Out of Hospital
- Planned Care
- Transforming Primary Care
- Urgent and Emergency Care

We have also invited interested groups to meet with us both to ensure we can discuss the collective issues of quality and finance. We have also been invited to a number of external meetings to discuss these issues and we have reached out to a number of groups to meet to go through the same issues. If any members of the public today would also like to take us up on this opportunity then please contact myself or the Chief Officer directly and we can arrange this

2.4 Healthy London Partnership

The Chief Officer and I are starting to attend a number of Healthy London Partnership meetings and will bring updates to the Governing Body on these work programmes from November 2015.

2.5 Members Annual General Meeting

We held our second Members' AGM on 15th September to discuss our 2014/15 annual report and accounts. It was a well attended meeting with plenty of debate and we are confident that our practices are engaging further in the clinical commissioning within our organisation.

I am looking forward to our Public Annual General Meeting this evening at 6pm at Morden Assembly Hall, Tudor Drive, Morden, SM4 4PJ.

2.6 Membership Communications

Taking feedback from our membership practices, I am now in the process of sending to practices a bi-weekly update on matters that I would like to draw to their attention, and also areas of clinical concern that I feel they should be aware of. My aim is to give practices as much real-time information as possible regarding the performance of our providers to enable them to make decisions about where to refer their patients to ensure our patients get the highest quality care.

2.7 Patient Engagement Group

I am delighted that we now have this group set up. I know that it will take a few meetings to enable the members of this group to really work through the ways they would like to work, but I see this group as the start of a real shift to involving the public at all levels in our planning of services. The next Patient Engagement Group will be held on Tuesday the 29th September. .

2.8 Vision and Strategy

Finally, on today's agenda, you will see our commissioning intentions for 2016/17. I am delighted to see that the parts of our revised vision and strategy are contained within it. We aim to bring this to the Governing Body in November for sign off, but I have asked this is circulated in its current form next week so that you can see where we have got to.

3 Chief Officer Update

3.1 Staffing changes

I am pleased to announce the following new members of staff:

- Marisa Rosato - Mental Health Complex Care Clinical Manager. Marisa's role replaces those previously occupied by Claire Symons and Louise Fadina who worked across both Merton and Sutton CCGs. Marisa will work for Merton CCG only.
- Jackie Dodds - Interim Head of Quality. Jackie will be covering the role until early October when her successor David Parry will then take over the role.
- Darzi Fellowship Appointment – Dr Sinan Mir joined MCCG in July and will for a year, support our integration programme, including multi-disciplinary working and risk profiling. For those unfamiliar with a Darzi Fellowship, it is a clinical leadership development programme delivered through the NHS London Leadership Academy enabling clinicians in the early years of their careers to learn skills for future roles as clinical leaders.

As part of the Governance review, I am also currently reviewing the responsibilities of each of the Chief Finance Officer, Director of Commissioning and Planning and the Director of Quality. I will update the Governing Body on these during the Governing Body meeting in November.

3.2 CCG Assurance Framework 2015/16

At the time of the advent of CCG's, NHS England was given the statutory duty to make an annual assessment of each CCG's performance and meets this duty through its CCG Assurance Framework.

In March 2015, a new CCG Assurance Framework was published by NHS England which takes in to account all of the considerable changes which have taken place in the NHS environment since CCGs were initially authorised in 2013.

These changes have included:

- CCGs' own emerging record of achievement;
- the need for the NHS to respond to more challenging performance and financial positions;
- the new strategic direction for the health service set out in the NHS Five Year Forward View;
- NHS England's work with Monitor and the NHS Trust Development Authority to develop a more joined up approach to planning and supporting local health economies; and,
- the opportunity for CCGs to take on a much greater role in commissioning some of the services for which NHS England has a statutory responsibility.

As such, the new framework acknowledges that CCG's have different starting positions, with different populations and challenges, requiring different leadership responses. Some are operating in an extremely difficult environment, within challenged health economies or with legacy financial issues. Assurance covers the overall delivery of a CCG and will take place continuously throughout the year, rather than as a one-off inspection.

As part of this, an operating manual has been developed to complement the CCG Assurance Framework for 2015/16. It sets out for CCG's and for staff in NHS England's regional teams the details of how the assurance process will operate throughout the year. We will be having our quarter one assurance review on 13th October with NHS England and I am currently reviewing with the Director Team the areas that we are able to show good progress on.

3.3 Local service changes

Our new Improving Access to Psychological Therapies Service goes live from 1st October 2015 and we are very excited to see the new and innovative model be put in place. The service is called **miapt** and the provider has a strong reputation in this field and we are confident that this provider will deliver a good service for our patients. As with any service that changes from one provider to another, we need to be vigilant to ensure the service is running effectively. The Director of Commissioning and Planning has been asked to provide robust oversight to this handover to ensure it is as successful as we expect.

3.4 Mental Health contracting

Merton CCG is currently in negotiations with other South West London CCGs regarding the future contracting of South West London and St George's Mental Health Trust and I will update the Governing Body on that in due course.

3.5 East Merton Model of Care

We have had approval from NHS England about the business case to use an external organisation to pull together the design the model of care with our population, providers and clinicians. This will be an exciting part of co-production and I would like to thank the Public Health team for their support investment on this area.

3.6 Key Chief Officer Meetings

Epsom and St Helier University Hospitals Trust – Myself and the Clinical Chair met with Daniel Elkeles, Chief Executive and James Marsh, Joint Medical Director to discuss how we can work more closely as organisations and we have agreed to have a joint programme of work with them to move this forward.

Kingston Hospital NHS Foundation Trust – As some of you will be aware, Ann Radmore is currently the Interim Chief Executive. On the 24 August, I met with Ann to discuss some of the performance issues the Trust is facing. It was a helpful discussion and gave me some assurances on how performance will improve which will ultimately benefit our population.

South West London and St George's Mental Health Trust – I recently met with David Bradley, Chief Executive to discuss their recent CQC visit, our strategic direction and how we will work with them in future.

St George's Hospital NHS Foundation Trust – I met with Miles Scott, Chief Executive to discuss the underperformance of the Nelson services contract and the on-going challenges within their Emergency Department.