

A meeting of the Governing Body
10th July 2014

ENCLOSURE 8

DRAFT CORPORATE OBJECTIVES 2014/15

CLINICAL LEAD: Marc Rowland

Post: Chair

MANAGERIAL LEAD: Martin Wilkinson

Post Chief Officer

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Post Corporate Director

RECOMMENDATIONS:

The Governing Body are asked to agree the CCG's Corporate Objectives for 2014/15

SUMMARY:

The purpose of this report is to summarise the work that has been undertaken to ensure that the CCG's Corporate Objectives focus on the most critical objectives for 2014/15 to improve the commissioning for high quality integrated care and to create the platform to realise our vision for Lewisham people to have better health, best care and value from health.

KEY ISSUES:

1. Background

The Governing Body endorsed the high level CCG Corporate Objectives for 2014/15 based on the CCG's two year Operating framework at its meeting on 4th March 2014.

Members fed back their views at the Membership Forum (12th March) and the Members Engagement event (13th March) that the delivery of two specific objectives were most important:

- Developing a strong, sustainable primary care service as an essential foundation for future integration of services in Lewisham.
- Transforming the nursing workforce across primary, community, secondary and social care, within this wider context of supporting the development of integrated multi-organisational and multi-disciplinary teams.

The Governing Body had an opportunity to reflect and further consider the proposed corporate objectives at its workshop on 15th May 2014. There was a recognition that the

CCG would be more effective by focusing on fewer priorities to deliver the required level of transformational change, at a pace and scale to meet local needs and the current service and financial challenges. The two development objectives identified to improve the commissioning of high quality integrated care were:

1. Primary Care – to focus on population based commissioning and developing improved outcomes:

- **Reducing unwarranted variation eg Referral Support Services, cancer, immunisation and health checks;**
- **Improving primary care access and continuity of care by making primary care the first point of access for appropriate conditions and support self-management;**
- **Developing wider community support, as part of the multidisciplinary team work with others – voluntary sector, mental health, social care, pharmacy, diagnostic and specialist services.**

2. Establish Neighbourhood care networks, as part of the Adult Integrated Care Programme, to:

- **Reduce unplanned (emergency) admissions by:**
 - **improving the commissioning of services to support and care for people with long term conditions;**
 - **commissioning effectively a spectrum of community based intermediate services for frail and vulnerable, older people, mental health, end of life care and maternity to facilitate the shift of resources to community based settings;**
 - **improving the commissioning of community health services, aligned with the wider health and care neighbourhood teams;**
 - **establishing integrated multidisciplinary teams working with practices (including Social Workers, Mental Health, community, acute and voluntary services) supported by risk profiling, collaborative care planning, transfer of care, VPR tools (links with primary care – see above).**
- **Support the building of strong communities to support people to live well and stay healthy and be self-directing working in partnership with the Communities.**

So the Governing Body endorsed the Members' view, that these were the most critical objectives for the CCG to deliver, so should be the main focus for the collective leadership across the CCG, both clinically and managerially.

After further discussion at the Risk Management Group, it was proposed that there were also three core objectives about delivering high quality care today, embedded public engagement and good governance, which should accompany the two developmental objectives, to ensure that the CCG also maintain a focus and grip on day to day business during 2014/15.

2. Proposed Corporate Objectives for 2014/15

The following proposed five corporate objectives have been identified to be of particular importance for Lewisham CCG. Collectively, these are seen as the fundamental objectives to improve the commissioning of high quality integrated care during 2014/15 and will create the platform for realising our vision for Lewisham people to have better health, best care and value from health.

Core Objective 2014/15	
1. High Quality Care	Commission high quality care services today, which are: <ul style="list-style-type: none"> • safe, timely and consistent • provide positive patient experience • clinically effective to improve health outcomes and reduce inequalities • secured through robust contract management
2. Good Governance	Ensure robust governance arrangements deliver: <ul style="list-style-type: none"> • the CCG's statutory financial and non-financial duties; • compliance with national requirements and standards, including delivery of the NHS Constitutional rights and pledges for all Lewisham's residents • constitutional commitments as a members' organisation
3. Embedded Public Engagement	Public engagement is intrinsic to all commissioning activities which achieve: <ul style="list-style-type: none"> • a clear dialogue with all our communities; • public involvement in setting the CCG's strategy and commissioning priorities; • assurance and public accountability.
2014/15 Developmental Objectives	
4. Strong Primary Care	Focus on population based commissioning and developing improved outcomes by: <ul style="list-style-type: none"> • reducing unwarranted variation eg Referral Support Services, cancer, immunisation and health checks; • improving primary care access and continuity of care by making primary care the first point of access for appropriate conditions and support self-management; • developing wider community support, as part of the multidisciplinary team work with others – voluntary sector, mental health social care, pharmacy, diagnostic and specialist services (overlap with the neighbourhood networks

<p>5. Neighbourhood care networks - as part of the Adult Integrated Care Programme</p>	<p>objective - see below)</p> <p>Establish Neighbourhood care networks to:</p> <ul style="list-style-type: none"> • Reduce unplanned (emergency) admissions by: <ul style="list-style-type: none"> ○ improving the commissioning of services to support and care for people with long term conditions; ○ commissioning effectively a spectrum of community based intermediate services for frail and vulnerable, older people, mental health, end of life care and maternity to facilitate the shift of resources to community based settings; ○ improving the commissioning of community health services, aligned with the wider health and care neighbourhood teams; ○ establishing integrated multidisciplinary teams working with practices (including Social Workers, Mental Health, community, acute and voluntary services) supported by risk profiling, collaborative care planning, transfer of care, VPR tools (links with primary care – see above). • Support the building of strong communities to support people to live well and stay healthy and be self-directing working in partnership with the Communities
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3. Implementation and Monitoring of the Corporate Objectives

Further work is being undertaken by the clinical and managerial leadership teams to align the CCG's capacity to deliver these five corporate objectives. It is of particular importance to ensure that the appropriate leadership, capacity and capability is given to the two developmental objectives. So work is underway to prioritise the scope of work within each developmental objective, along with the necessary capacity and leadership required. A report summarising the conclusions of this work will be taken to the Delivery Committee in July 2014 – shared with Governing Body members for information.

Also the clinical and managerial leadership teams are reviewing work areas to identify where it is possible to release capacity by lowering the priority or stopping completely the work, improving the effectiveness internal working, maximising the added benefits of collaborative commissioning and reviewing South London Commissioning Support Unit service level agreement.

The CCG's Organisational Development (OD) plan is being refreshed which also will

support the development of the appropriate capabilities and smart ways of working required to effectively deliver the corporate objectives. The refreshed OD plan will be considered by the Strategy and Development Committee in September, before being taken to the Governing Body.

The Delivery Committee is responsible for overseeing the monitoring of the delivery of the Corporate Objectives. The Delivery Committee is in the process of identifying the most appropriate Key Performance Indicators (KPIs) to measure successful delivery, working closely with FLAG. This 'operational monitoring framework' will be used to monitor progress on a regular basis. An exception report will be produced for any objective that is assessed to be 'red' for the Delivery Committee to consider and onward reporting to the Governing Body.

CORPORATE AND STRATEGIC OBJECTIVES

The development of the Operating Plan has been informed by the CCG's strategic objectives and Commissioning Intentions for 2014/15 and 2015/16

The draft Operating Plan for 2014/15 and 2015/16 has been the basis of developing the Corporate Objectives for 2014/15

CONSULTATION HISTORY:

- Governing Body approved the CCG's Commissioning Intentions – 5th December 2013:
- Strategy and Development Committee (30th January 2014) - reviewed the CCG's Commissioning Intentions and identified twelve 'priority areas for action';
- Governing Body workshop (6th February 2014) – reviewed and revised the proposed priority areas;
- Delivery Committee (20th February 2014) – agreed the proposed priority objectives.
- Governing Body (6th March 2014) - endorsed the high level CCG's Corporate Objectives for 2014/15;
- Membership Forum (12th March 2014) – discussed the proposed Corporate Objectives
- Members Engagement (13th March 2014) - discussed the proposed Corporate Objectives
- Delivery Committee (20th March 2014) - noted the work that had been undertaken to develop the Corporate Objectives and the preliminary feedback from the Members.
- Governing workshop (15th May 2015) – agreed to refocus corporate objectives on fewer priorities
- Delivering Committee (22nd May 2014) – supported the two developmental and three core objectives
- Governing workshop (5th June 2014) – discussed and agreed to the refocused five Corporate Objectives
- Delivery Committee (26th June 2014) – considered the proposed Operating framework to

monitor the Corporate Objectives

PUBLIC ENGAGEMENT

- A Public Engagement exercise completed in September 2013 informed the CCG's Draft Strategic Plan.
- The analysis of the emerging themes from the CCG's engagement exercises with the public, members and stakeholders was used to inform the development of the CCG's Commissioning Intentions;
- Further Public Engagement on the CCG's Commissioning Intentions has been completed which is informing the development of the refreshed CCG's Strategic Plans during 2014/15.

HEALTH INEQUALITY DUTY

How does this report take into account the duty to:

- Reduce inequalities between patients with respect to their ability to access health services.
- Reduce inequalities between patients with respect to the outcomes achieved for them by the provision of health services.

PUBLIC SECTOR EQUALITY DUTY

How does this report take into account the duty to:

- Eliminate discrimination, harassment and victimisation and any other conduct that is prohibited under the Equality Act 2010
- Advance equality of opportunity between people who share a relevant protected characteristic and people who do not share it
- Foster good relations between people who share a relevant protected characteristic and those who do not share it

Corporate Objective on Good Governance includes ensuring that the CCG meets its statutory duties regarding the Health Inequality Duty and the Public Sector Equality Duty.

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