

**WILTSHIRE CLINICAL COMMISSIONING GROUP (CCG)
GOVERNING BODY MEETING IN PUBLIC**

INTERIM CHIEF OFFICERS REPORT

Agenda Item and Title:	GOV/18/01/08 Interim Chief Officers Report				
Date of Meeting:	23 January 2018				
Author:	Linda Prosser, Interim Chief Officer				
Appendices:	None				
Purpose:	Decision		Discussion		Information X

This report provides the CCG Board with an update on major developments in the local health system and with the commissioning portfolio.

1. Wiltshire CCG Update

1.1 As this is the first meeting of 2018 it is worth reflecting on where we are and what we are facing in the coming year, as part of both a local and national health system, as well as a statutory organisation in our own right. We know that this will be a hard year for the NHS. As we move closer to integrating relevant functions with the Local Authority, NHS England also requires commissioning bodies to reduce management costs. We will therefore be looking at what we can align with other CCGs to ensure commissioning costs are minimised; we also need to maintain a hard focus on the performance of the health system in the day to day. It is of course a very challenging time in the frontline of the NHS. There is a lot in the press at the moment about how Emergency departments are struggling to cope with demand. It is certainly the case here and whilst Salisbury continues to fair better than most, even there, too many patients are waiting longer than is ideal. Everyone continues to work hard to increase capacity and flow during this time and compared to this point last year, we are doing well in terms of minimised delays, flu vaccination rates and other indicators. However, there can be absolutely no doubt that the rise in demand - driven by Influenza and other winter illnesses at a time of increased numbers of people with frailties - is still outstripping capacity. As part of our winter planning we have established an integrated winter operations room at Chippenham hospital, and I've seen first-hand the benefits of different agencies sitting round the table and jointly problem solving on behalf of patients to get them out of hospital more quickly. We anticipate this may become a hallmark for future ways of working with clear benefits to all.

1.2 The National Emergency Pressures Panel met on 2 January, resulting in NHS England issuing national guidance to cancel non-urgent elective surgery until February. This will almost certainly mean that the Referral to Treatment target for operations is not met this year for all of our patients. We will of course still pursue the best possible achievement.

1.3 We have been working on the creation of a draft set of documents setting out the CCG's Care Operating Model, which will in turn inform an Urgent Care Strategy and a Primary Care Strategy. Clearly these are all interlinked and when agreed, following a period of engagement with partners, stakeholders and the public, will provide the framework for making important

development decisions, including those relating to services and buildings in the future. The Governing Body will be brought up to date with plans for this engagement.

1.4 Integration with Wiltshire Council and Joint Accountable Officer / Corporate Director of Adult Social Care post

As reported at the last meeting, we continue to work in increasing detail with the Local Authority on the arrangements for integration, to make sure there is sufficient clarity about the depth of the role to attract the best possible person. Our progress includes the setting out of a framework for financial arrangements across the two agencies and these will be discussed at a meeting with the Council leadership in February. Progress has been slowed by an unfortunate and unexpected change of personnel at the Council. Meanwhile we are engaging with the new acting Director of Social Care and discussions have begun to explore opportunities to maximise the alignment of staff and roles across organisations. This will include a review of the Director of Strategy post which was discussed at the last Governing Body meeting.

At that meeting we also discussed the benefits of some staff and team location moves within Southgate House to support and symbolise less silo'd ways of working. We haven't quite found an affordable solution to this yet but expect that we can.

1.5 Wiltshire provider developments

If we are to successfully integrate our health and care system there is a clear requirement for Wiltshire Health and Care, as an organisation, to develop and lead the system-wide reform and transformation. This ask goes above and beyond their commissioned status as community provider, and as organisational thinking evolves into formed strategies there will be an obvious need for Wiltshire Health and Care to increase its capacity and capabilities, which we will support them with. We expect to include a proposal from Wiltshire Health and Care in the 2018/10 commissioning plans.

At the same time we have committed to a further year of resource to support the development of some form of alliance across Primary Care during 2018/19. The GPs are keen to create a vehicle to support new, at scale working and sharing of back office costs, with an internal communication mechanism with and for Primary Care as a whole entity across Wiltshire. Following a series of meetings in the late autumn the practices are now in the process of identifying leaders and agreeing an organisational form that best suits them. We expect a proposal for the support needed in 2018/19 in time to finalise plans for the new financial year.

2. National Update

There is no doubt that we are seeing an increase in CCG mergers across the country as a response to pressures on resources. We remain vigilant to what this may mean for Wiltshire, whilst being confident that we are already of a sustainable size. Discussions with neighbouring CCGs continue, including progressing thoughts on how we might operate some of our functions at a greater scale. We are conscious that it will be necessary to release a member of staff to lead this piece of work and expect to agree arrangements during this month.

Linda Prosser
Interim Chief Officer