HEALTH SCRUTINY PANEL

25 JULY 2012

NHS NOTTINGHAM CITY CLINICAL COMMISSIONING GROUP - VISION
AND ORGANISATIONAL VALUES

REPORT OF HEAD OF DEMOCRATIC SERVICES

1. Purpose

The report provides an update on NHS Nottingham City Clinical Commissioning Group's (CCG) vision and organisational values, as well as its emerging Commissioning Strategy. Dawn Smith, the CCG's Chief Operating Officer will introduce the report.

2. Action required

2.1 The Panel is asked to note the update provided by Ms Smith, and to consider how and when it needs updating on progress in respect of the CCG's Commissioning Strategy.

3. Background information

- 3.1 At its meeting on 21 December 2011, the Panel considered the CCG's draft Visioning document minute 10(b) refers. It was explained at the time that the draft Vision was explicit in respect of 'how' it was to be delivered, in addition to simply stating 'what' it was, and that it captured the principles of compassion and caring, as well as efficiency and value for money.
- 3.2 The Panel welcomed and supported the draft Vision, and will be pleased to note that the CCG accepted its recommendation that actively involving 'community groups' has been made explicit in the final version of the Vision. Appendix 1 to this report sets out in more detail the feedback from the Vision consultation exercise, and how it has been addressed within the final version. A helpful definition of key terms used within the document is also included.

At this meeting, the Panel will also hear how the CCG has been taking forward its Commissioning Strategy, and an agreed set of expected behaviours, underpinning transparency, openness and accountability, will also be developed.

4. <u>List of attached information</u>

None.

5. <u>Background papers, other than published works or those disclosing exempt or confidential information</u>

None.

6. Published documents referred to in compiling this report

Report to and minutes of the Health Scrutiny Panel meeting 21 December 2011

7. Wards affected

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8. Contact information

Contact Colleague

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16 July 2012

Vision and Organisational Values

1. Introduction

This paper presents NHS Nottingham City Clinical Commissioning Group's vision and organisational values, which have been updated and finalised following the conclusion of engagement activities with patients, carers, the wider public, and other key stakeholders.

2. Development of the vision and organisational values

In May 2011, the organisation's clinical and managerial leads held an independently facilitated development session with the purpose of defining a clear vision for the emerging Clinical Commissioning Group. As a result, a draft vision was developed to describe the Clinical Commissioning Group's purpose, along with a set of values that detailthe key principles that will guide the organisation in achieving its vision.

In order to ensure full support and ownership by the Clinical Commissioning Group's constituent practices, the draft vision and organisational values were discussed at a CCG-wide event during July 2011. This involved representatives from all constituent practices, including GPs, practices nurses and practice managers. A similar staff engagement event was also held in July.

A final draft version of the vision and organisational values was endorsed by the GP Commissioning Governance Committee on 21 September 2011.

Following this, a six-week engagement period was run to ensure that the Clinical Commissioning Group establishes a vision that is shared withits population and other key stakeholders.

3. Feedback from engagement activities

A wide range of engagement activities have been undertaken, which have included canvassing all individual and group members of the Citizens' Health Panel, presenting at Board meetings ofkey providers and at meetings of the Health Scrutiny Panel and Health and Wellbeing Board. A summary of all engagement activities is provided at **Appendix B**.

As a result of engagement activities, a total of 204 responses were received from patients and community groups, along with the direct comments received from attendance at stakeholder meetings.

An analysis of all feedback has now been completed. The vast majority of feedback received was supportive and welcoming of the draft vision and organisational values. A very positive message was also received in relation to the inclusive approach that had been taken to the engagement process.

The following bullet points provide a summary of the main themes arising from the feedback and the resulting changes that have been made to the vision and organisational values.

- The inclusion of the words 'care and compassion' within the organisation's vision was very well
 received by both patients and key stakeholders and it was felt that this set the organisation
 apart from its predecessors and emphasised the increased clinical involvement.
- A significant amount of the feedback received from patients and community groups stressed
 the need for the organisation to listen to and understand its population, to be responsive, and
 to give patients a real voice in the delivery of local services. These areas have been identified
 as priorities for the Clinical Commissioning Group and have already been embedded within the
 vision and organisational values. However, it isacknowledged that these priorities need to be

clearly communicated, so in response to this feedback, we have further defined some of the key terms used within the vision. We have also incorporated the provision of inclusive services as part of the vision and re-worded the first organisational value in order to emphasise the importance of patient involvement.

- Another common area of feedback from patients and community groups was the need for the
 organisation to demonstrate its commitment to working in partnership to ensure delivery of
 national and local priorities. Again, this is a recognised priority area for the Clinical
 Commissioning Group and has been included within the vision. However, in response to this
 feedback we have included an explanation of 'working together' within the new set of
 definitions that have been produced to aid wider understanding of the vision.
- Patients and community groups also felt that accountability should be placed at the heart of the
 organisation's vision. In response, the Clinical Commissioning Group's commitment to being
 open, transparent and accountable to its population has been incorporated within the definition
 for the term 'patient-centred'.
- A number of patients also highlighted that they felt that the vision was not written in a way that
 most people could easily understand. In order to ensure that the vision and organisational
 values are able to be clearly communicated, we have created a set of definitions of the key
 terms used within the vision.
- Messages received from our key stakeholders included the need for the organisation to be more ambitious in its vision. As a result, we have amended the organisation's vision from reducing health inequalities to ending them. The vision has also been amended to be more explicit about improving health outcomes rather than just 'improving health'.
- The fourth organisational value relating to the development of the local workforce caused some
 confusion with a number of provider organisations. As a result, this has been further clarified in
 line with recent amendments to the Health and Social Care Bill and is now directed towards the
 promotion of education and training.

Please refer to **Appendix A** for a copy of the final vision and organisational values.

4. Next steps

Action will now be taken to feedback to everybody that contributed to the engagement process, ensuring that explanations are provided in response to comments received. Details will also be provided to explain the next steps for the organisation in terms of turning the vision into reality.

Work is currently ongoing to develop the organisation's Three-Year Commissioning Strategy, which will draw on the Joint Strategic Needs Assessment to clearly describe how the organisation's vision will be delivered to address the health needs of Nottingham City by improving health outcomes and reducing health inequalities.

An agreed set of expected behaviours willalso be defined to support the organisational values. These will further address issues of transparency, openness and accountability.

5. Recommendation

The GP Commissioning Governance Committee is requested to consider and approve the Clinical Commissioning Group's vision and organisational values.

Lucy Branson Company Secretary February

ebruary 2012

Appendix A – Vision and organisational values

Working together for a healthier Nottingham

Our purpose is to work together with compassion and caring to improve health outcomes and end health inequalities through the provision of high quality, inclusive and value for money services that are patient-centred.

This will be achieved by:

- Actively involving patients, carers, community groups and the public in everything that we do.
- Understanding and responding to the needs of our diverse population.
- Continually improving the quality of services through collaborative and innovative clinical commissioning.
- Supporting and encouraging education and training within the local workforce.
- Securing cost effective and integrated services within available resources.

Understanding our vision and organisational values

Our vision sets outour purpose and what we aim to achieve as an organisation. To ensure that this is able to be clearly communicated, we have recognised the need to further define some of the key terms we have used.

When we say that we aim to **work together**, we mean that we will work in partnership with our patients, carers, the wider population, Nottingham City Council, providers of health services within Nottingham City, and other organisations that plan and buy NHS services within the region.

When we refer to **health outcomes**, we mean a change in the health status of an individual, group or population.

When we refer to **health inequalities**, we mean the differences in the state of health between different population groups.

When we talk about **high quality** services, we mean services thatensure that patients are safe, have a good experience and receive the best possible treatment for their condition. This includes timely and equitable access to services, choice of how and where to be treated, and prioritising privacy, dignity and respect for all.

When we talk about **inclusive** services, we mean services that recognise and value difference regardless of age, disability, gender, race, religion or sexual orientation.

When we talk about **value for money**, we mean services that deliver the best possible health provision and outcomes for our local population within available resources.

When we say that services will be **patient-centred**, we mean that they will be clearly focussed on our patients' requirements and that patients will be given a real voice in all decision-making processes. We are fully committed to being open, transparent and accountable to our population.

These definitions are further explored within our five organisational value statements, which describe our core priorities and commitments to patient involvement, quality improvement, innovation, education and addressing health needs.

Appendix B – Summary of Engagement Activities

11 October 2011 Presentation to Health and Wellbeing Board meeting 4 November 2011 Letters sent to all individual and group members of Citizens' Health Panel with questionnaires for feedback 4 November 2011 Questionnaires and posters sent out to all GP practices in	Dr Hugh Porter (Chairman) and Dawn Smith (Chief Operating Officer) N/A
group members of Citizens' Health Panel with questionnaires for feedback 4 November 2011 Questionnaires and posters sent out to all GP practices in	
out to all GP practices in	
Nottingham City to be made available to patients	N/A
4 November 2011 Engagement details posted on website	N/A
4 November 2011 Press release sent to local media	N/A
8 November 2011 Presentation to Nottingham CityCare Partnership CIC Board meeting	Dawn Smith (Chief Operating Officer)
18 November 2011 Presentation to NHS Nottingham Treatment Centre Board meeting	Dr Hugh Porter (Chairman) and Maria Principe (Director of Cluster Development and Performance)
24 November 2011 Live Twitter event	N/A
24 November 2011 Facebook update	N/A
24 November 2011 Discussion at Patient Experience Group	Sally Seeley (Assistant Director of Quality Governance)
24 November 2011 Presentation to Nottinghamshire Healthcare NHS Trust Board meeting	Dawn Smith (Chief Operating Officer)
30 November 2011 Attendance at Disabled Persons Group meeting	Sally Seeley (Assistant Director of Quality Governance)
1 December 2011 Presentation to Nottingham University Hospitals NHS Trust Board meeting	Dr Hugh Porter (Chairman) and Dawn Smith (Chief Operating Officer)
7 December 2011 Attendance at Young Diverse Minds group meeting	Sally Seeley (Assistant Director of Quality Governance)
12 December 2011 Attendance at Clifton Mental Health Forum meeting	Dawn Smith (Chief Operating Officer)
20 December 2011 Presentation to Nottingham City PCT Board meeting	Dr Hugh Porter (Chairman) and Dawn Smith (Chief Operating Officer)
21 December 2011 Presentation to Health Scrutiny Panel meeting	Dawn Smith (Chief Operating Officer)