

## Chief Officer Update

### 1. CQC Inspection

The CCG was the subject of an 'unannounced' Care Quality Commission inspection during the week commencing 23 June 2014. We were given 48 hours notice that Inspectors from the Care Quality Commission would be undertaking a review of services for looked after children and child safeguarding in City. This is classed as a 'routine inspection' under the new Care Quality Commission Inspection Framework. The Inspectors visited a number of our commissioned providers and did an in-depth review of eight child safeguarding cases in the City. The Care Quality Commission inspection visit ended with an initial feedback meeting with the Executive Team and the key individuals involved. The CCG has received a draft copy of the report for comment on factual accuracy and the final report is expected to be on the CQC website by the end of August 2014.

### 2. NHS Nottingham City CCG Annual General Meeting

Following the publication of the first annual report in June 2014, the CCG will hold its first Annual General Meeting on Wednesday 24 September 2014 from 1.00 to 3.30pm at the New Art Exchange, Gregory Boulevard, Hyson Green. The Annual General Meeting will follow the September meeting of the Governing Body which will be held that morning at the same venue. GP members, partners, stakeholders, patients and carers are invited to attend for a review of our first year as a clinical commissioning organisation and for the presentation of the Annual Accounts. There will also be two short films premiered at the event; the first looking at progress in the City to integrate community health and social care services and the second which has been produced for use in City secondary schools to promote responsible use of NHS services and resources.

### 3. Better Care Fund

CCGs have received two letters regarding the Better Care Fund. The first, from Helen Edwards, Director-General Localism and Deputy Permanent Secretary, DCLG and Jon Rouse, Director-General, Social Care, Local Government and Care Partnerships, Department of Health, provided an update on some changes being made to further develop the programme, including finalising arrangements for the pay for performance element of the fund and, as part of that, putting in place a clear framework for local risk sharing.

Unplanned admissions are identified as by far the biggest driver of cost in the health service that the Better Care Fund can affect. Better Care Fund plans will need to demonstrate clearly how they will reduce emergency admissions, as a clear indicator of the effectiveness of local health and care services in working better together to support people's health and independence in the community.

The letter confirmed that a revised plan template and guidance will be issued to support the further improvement of plans locally and to underpin the strengthened pay for performance and risk sharing arrangements. Due to the additional work involved, current timescales will be reviewed to ensure areas have the time necessary to adequately prepare for implementation from next April 2015.

The second letter is an introductory letter from Andrew Ridley, the newly-appointed Better Care Fund Programme Director, setting out his plans for taking forward the

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programme and supporting areas to deliver effective plans and move into implementation.

#### **4. NHS England announce new Health and Social Care Integration option**

Individuals with a high level of need are to be offered the ability to control their own blended NHS and community care, in partnership with the voluntary sector.

Speaking at the annual conference of the Local Government Association in Bournemouth earlier this month, NHS England Chief Executive Simon Stevens set out plans for a new Integrated Personal Commissioning programme, which will, for the first time, blend comprehensive health and social care funding for individuals, and allow them to direct how it is used.

Four groups of individuals are likely to be included in the first wave from next April 2015, although Councils, Voluntary Organisations, and NHS Clinical Commissioning Groups may also propose others.

These are:

- People with long term conditions, including frail elderly people at risk of care home admission;
- Children with complex needs;
- People with learning disabilities; and
- People with severe and enduring mental health problems.

At the same time, Voluntary/Third Sector organisations will be commissioned locally to support personal care planning, advocacy and service 'brokerage' for these individuals enrolled in the Integrated Personal Commissioning programme. This new approach builds upon, but is in addition to, the constructive joint work now under way locally on the groundbreaking Better Care Fund.

It also extends and combines current work on 'year of care' NHS commissioning, personal budgets in 'continuing care', and the early experience of 14 'integrated care pioneers'.

#### **5. Understanding the New NHS: A Guide for everyone working and training within the NHS**

NHS England has published 'Understanding the new NHS: a guide for everyone working and training within the NHS'. The former Chief Medical Officer, Sir Bruce Keogh, commissioned a guide to the NHS for junior doctors and it has been updated to reflect the changes in the new NHS and so Health and Wellbeing Board members may find it useful. Written by five doctors in training, the guide outlines the organisations, systems and processes that define sustain and regulate the NHS. It can be downloaded from [www.england.nhs.uk](http://www.england.nhs.uk).

**Dawn Smith  
Chief Officer  
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