

Date:	14 th February 2019
Meeting:	Governing Body
Item Number:	Item 7.2
Public/Private:	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>

Author: (Name, Title)	Emma Latimer Chief Officer
GB Lead: (Name, Title)	Emma Latimer Chief Officer
Director approval	Emma Latimer
Director Signature	<i>Emma Latimer</i>

Report Title:
Chief Officer's Update Report January 2019
Decisions to be made:
To note

Link to a Strategic Objective?	<input type="checkbox"/>	
Link to a Strategic Risk	<input type="checkbox"/>	

Continue to improve the quality of services	<input checked="" type="checkbox"/>	Improve patient experience				<input checked="" type="checkbox"/>
Reduced unwarranted variations in services	<input checked="" type="checkbox"/>	Reduce the inequalities gap in North Lincolnshire				<input checked="" type="checkbox"/>
Deliver the best outcomes for every patient	<input checked="" type="checkbox"/>	Statutory/Regulatory				<input type="checkbox"/>
Purpose (tick one only)	Approval <input type="checkbox"/>	Information <input type="checkbox"/>	To note <input checked="" type="checkbox"/>	Decision <input type="checkbox"/>	Assurance <input type="checkbox"/>	

Executive Summary (Question, Options, Recommendations):		
This report is intended for information and noting.		
Recommendations	1 2 3	
Report history		
Equality Impact	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Sustainability	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Risk	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Legal	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Finance	Yes <input type="checkbox"/> No <input type="checkbox"/>	

<i>Patient, Public, Clinical and Stakeholder Engagement to date</i>									
	<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>		<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>
Patient:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Clinical:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Public:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Other:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



CHIEF OFFICER'S UPDATE

January/February 2019

Welcome to the first Chief Officer's Board Update for 2019 featuring news and highlights from NHS North Lincolnshire Clinical Commissioning Group.

NHS Long Term Plan

The NHS Long Term Plan launched very early in the New Year, outlining ambitious improvements for patients over the next ten years to save half a million lives. It also sets out how the NHS intends to overcome its challenges in terms of workforce and growing demand for services. There are no particular surprises in there for us as commissioners, as all the priorities are what we would expect, and in many cases have already been working towards.

There will be increased investment in strengthening primary and community care and mental health which is good news.

The plan also contains guidance around the development of Integrated Care Systems (ICS) and Integrated Care Partnerships (ICP). Although we have only brief detail at this stage we are starting to have discussions with North Lincolnshire providers about what an ICP might look like and how this would improve services and care pathways for patients.

We await the forthcoming green paper on social care as additional investment in social care is much needed.

NHS England is keen that people can join in the ongoing conversation about the Long Term Plan and has committed to a programme of public engagement delivered by Healthwatch England.

You can read the full NHS Long Term Plan and summary at www.longtermplan.nhs.uk.

Strategic Update

There have been some strategic level changes since the last update for staff.

City Health Care Partnership Chief Executive Andrew Burnell is now established as the interim lead for the Humber, Coast and Vale Health and Care Partnership (HCV).

I am currently deputy for the HCV Executive and

represent both North Lincolnshire and Hull CCGs on the group, with the HCV keeping its focus on delivering constitutional targets and achieving financial stability across the patch.

I have also recently taken over the Chair of the Humber Acute Services Review from former NHS England Yorkshire and Humber Director Moira Duma and will continue to work to ensure we have sustainable hospital services that meet the population's needs. To help take this work forward a new Director of Collaborative Commissioning will be appointed to support the review across the four Humber CCGs.

NHS England has set a 20 per cent reduction target for all CCG management costs by 2021. To make further efficiencies we will be working more collaboratively with our neighbouring CCGs where it makes sense to do so.

Urgent Care Public Engagement

In line with national NHS guidance, North Lincolnshire CCG is developing plans for an Urgent Treatment Centre (UTC) which will be located at the Accident and Emergency department at Scunthorpe General Hospital.

This will be an additional, GP-led service for those that have a genuine urgent need.

The following are some examples of types of conditions that may be treated at the UTC:
Sprains and strains; suspected broken limbs; eye problems; skin infections; minor head injuries; fevers; cuts and grazes; minor scalds and burns; abdominal pain and ear and throat infections.



As part of this, our Communications and Engagement Team has been out and about asking our population a series of questions – the answers to which will help shape the service in the future.

I am delighted to say that over a month's engagement period, 1,100 different people have filled in our urgent care survey, either online or in print – with a good mix of ages and backgrounds. I'd like to thank everybody who took part because your views and feedback really does make a difference and shape the NHS of tomorrow.

Staff Survey

I am delighted that 81 per cent of North Lincolnshire CCG staff completed the 2018 staff survey – which represents a huge improvement from the 50 per cent completed in 2017.

Staff engagement is incredibly important and I and the senior team genuinely value the feedback. We want North Lincolnshire CCG to be a great place to work and the survey is an important part of recruitment and retention.

I'd like to thank all staff who took time out of their busy work schedules to fill in the survey and hope to discuss the findings with the Health and Wellbeing Group.

Sad news

It is with regret I must advise of the passing of John Anscombe – one of our Patient and Community Assurance Group (PCAG) members.

John was a valued and passionate contributor to not only PCAG but also the CCG's Patient Participation Group Chairs' Forum. He was also chair of Cedar Medical Practice PPG and was a regular attendee at our Governing Body meetings and annual general meetings.

Janice Keilthy, Lay Member for Patient and Public Involvement, and Mark Williams, Head of Communications and Engagement, both attended John's funeral at Scunthorpe Crematorium on February 4th on behalf of the CCG.

Social Media Milestones

The CCG's social media sites are going from strength to strength.

North Lincolnshire was one of the first CCGs in the country to launch an Instagram page and this now has almost 150 likes.

Facebook is where the real progress has been made though and we recently went past the 1,000 follower mark.

Social media is a useful way of engaging with our patients in a quick fashion and if you haven't already followed one, if not all, of our channels, then please do.



Thanks for 1,000 Likes!

Time to Test

As a caring employer we want to do all we can to encourage our staff and the general public, to take up invitations to attend screening appointments.

I have recently signed Jo's Cervical Cancer Trust Time to Test pledge, promising that all CCG staff would be able to attend these important appointments within work time. There was a national focus in January on cervical cancer screening, which is a subject that is close to my heart and I talked about my own personal experience in being diagnosed with pre-cancerous cells at an early stage in a short video.

Testing does save lives and, thanks to my screening appointment, I was able to successfully receive treatment at an early stage.