

**Briefing for the Health and Wellbeing Select Committee Meeting****Wednesday 30 November 2016****1. A&E performance**

The CCG saw increased demand and pressure on services over the summer and performance against the A&E waiting time target (95 per cent of attendees to be seen within four hours) dropped to 79.3 per cent in August 2016. However, performance for October 2016 improved to 91.5 per cent.

Local performance and progress against the locally agreed A&E Improvement Plan continues to be overseen by regular tripartite meetings of the Royal United Hospitals (RUH), CCGs, NHS England and NHS Improvement. The newly constituted A&E Delivery Board is focusing on responding to the five nationally mandated actions to support on-going recovery of performance.

**2. CCG Improvement and Assessment Framework**

Our assurance ratings for quarter two of 2016/17 are:

<b>Better Health</b>	<b>Better Care</b>	<b>Sustainability</b>	<b>Leadership</b>
GOOD	REQUIRES IMPROVEMENT	REQUIRES IMPROVEMENT	REQUIRES IMPROVEMENT

These ratings predominantly relate to the difficulties in securing improvements in the delivery of NHS constitutional targets across our local health system and to the level of unmitigated financial risk which may impact on our ability to deliver our required financial surplus for 2016/17.

NHS England acknowledged a lot of good work has been undertaken around leadership and there are many positive examples of the good work the CCG is carrying out. However, due to concerns around our performance within 'Sustainability' and 'Better Care', we are also assessed as requires improvement under 'Leadership'.

### **3. Prescribing changes consultation**

On 24 November, the CCG launched a four week period of public engagement on proposed changes to our prescribing policy. The CCG has been reviewing treatments that are shown to be less clinically effective, provide insufficient health benefits and those that do not represent good value for money. As a result, there are two proposed changes to the local prescribing policy:

- To stop prescriptions of gluten-free products for people with coeliac disease
- To stop prescriptions for two groups of over-the-counter medicines – painkillers and antihistamines – when they are used for short-term, minor ailments such as mild hayfever, headache, coughs and colds.

### **4. CAMHS re-procurement**

Work is continuing with colleagues in Swindon and Wiltshire to re-procure the contract for Children and Adolescent Mental Health Services (CAMHS). Young people from each area are being recruited to take part in the evaluation of bids.

### **5. Urgent Care procurements**

The CCG is currently involved in procurement for three separate urgent care services which will become operational from May 2018:

- a) A procurement process is underway to deliver a more joined up NHS111 system across B&NES, Swindon and Wiltshire. GP out-of-hours services are being re-procured across Wiltshire and B&NES.
- b) The Urgent Care Centre at the RUH is being commissioned separately from the GP out-of-hours service. The tender process will begin in January.
- c) We are seeking a local GP practice to run the Homeless Health Service from Julian House. The service provides access to GPs and nurses for a registered list of approximately 65 homeless people.

### **6. Operational Plan**

Our draft Operational Plan for 2017-19 has been submitted to NHS England. The final version is due on Friday 23 December. For the first time, plans are required over a two-year period and must support the delivery of the Sustainability and Transformation Plan for B&NES, Swindon and Wiltshire.

NHS England is also providing new funding to improve access and increase capacity in general practice by April 2019. Our Operational Plan includes a section on how we will support and transform general practice to offer extended opening hours across evenings and weekends.

## **7. Financial Position**

The CCG's financial position is very tight this year. We must deliver a 1 per cent surplus and set aside 1 per cent non-recurrent 'headroom' and 0.5 per cent contingency. This will be a challenge but we are taking all possible actions to mitigate financial risks and deliver efficiencies through a programme of QIPP (Quality, Innovation, Productivity and Prevention) schemes.

## **8. Delegated commissioning**

Our 26 member practices are voting to decide if the CCG should take on delegated commissioning of primary care from NHS England. We have been working under joint commissioning arrangements in 2016-17 but delegated commissioning would give the CCG greater control over our future and help us to align our plans across community and acute services.

Swindon and Wiltshire CCGs are also expected to move to delegated commissioning so we have agreed that Wiltshire CCG will host a shared team to deliver the new primary care responsibilities.

## **9. Online booking at GP practices**

GP practices are now able to offer their patients access to all online services; booking and cancelling appointments, ordering repeat prescriptions and viewing their medical records.

NHS England has set a target for practices to have a minimum of ten per cent of their patients registered for online services by 31 March 2017. In B&NES, 81 per cent of all GP practices (21 out of 26 practices) have already achieved ten percent. This is encouraging progress and the CCG continues to work with practices to promote the benefits to patients of registering for online services.

## **10. Flu Vaccinations for staff**

NHS staff are encouraged to have a flu jab each year as winter approaches to help protect them from getting flu and to avoid its spread to colleagues and patients. We are pleased to announce that for 2016 the uptake for BaNES CCG staff was 77 per cent. This exceeds the national target set for NHS organisations.