



North Central London  
Clinical Commissioning Group

# Directorate Staff Briefing

1 December 2021

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# Finance update

# Where we are now ...

Financial year 2021/22



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## Where are we now?

As per the previous financial year and national guidance, NHSE/I split the financial year into two halves called **H1** (Apr'21-Sept'21) and **H2** (Oct'21-Mar'22). Both parts of the year follow the same principles as last year meaning:

- The CCG can continue to reclaim for a number of COVID-19 related costs, including Hospital Discharge Programme costs and elective recovery fund. There is a system pot for COVID which is allocated out by the ICS.
- Block payment arrangements remain in place for relationships between CCGs and Providers; signed contracts are not required.

The Executive Management Team (EMT) and the Governing Body recently approved the financial plan for **H2**, which was then submitted to NHSE/I on 16<sup>th</sup> November.

## What was agreed and submitted?

The CCG submitted a financial plan whereby total allocations from NHSE/I matched total expenditure to achieve a breakeven position. Within this however, the CCG has identified financial pressures of **c£9m**, which we are funding by non-recurrent balance sheet reserves to achieve a breakeven position for the year.



# Looking forward to next year...

*Financial year 2022/23*

## ***What do we know?***

### *The CCG has an underlying deficit*

The CCG has an underlying deficit of c£73m. What this means is the CCG is covering £73m of on-going and recurrent expenditure with non-recurrent funding, i.e. funding that the CCG will not have in 2022/23.

### *Cost pressures identified in 2022/23*

In addition, the CCG has identified c£172m of potential cost pressure in 2022/23. This includes £30m of pressures identified within the CCG and c£142m expected to be System wide.

### *Integrated Care Board (ICB) creation*

The NHS financial framework continues to enable system collaboration as we move towards the creation of an Integrated Care Board (ICB) in April 2022. Work is already underway within finance teams to ensure we're ready to operate as an ICB in the new financial year. There is a PAN London group consisting of representatives from the CCG, CSU, NHSE/I and SBS to work on the close down of the CCG and creation of the ICB.



# Looking forward to next year...

Financial year 2022/23

## What do we don't know?

### Governance Structure

As you are aware, Frances O'Callaghan has been appointed as the *Designate Chief Executive for the North Central London Integrated Care Board*, therefore the governance for the ICB is still in the early stages of discussion. For finance, this includes the creation of a new set of Standing Financial Instructions (SFIs), which governs how finance is administered across the organisation.

### Planning Guidance

Formal financial planning guidance from NHSE/I is yet to be received. This is due in December.

It is clear however, that in light of the CCG's underlying position and identified cost pressures for 2022/23, efficiencies will be required to help bridge potential gaps. More detail will follow once formal guidance has been issued.

### What does this all mean?

The CCG faces a number of financial challenges and uncertainties as we try to ensure we have the financial resources required to deliver the creation of a successful ICB, and ensure the full restoration of critical health services and embed population health approaches across North Central London.





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# Integrated Care System Transition update

# Emerging principles for ICB development

In her note to staff on Friday, Frances highlighted the emerging principles that will help inform the development of the new ICB board, which we thought worth sharing again:

- **Taking a population health approach:** We need to continue to develop the way we plan services to take into account the needs of people and communities, acknowledging the wider determinants of health. This will support tackling health inequalities across and within the communities we serve.
- **Evolving how we work with communities:** Embedding co-design with partners and communities in planning and designing services, and developing systematic approaches to communications and community engagement.
- **Continued focus on place:** Partnership working within boroughs is essential to enable the integration of health and care and to ensure provision of joined up, efficient and accessible services for residents.
- **Learning as a system:** We have learnt a lot as a system over the past 18 months, both with our response to the pandemic and our efforts to recover. Capturing this learning across primary care, social care, community, mental health and hospital services will guide our next steps for both individual services and system approaches.
- **Acting as a system to deliver a sustainable health and care system:** Providing high quality services enabled by workforce, finance strategy, estates, digital and data.



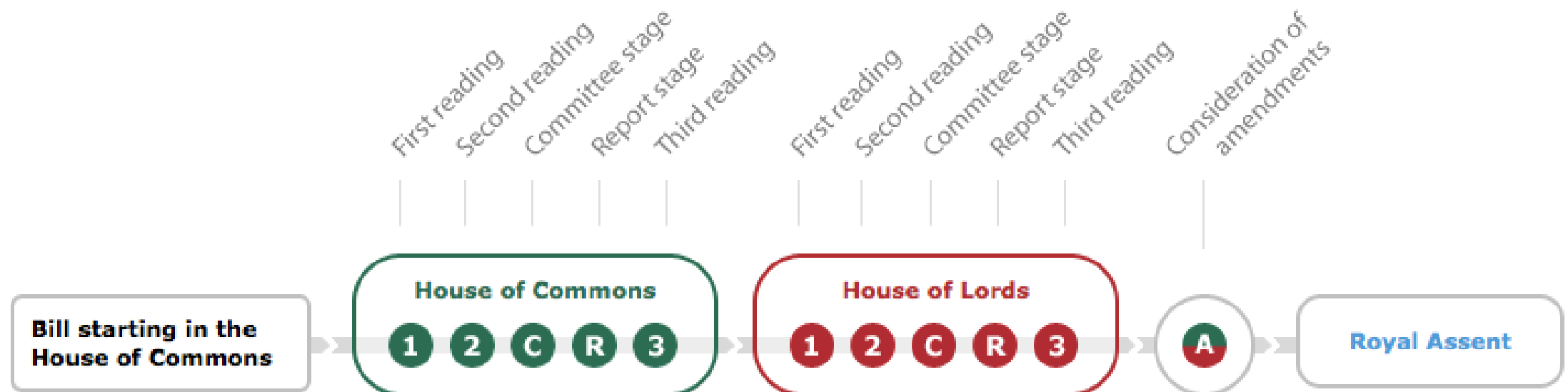
- Last week, NHS England approved our proposed use of the name ‘NHS North Central London Integrated Care Board’ as the statutory name of the new organisation.
- Therefore, we thought it was useful to highlight at this point in time, what each term means within the ICS.
- **NHS North Central London Integrated Care Board (or ICB)** allocates NHS budget and commissions services. This is the organisation that NCL CCG staff will transfer to, and will be chaired by Mike Cooke, with Frances O’Callaghan named Chief Executive.
- The **North Central London Health and Care Partnership**, is the Integrated Care Partnership, a joint committee with the councils across the five boroughs.
  - This committee is set out in legislation to be responsible for the planning to meet wider health, public health and social care needs and will lead the development and implementation of the integrated care strategy. It is worth highlighting that in NCL, we have largely been referring to our borough partnerships as ‘ICPs’. The terminology within the Bill used ‘place-based partnerships’ to refer to these.
- The **North Central London Integrated Care System** is the name of the NCL system as a whole.

# Terminology

- **Place-based partnerships or borough partnerships** include ICB members, local authorities, VCSE organisations, NHS trusts, Healthwatch and primary care.
- **Health and wellbeing boards** will continue to exist, made up of ICB members, Healthwatch, local authorities and appropriate wider membership. As will JHOSC and HOSC meetings.
- **Primary care networks** will expand to incorporate general practice, community pharmacy, dentistry and opticians.
- **Provider collaboratives** involve NHS trusts and primary care (including acute, specialist and mental health) working together. In NCL, we have one confirmed provider collaborative: UCL Health Alliance which incorporates all NHS trusts and primary care in NCL.

# Passage of a Bill through Parliament

- Last week, the Health and Care Bill had the third reading in the House of Commons and will now progress to the House of Lords.
- Just to keep colleagues updated on the passage of a Bill through Parliament, we thought it useful to share the stages that a Bill passes through on its way to becoming law.



- We will keep you all updated as the Bill continues to progress through the House of Lords.

# Staff engagement in the ICS - update

- We mentioned in our briefings on 3 November that the Leadership Centre and Traverse have been commissioned to support us with some aspects of our integrated care system (ICS) development over the coming months.
- This includes work with CCG staff and joint teams so they are informed and supported as our ICS and borough partnerships develop. We wanted to give you a quick update on this area of their work.
- Traverse and the Leadership Centre will shortly share a short survey with all staff to gauge our current thoughts and views on the ICS development and transition
- The results of this survey will then inform the development of a series of two workshops (likely to be in January and March) which will be open to all staff.
- We will continue to keep you informed and let you know when the survey is available and the workshop dates have been set.



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# Strategic review of community and mental health services in NCL - update

# Strategic review of community and mental health services in NCL

- The strategic review of community and mental health services seeks to address the variation in the way services are commissioned and delivered across NCL by the 5 legacy CCGs.
- The aim is to create a consistent and equitable core service offer for both community health and mental health services that addresses service access inequalities and contributes to improving health outcomes for our residents regardless of which north central London borough they live in.
- The core service offers are intended to be aspirational and set out our vision for community and mental health services. They will provide clarity for our residents, as well as for those working in the health and care system in NCL, about what support is available, when it is available and how to access it.
- We have now published the baseline reports for both community health services and mental health services on the CCG website. The reports present a current picture of service provision in each of the five boroughs, outlining key findings and themes. This has provided us with a case for change and a basis from which to develop the draft core service offers.

<https://northcentrallondonccg.nhs.uk/get-involved/strategic-reviews-of-community-and-mental-health-services/>

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# Key themes from resident engagement

- Both community and mental health services need to improve access. This includes waiting times, time for first contact and improved communication support using language interpreting services and British Sign Language interpreting.
  - Services need to be more dementia friendly and more responsive to the needs of those with sensory impairments.
  - Services need to reduce the number of hand offs and make better use of technology to avoid people having to frequently repeat their details.
  - A need for services to improve their communications with patients, especially when appointments are changed, cancelled etc. and have better processes for responding to patient enquiries.
  - Digital transformation of services was welcomed by some, but there was a strong counter view that the digital divide was widening and exacerbating health inequalities. Health services must offer a mix of delivery mechanisms, without solely relying on a digital approach.
  - A more holistic or person centred approach to care needed, giving consideration to other factors that may impact on health, for example, trauma, domestic violence, or environmental factors such as housing.
  - Transition planning from children to adult services was highlighted as problematic and requiring an earlier start than is currently happening.
  - Services must be culturally competent and providers need to work with their communities to recruit more local people and use their experience and knowledge to work more effectively with diverse local populations.
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# Shaping the core service offer

The feedback received from resident engagement has helped shaped the core service offer for both community and mental health services. For example, the core service offer:

- will provide greater clarity for our residents, as well as for those working in the health and care system in NCL, about what support is available, when it is available and how to access it, including response times for first and ongoing contact.
- is designed around a central point of access which could support better direction and signposting for patients. A trusted assessor role with budget could support with reducing handoffs and the need for patients to repeat their stories.
- proposes more services with direct access, thereby reducing the need for referral.
- supports the personalisation agenda with more care plans, case managers and greater requirement for patient led decision making.
- supports anticipatory care in line with national guidelines, as well as focus on education and proactive management for those with long term conditions.
- looks at support and care for patients at home which will mean an extended role for community nursing in some boroughs.

We have also shared feedback with our providers on the necessity for improved culturally competent and culturally sensitive services to respond to the needs of our diverse communities.

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# Strategic review of community and mental health services in NCL

- Following an extensive engagement process, we have developed and refined the core service offers in partnership with our community and mental health service providers, primary care, local authorities, voluntary and community sector, service users, carers and residents.
  - The respective Programme Boards have approved the core service offers and the gap analysis which was undertaken as part of this process.
  - We are currently assessing and working through the potential financial and non financial impacts of implementing the core service offers against a number of domains including access, inequalities, quality and workforce.
  - Once the impact assessment phase is completed (by January) we will co-develop transition plans to support the implementation of the core offers. Co-development with our Borough sector partners, local residents, service users and carers remains essential.
  - We will continue to work with our health and care partners at both a north central London integrated care system level and a borough integrated care partnership level to consider how best to implement the core offers and to agree a timeline for transition.
  - An update will be submitted to the CCG Governing Body for discussion in December 2021.
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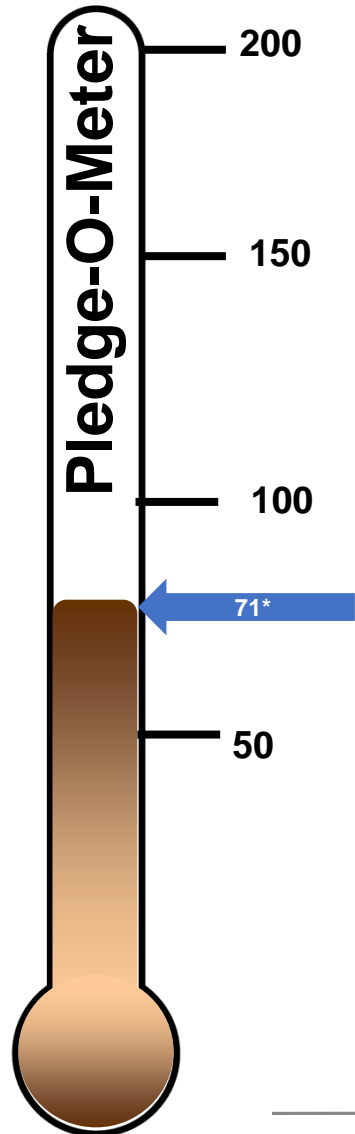
Other updates

# Office working

- You will all be aware that new measures came into force yesterday regarding wearing masks in shops and public transport. At this time there is no additional reference to the work place and any changes to office working although we will of course continue to monitor the situation closely.
- Staff can therefore continue to attend offices if they wish by following the clear processes [available on the intranet](#). Booking a desk, undertaking lateral flow test and being aware of your interactions with others will help to avoid transmission.
- As always, if you are not sure how to proceed or have any questions please contact the Business Services Team [nclccg.businessservices@nhs.net](mailto:nclccg.businessservices@nhs.net). The team is also continuing to support staff with their home working arrangements.
- On a separate note, we have experienced a significant drop in temperature and so some of our offices are struggling to cope, but we are working with local teams to resolve any issues. Staff using the Barnet office regularly will be aware we have suggested staff use alternative sites or work from home for the next two weeks unless attendance is key.

- As we advised earlier this month, the first transition of NEL CSU staff to NHS London Shared Services or out of London services hosted by NECS (North England Clinical Support) is now complete.
- The next phase will involve a consultation with staff affected by change on their final destination, which includes North Central London CCG, in early 2022.
- As part of this process, and in consultation with CCG management teams, NEL CSU colleagues will now have the ability to apply for internal vacancies at North Central London CCG and other London CCGs involved in the CSU transition.
- This will be in place until 1 April, when all North Central London CCG staff (including those NEL CSU staff who have a final destination of NCL) will transfer to the new organisation.

# See ME First – pledgeometer update



- Our See ME First campaign continues to demonstrate our commitment to embracing diversity and supporting others.
- Following the launch back in July we have attracted 71 pledges from CCG staff.
- Thank you to all staff who have made their pledges so far.
- We would love to get this number higher – at least to 100!
- To make a pledge and show your support, [please visit the intranet](#) and complete the pledge form.
- If you are interested in making a pledge, but want more information, please send an email to [nclccg.bame@nhs.net](mailto:nclccg.bame@nhs.net) and a members of the BAME staff network will get in touch.
- Here are a few examples of pledges made by our staff (we have their permission to share them). . .

# 'See ME First' Pledge Wall

I have witnessed and experienced unfair behaviours that do not hold with CCG values. I believe by joining see ME First it will give me the courage and resilience to speak up and express my concerns and in doing so make our organisation a great to work.

I believe that we are all valid and valuable human beings. However no single being is more valid nor valuable than the other.

It's Important to me to show a symbol of the values that I hold dear of being open, non judgemental and treat people with respect and dignity. I also want to recognise and show my colleagues who have not always had it as easy as me that they have my support.

Being a non judgemental person, an excellent listener and always treating people equally motivated me to make this pledge. I will always stand up, defend and speak up for my colleagues when treated unfairly because of their diversity.

I am motivated to champion an inclusive, open and diverse culture within NCL CCG and with partners.

I want to stand up and use my position as a leader in the NHS to drive positive change: so that all my colleagues have fair and equal opportunity and we can treat people for who they are.

I pledge to help to build a culture where all staff are valued and treated with dignity and respect. I would like to continue to speak on behalf of those who feel they have no voice and continue to educate myself and others. See ME First is a great initiative and am proud to be part of it.

I am passionate about equality and diversity and being a good friend and ally for those who need it. I will ensure that the workplace is a safe space for all staff and not tolerate any forms of bullying, harassment or discrimination. I will ensure that colleagues have the support they need to be themselves, to be positive and ambitious, and to remove barriers so that they can excel in the workplace.

Taking the pledge appeals to me as a public statement which says to others – 'I'm committed to using the influence I have in my role to make a difference to the myriad shades of injustice, inequality or racism which are at play in our cultures, our services and our communities'

# Disability History Month

18 November – 18 December

- UK Disability History Month is an annual event which focuses on the history of the struggle for equality and human rights.
- Our Disability Staff Network has already hosted a number of events to celebrate Disability History Month (slides from the events will be shared in Friday's news):
  - [Breast Cancer Awareness](#)
  - [Autism Awareness](#) (with Barnet Mencap)
  - ADHD Awareness (with Barnet Mencap)
  - World AIDs Day (with Positively UK)
- **And there's more to come!**
  - The Social Model of Disability (featuring Rachel and John's story) – 3 Dec 11am – 12pm
  - World Diabetes Day - 8 December 3pm - 4pm
  - The launch of the CCG's Health and Carers Passport (date TBC)
- Calendar invites will be shared with all staff for the events. If you have any questions, please email [sarah.perrett@nhs.net](mailto:sarah.perrett@nhs.net) or [victoria.wicks2@nhs.net](mailto:victoria.wicks2@nhs.net)



# Meet our Mental Health and Wellbeing Champions

- In August we let you know that we have 6 members of staff who have completed their Mental Health First Aid training and have agreed to act as Mental Health and Wellbeing Champions for the organisation.
- The champions are: Robyn Sandler ([robyn.sandler@nhs.net](mailto:robyn.sandler@nhs.net)); Agnes Rieu ([agnes.rieu1@nhs.net](mailto:agnes.rieu1@nhs.net)); Kitty Grew ([kitty.grew@nhs.net](mailto:kitty.grew@nhs.net)); Shobhna Rokad ([shobhna.rokad@nhs.net](mailto:shobhna.rokad@nhs.net)); Jennie De Lord ([j.delord@nhs.net](mailto:j.delord@nhs.net)); Brett Vallance ([b.vallance@nhs.net](mailto:b.vallance@nhs.net))
- The champions have been trained to have supportive discussions regarding individual mental health and wellbeing and to signpost people in the right direction where they need help.
- Our champions are holding a Teams session on Monday 6 December, 1.30-2.30pm, to introduce themselves and their role, and to help people to understand what you can do and who you can go to when in need of help.
- The session is open to all staff; no need to book. We have sent a calendar invite out from the comms team calendar.
- Further information about our champions is available [on the intranet](#).



# Leadership Academy programmes – expressions of interest

- The NHS Leadership Academy runs a variety of programmes to support people with their leadership journey, something the CCG is committed to supporting.
- The programmes listed below are currently open for applications:
  - [Mary Seacole programme](#) – for those in their first leadership role, to help develop your knowledge and skills in leadership and management.
  - [Edward Jenner programme](#) – to help prepare for your first leadership or management role
  - [Stepping Up programme](#) - for Black, Asian and minority ethnic (BAME) colleagues, Stepping Up will help you develop your leadership and management
  - [Ready Now programme](#) - Ready Now supports senior BAME leaders to move into board level positions and significantly more senior roles.
  - [Rosalind Franklin programme](#) - for mid-level leaders aspiring to lead large and complex programmes, departments, services or systems.
- Any staff member that is interested in one of these programmes should submit an [Expression of Interest Form](#) by Sunday 5 December to: [nclccg.od@nhs.net](mailto:nclccg.od@nhs.net)
- A panel will then meet and let staff know about their decision w/c 6 December.

# Some reminders and upcoming events

- **Staff cookalong** – taking place tomorrow (2 Dec, 5-5.30pm). Emdad will be teaching us to cook chicken or paneer jalfrezi in under 30 minutes. All welcome! The recipe and ingredients are in the Outlook calendar invite.
- Our next **Ask EMT drop in** session is on Wednesday 8 December, 11.15am – 12pm. All staff are invited to use this timeslot to ‘drop in’ to speak with EMT. The MS Teams link to join the session is on the [Ask EMT intranet page](#) or contact the comms team if you need help.
- Don’t forget, our new **Establishment Control Process (ECP)** is now in place, replacing the WAP process. Please check you are using the right forms, [available on the intranet](#).
- And finally, a very **happy Hanukkah** to all who are celebrating! Hanukkah is the annual Jewish festival of lights that takes place in the winter (this year it’s 28 November – 6 December)

# Christmas event



- Our Christmas event is taking place on Friday 17 December, 2-5pm (held virtually on MS Teams)
- We have an afternoon of Christmas themed fun and games planned and we hope that as many of you as possible will join us
- We will also be announcing the winners of our staff awards
- All you will need to bring with you is a pen and paper and a stopwatch (the one on your phone is fine). Christmas themed jumpers/fancy dress also welcome!
- All staff should have the calendar invite in their diaries (sent from the comms team) – we would be really grateful if you could accept or decline so we have a rough idea of numbers coming.