

Directorate Staff Briefing 2 December 2020

In today's update...



- NHSE/I 'Integrating Care' publication & NCL CCG consultation
- Covid updates
 - Vaccine development and planning
 - Long Covid response
- CCG annual assessment results 2019/20
- HR updates

A reminder that, wherever possible, the slide deck is uploaded to the intranet staff briefings page in advance of the fortnightly Directorate briefings (usually 4pm the day before): https://intranet.northcentrallondonccg.nhs.uk/working/staff-briefings.htm



NHSE/I 'Integrating Care' paper and update on CCG consultation

NHSE/I 'Integrating Care' publication



The NHSEI 'Integrating Care' paper published last week builds on the roadmap set out in the NHS Long Term Plan (2019), towards health and care joined up locally around people's needs. It also sets out a renewed ambition for greater collaboration between partners in health and care systems and options for a firmer legislative basis for Integrated Care Systems.

Two options are set out in the NHSE/I paper – with a stronger case outlined in the paper for a fully integrated health system (Option 2):

Option 1 – a statutory ICS Board / Joint Committee with an Accountable Officer

3.11. This option is closer to our original proposal. It would establish a mandatory, rather than voluntary, statutory ICS Board through the mechanism of a joint committee and enable NHS commissioners, providers and local authorities to take decisions collectively.

Option 2 – a statutory ICS body

3.18. In this option, ICSs would be established as NHS bodies partly by "repurposing" CCGs and would – among other duties – take on the commissioning functions of CCGs. Additional functions would be conferred and existing functions modified to produce a new framework of duties and powers.

The indicative timescale for providing a statutory footing for Integrated Care Systems is from April 2022.

NHSE/I 'Integrating Care' publication



- Frances O'Callaghan, Accountable Officer, wrote to all staff last week regarding the publication.
- There is much in this document that is positive and its' ambitions closely reflect those of our NCL Integrated Care System, to deliver population health improvement and reduce inequalities through greater collaboration.
- The principles we are working to presently will remain at the heart of the North Central London system moving forward – such as developing population health management approaches, and building integrated care around 'place' with primary care at the centre. Your work across all of these areas is important and highly valued.
- It is also important to recognise that the proposal is not to abolish commissioning completely, but about reshaping CCG functions with more focus on strategic commissioning through systems and population health outcomes.
- However, the proposals do encompass future options for CCG statutory functions, and the requirement for the organisational form of CCGs to evolve. This may include moving some commissioning functions into new bodies.
- Clinical Commissioning Groups have the opportunity to feedback on the proposals set out in this document by early January. EMT will share our thinking with staff over the next month.

CCG consultation

- The aim of the CCG consultation, due to start in January, was to shape our organisation to deliver against a long-term vision for NCL CCG. This was a continuation of our journey towards strategic commissioning as part of the NCL ICS.
- However, given that significant changes to CCG statutory functions and organisational form which may include moving some functions into new bodies – are now being considered at a national level, the Executive Management Team has decided not to proceed with the planned CCG consultation.
- In order to ensure stability of service delivery and the business continuity required to deliver our CCG priorities in the immediate term, we will still need to re-align our workforce to Executive Management Team portfolios. This re-alignment will not result in any redundancies.
- Over the coming weeks we will look at how best we can achieve this with minimal change and disruption for staff.
- Further information and details will be provided to staff in the New Year.



Future system integration



- The priority, as set out in the NHSE/I document, will be the "continuation of the good work being carried out by the current group of staff and promoting best practice in engaging, consulting and supporting the workforce during a carefully planned transition, minimising disruption to staff."
- NHSE/I have set out the following commitments in their proposal:
 - not to make significant changes to roles below the most senior leadership roles before the end of March 2022;
 - to minimise impact of organisational change on current staff by focusing on continuation of existing good work through the transition and not amending terms and conditions; and
 - offer opportunities for continued employment up to March 2022 for all those who wish to play a part in the future.
- We understand that staff may have immediate questions, some of which we may not be able to answer at this point in time. The Executive Management Team is committed to providing as much clarity and detail as possible as we move forward over coming months.

Our commitment to you



- We recognise this will mean an ongoing period of change, following an already difficult year.
- We want to assure you that we are committed to minimising disruption and anxiety for staff.
- We will carefully consider what future changes related to the wider NHS direction of travel mean for our staff, and are fully committed to supporting everyone through this period of transition.
- Staff are encouraged to discuss what support they would find most helpful during this time with their line managers and Directors.
- We would also like to thank everyone for their hard word and dedication.



COVID-19 update

COVID-19 vaccines



- Significant work is currently being undertaken across North Central London and indeed the country – to prepare to start delivering vaccines.
- We know that if each resident needed two injections, this would mean over 1.6 million vaccinations in North Central London alone.
- This will need a huge system effort, with all partners playing a role in the delivery.
- It is however important to note that at present, there are not yet any vaccinations that have been approved by the MHRA for safe, effective use.
- The two vaccines we currently expect to have available first that have been submitted for MHRA approval – are those developed by Pfizer and BioNTech and Oxford University and AstraZeneca.
- Should MHRA approve these, we are now in a position in North Central London to start delivering these rapidly.
- This is due to a tremendous team effort across our partners.

Large vaccination sites



- There are two types of large vaccination sites planned in NCL hospital sites and standalone temporary sites.
- Each hospital in NCL will have an area that will primarily be used to vaccinate NHS and social care staff
- We are also working towards having three additional sites in NCL ready to 'stand up' as soon as a vaccine is approved.
- Several further sites across the boroughs will also come online in the new year.
- We have been told that the Pfizer/BioNTech vaccine will come in batches of 975, need to be stored at approximately -80°C and has limits on the number of times it can be moved.
- As such, the large sites will be best placed to utilise any supply of this vaccine once approved.

Primary care vaccinations



- Groups of practices are coming together to to pool resources and ensure as many residents can be vaccinated as quickly as possible – when an approved vaccine is made available.
- 11 of these sites have been approved by NHS England to deliver vaccinations to residents. These are: Borough Site name

Borough	Site name
Barnet	Wentworth Medical practice
Barnet	Temple Fortune Health Centre
Camden	Belsize Priory
Camden	Bloomsbury Surgery
Enfield	Evergreen Primary Care Centre
Enfield	Carlton House
Enfield	Winchmore Hill practice
Haringey	Bounds Green Group Practice
Haringey	Lordship Lane / Morris House Group Practice
Islington	Hanley Primary Care Centre
Islington	Bingfield Primary Care Centre

 Community pharmacy will also play an important role in delivery of the vaccines, and NHS E <u>published a letter for community pharmacy</u> on Friday. We are working with pharmacy colleagues to develop the plans in this area.

Vaccinating care home residents and staff



- Care home residents and staff remain a priority for receiving the vaccine as soon as possible. Community providers will lead on the delivery in each borough in roving teams working closely with primary care and local authorities in each borough
- The Pfizer vaccine characteristics mean this is unsuitable transporting to care homes in this roving model therefore we are planning for the roving model to use the Oxford University and AstraZeneca vaccine which the national team indicate will be available from January.
- We are also working with partners to consider what other options we have to roll out to care home residents as quickly and safely as possible.
- We are working with local authorities to explore care home staff also having the option to access the Pfizer vaccine via the hubs where this is safe to do so.

Communications

- NHS England is leading the communications campaign to make sure that when vaccinations are available, they can be quickly delivered to those most at risk.
 We will of course be supporting this locally and expecting the first materials to come through this week.
- A vitally important aspect of our ability to deliver vaccinations to our population is a requirement to recruit approximately 2,000 staff.
- We are looking for people to fill vaccinator roles but also administrative roles.
- We will be promoting this recruitment widely if you or anyone you know might be interested in helping deliver the extensive vaccination programme, please visit the following websites for more information:
 - <u>Bank Partners website</u> administrative support and vaccinators
 - Bank Partners website clinical support
 - Proud to Care website



Developing post-Covid syndrome pathways



- Supporting people to recover from Covid-19 is a priority for the health and care system in NCL.
- We are currently working with partners across the system to mobilise post-Covid syndrome (or Long Covid) pathways to meet the needs of people with symptoms of Long Covid.
- This has been designed with input from clinicians from across the health system, including General Practice, mental health services, hospitals and community rehabilitation providers.
- The pathway will cover everything from the identification of symptoms of Long Covid, the investigations and assessments patients with suspected Long Covid will need, through to attendance at clinics and referral to specialist rehabilitation for those who need it.
- Patients' mental health and social care needs will also be overseen as part of this pathway.
- Many of the services needed to deliver the pathway already exist in each borough, and though they
 may differ in scope and availability, hospitals are already running post-Covid clinics in many areas.
- The focus is to make sure there will be a consistent offer for all patients in NCL, so everyone
 receives the highest quality care based on latest clinical evidence, and that everyone who needs to
 be seen in a post-Covid clinic is identified and referred to one.

Developing post-Covid syndrome pathways



- A post-Covid syndrome task and finish group has been formed for the system to mobilise the pathway and report progress updates to NCL's Clinical Advisory Group and to our Local Care Forum. The key areas of work for this group are:
 - ✓ Modelling current demand for post-Covid syndrome services in each borough, based on available public health and hospital datasets.
 - ✓ Rollout of a standard approach to managing post-Covid syndrome in primary care, advising on assessment, investigations and symptom management.
 - ✓ Development of a local care post-Covid multi-disciplinary team who will pick up complex cases either through primary care or hospital discharge and oversee their care planning and treatment.
 - Engagement with acute providers to design a standardise advice and guidance offer to primary care and community services and to consult on delivery models for post-Covid clinics.
 - Work with community providers, led by Central North West London NHS Trust on a safe and standardised rehabilitation offer in all boroughs.

Developing post-Covid syndrome pathways



- NHS England and Improvement have recently published national guidance on post-Covid clinics which we are incorporating into our standard operating procedures for the post-Covid Syndrome pathway.
- We will report our plans for post-Covid clinics to them as a condition of receiving future post-Covid syndrome funding as a system.
- They will be monitoring delivery of the services through agreed service outcomes.
- As our understanding of PCS is still rapidly evolving we do not yet have data on expected prevalence within NCL but are working with public health to understand what the potential need for these pathways might be, and to ensure that patient care is provided equitably.





CCG annual assessment results 2019/20

CCG annual assessment results



- NHS England has published CCG annual assessment ratings for 2019/20 as part of its statutory oversight duties. The ratings for the five NCL CCGs are set out below alongside ratings for the previous two years.
- Ratings for four of the five legacy CCGs remained unchanged over the period with Camden CCG's rating declining due to in-year financial performance challenges which accounts for 25% of the overall assessment score.

CCG	2017/18	2018/19	2019/20
Barnet	Requires Improvement	Requires Improvement	Requires Improvement
Camden	Good	Good	Requires Improvement
Enfield	Requires Improvement	Requires Improvement	Requires Improvement
Haringey	Requires Improvement	Requires Improvement	Requires Improvement
Islington	Good	Good	Good

CCG annual assessment results



Assessments were based 50 indicators across three weighted domains – Finance, Leadership, and Other (including Performance and Outcomes).

Finance – 28	5% weighting
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• In-year financial performance

Leadership – 25% weighting

• Quality of leadership (linked to financial performance)

Performance, Outcomes & Other – 50% weighting

- Integrated primary care and community services, primary care workforce
- Urgent and emergency care services
- Personalisation & choice
- Preventing ill health and reducing inequalities
- Care and outcomes for maternity, cancer, mental health, diabetes, LTC, dementia, LD & autism, and planned care access standards
- Probity and corporate governance,
- WRES, staff engagement
- Expenditure in areas with scope for improvement (RightCare)

Performance overview

- The supporting dataset used to assess CCGs is yet to be published.
- Below are some of the key areas where provisional data suggests the CCGs performed well, and areas where improvements are required.

High performing areas in 2019/20

- Maternity services quality improvement projects were launched last year to improve care.
- Cancer Services patients are detected early in NCL relative to other CCGs leading to better oneyear survival rates. Waiting times also improved in the later part of the year.
- Probity and governance arrangements
- Patient and Public Engagement
- Early diagnosis of dementia

Work continues to further improve performance and outcomes for patients in these areas

Areas requiring improvement

- Access to diagnostics services
- Primary care workforce
- Neonatal mortality rates
- Patient experience of GP services

Plans are in place to delivery improvements in the areas identified including; Elective Recovery programme Delivery of Primary Strategy





NHS Annual Staff Survey

NHS Annual Staff Survey



- A huge thank you from the whole Executive Management team to all staff that took time to complete the NHS Annual Staff Survey.
- The overall response rate for North Central London CCG was 65.5%, which was up on last year.
- This year has been unlike any other in recent memory and the challenges we have faced have impacted each and every one of us.
- We hope that the results of the survey will help us to better understand where NCL CCG is achieving, and where we can improve in 2021.
- We will receive results of the survey in the new year (expected February/March) and EMT will work closely with the HR and OD team, as well as the Engaging Our People Forum and staff networks to make improvements where necessary.

Christmas Event: 18 December, 2.30 – 4.15pm Lots of 'MS Teams'-based Christmas fun is planned for the Christmas event! In the lead up to the 18th, we are asking staff to send us Christmas-themed fun photos of themselves sending 'seasons greetings' to CCG colleagues.

Please send photos to Ami Anttila at amina.anttila@nhs.net by Friday 11 December.

Prior to the 18th each directorate will be holding three photo competitions:

Best Christmas Jumper



Best Christmas Food Creation



On the 18th Directorate winners will compete to find out who the 'champion of champions' are for each category.

Your directorate representative (and Christmas event helper) has more info!