

<b>Title of Meeting:</b>	<b>Governing Body</b>	<b>Agenda Item: 4.2</b>									
<b>Date of Meeting:</b>	<b>22 December 2020</b>	<table border="1"> <tr> <th colspan="2">Session (Tick)</th> </tr> <tr> <td><b>Public</b></td> <td>X</td> </tr> <tr> <td><b>Private</b></td> <td></td> </tr> <tr> <td><b>Development Session</b></td> <td></td> </tr> </table>		Session (Tick)		<b>Public</b>	X	<b>Private</b>		<b>Development Session</b>	
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<b>Private</b>											
<b>Development Session</b>											
<b>Paper Title:</b>	<b>Accountable Officer Report</b>										
<b>Responsible Governing Body Member Lead</b> Amanda Bloor, Accountable Officer		<b>Report Author and Job Title</b> Amanda Bloor, Accountable Officer									
<b>Purpose (this paper if for)</b>	<table border="1"> <tr> <th>Decision</th> <th>Discussion</th> <th>Assurance</th> <th>Information</th> </tr> <tr> <td></td> <td></td> <td>X</td> <td></td> </tr> </table>			Decision	Discussion	Assurance	Information			X	
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		X									
<b>Has the report (or variation of it) been presented to another Committee / Meeting?</b> If yes, state the Committee / Meeting: No.											
<b>Executive Summary</b> The purpose of this report is to provide a brief update from the Accountable Officer of the North Yorkshire CCG to members of the Governing Body on areas not covered on the main agenda.											
<b>Recommendations</b> <b>The Governing Body is being asking to:</b> Review this report as assurance.											
<b>Monitoring</b> The Accountable Officer will provide a report at each Governing Body meeting.											
<b>Any statutory / regulatory / legal / NHS Constitution implications</b>	Any implications will be detailed in the report as required in the individual sections.										
<b>Management of Conflicts of Interest</b>	No conflicts of interest have been identified prior to the meeting.										
<b>Communication / Public &amp; Patient Engagement</b>	Not applicable.										
<b>Financial / resource implications</b>	Any financial implications will be detailed in the report as required in the individual sections.										
<b>Outcome of Impact Assessments completed</b>	Not applicable.										

**Amanda Bloor**  
**Accountable Officer**  
**NHS North Yorkshire CCG**

## **Accountable Officer Report**

### **1.0 Integrated Care System Update**

The Executive Director Group has been working with system partners, including Vale of York CCG and Humber Coast and Vale ICS to develop our system response to the proposals published by NHS England and Improvement regarding the consultation for changing the operating model of the NHS. We have been working through how we can best ensure that any changes ahead are levers to enable us to meet our stated ambitions: better population health management, working efficiently as a healthcare system with partners all pulling in the same direction and strategic commissioning which works for our places.

The consultation is open until 8 January 2021. For further information and/or to complete the consultation please use the link below.

<https://www.engage.england.nhs.uk/survey/building-a-strong-integrated-care-system/>

### **2.0 COVID-19 Recovery**

#### **Integrated working**

Integrated models have come into their own during pandemic response and the strong relationships across all organisations (primary, secondary, community, mental health and social care) have been key to this. We now have new whole system discharge arrangements in place supported by joint CCG and LA planning. There are discharge command centres in place at all five District General Hospitals to accelerate discharge, with social care, acute, and community teams working in partnership

#### **Managing surge in demand**

All health organisations have surge plans in place to manage further waves in demand. These plans include ongoing review and prioritisation of services, maximising discharge and admission avoidance capability, and enabling flexible deployment of the workforce to areas of greatest need.

The clinical prioritisation process has ensured that patients requiring cancer treatment in North Yorkshire have not experienced delays in receiving treatment and care. Diagnostic, bed and critical care capacity has also been protected for cancer patients to ensure that cancer diagnoses and treatments are not delayed.

#### **Primary Care**

In Primary Care all practices have remained open during the second wave and have contingency plans in place to maintain priority services in the event of significant demand or a reduction in clinic capacity. Primary Care appointments are back at pre COVID levels with a mix of face to face and digital consultations (on-line, video, telephone).

Priorities remain supporting the clinically extremely vulnerable, annual health checks for patients on the Learning Disabilities Register and cervical cancer screening

#### **Flu Vaccination**

Demand for flu vaccination is exceptionally high among those who are eligible - all GP practices progressing with the vaccination of eligible patients, prioritising those in higher risk groups and

are working in partnership with each other and community pharmacies to co-ordinate and ensure smooth delivery.

## **COVID-19**

The numbers of people testing positive across North Yorkshire have seen a strong downward trajectory in recent weeks and as of 6 December the 7 day average of positive cases per 100,000 people was 102 for North Yorkshire compared with an England average of 151. The number of positive cases in North Yorkshire hospitals has also seen a downward trend and as of 9 December is at 198.

The COVID vaccination programme preparation has moved at significant pace across the CCG patch and all 19 PCNs and all GP Practices will be taking part as soon as the vaccine can be delivered to their designated sites.

## **2.0 CCG Values**

The Governing Body received draft Values of the CCG at the last meeting in October 2020.

The Values were approved by the Council of Members via email and will form part of the Organisational Development plan and be embedded throughout the organisation.

## **3.0 NHS Oversight Framework Patient and Community Engagement Indicator 2019/20 Assessment Final Score**

In November 2020, the CCG received the delayed results of the NHS Oversight Framework Patient and Community Engagement Indicator 2019/20 Assessment. This assessment was based on the activities of the three legacy North Yorkshire CCGs and our results were mixed – ranging from outstanding to requires improvement.

Our overall rating was Amber, which feels fair, and the more detailed assessment the results provide confirm that we are on the right track with the activities we have included and prioritised in our own planning.

Further detail of this is included in the Communications and Engagement update.

## **4.0 Humber, Coast and Vale Health and Care Partnership Update**

### **COVID-19 – Managing Wave 2**

As set out in previous Partnership updates, system-wide plans were developed during the summer months, setting out the next stage (phase 3) of the Partnership's response to COVID-19.

Our system-wide plans set out how organisations would work together to ensure that all available capacity within the health and care system is utilised effectively such that capacity for non-COVID health services could be maximised, whilst planning for winter demand pressures and surge plans to deal with future COVID spikes.

The November Partnership Board meeting was focused on reviewing local surge plans in light of the rising incidence of COVID-19 across the region, which saw some areas in Humber, Coast

and Vale with community prevalence rates amongst the highest in England, creating significant pressure on local hospital services. Partners discussed plans and work underway to support mutual aid between providers to help manage spikes in demand and ensure continued provision of the most urgent care. Partners reviewed the escalation framework that had been agreed across the Partnership and would be used to assist in decision making. Robust incident management protocols are in place across the system to ensure a collective approach to managing risk and facilitating effective communication and the delivery of mutual aid.

### **Urgent and Emergency Care Programme Update – NHS 111 First**

Over recent months the HCV Urgent and Emergency Care Network has been working to develop a more integrated urgent and emergency care offer to all residents, with the aim of simplifying a complex and difficult to navigate network of services. We want it to be as simple as possible to find and access the right care and support – first time, every time. A key aspect of this work is the NHS 111 First programme, being developed by partner organisations across Humber, Coast and Vale.

On Tuesday 1 December a national communications campaign will be launched to support the rollout of the NHS 111 First programme. The campaign will encourage members of the public to contact NHS 111, by phone or online, when they have an urgent but not life-threatening medical need, rather than going straight to A&E. If the patient needs urgent care, NHS 111 can now arrange a time slot for them to arrive and be seen quickly and safely in A&E or at another appropriate service.

NHS 111 First ensures patients access the clinical service they need both in and outside of hospital. This will be managed through a clinical assessment as close to first contact as possible and in most cases in the COVID-19 environment this will be through a phone or video consultation. NHS 111 First also helps to reduce the risk of transmission of COVID-19 between patients and to staff by reducing crowding in waiting areas and support organisations to comply with government guidelines on social distancing and steps to reduce the spread of infection.

### **Inclusivity focus on Black, Asian and Minority Ethnic communities**

A progress update was provided at the meeting by Steve Russell, Chair of the Partnership's Black, Asian and Minority Ethnic (BAME) Steering Group. This included an update on activities undertaken to support Black History Month and developments in setting up the Humber, Coast and Vale BAME Network of Networks.

The BAME Steering Group will be undertaking work jointly with the HCV Voluntary and Community Sector steering group to develop our knowledge and understanding of existing community leaders and support organisations within our BAME communities across HCV. This work will support the Partnership to engage and involve more effectively with community organisations and local leaders across our diverse communities. In addition, we hope to create stronger links between community representatives and our BAME workforce, which is important for attracting new BAME staff members to our workforce.

A Humber, Coast and Vale Allyship / Active Allies Group is also being established consisting of non-BAME volunteers across the Partnership who wish to help support and empower their colleagues. At least one member of this group will join the meetings of the BAME Network of Networks Group.

## **5.0 Ways of Working**

The CCG offices remain closed at the moment with all staff working remotely. The CCG has continued to conduct staff surveys in order to monitor the health and wellbeing of staff during the pandemic. There has been positive feedback from the surveys that remote working has worked really well. The CCG will continue to monitor the situation and will plan to open the offices as soon as it is safe to do so.

The CCG would like to take this opportunity to thank staff for their continued support during a difficult year. We have supported staff with equipment to work from home, created a 'Wednesday Unwinder' covering a range of activities to complement the hard work we are all doing. It includes ideas about physical and relaxation activities, as well as health and wellbeing resources. We are also closing the virtual offices between Christmas and New Year for staff to take a break and to spend time with family and friends in line with national guidelines.

## **6.0 British Airways thanks NHS Staff**

On a very positive note, British Airways offered Avios flight points as part of a national thank you to NHS staff. We were keen to join in this opportunity to recognise the contributions across the NHS. Six colleagues were drawn at random to receive the donation on behalf of the CCG.

## **7.0 Recommendation**

The Governing Body is asked to receive this report as assurance.

**Amanda Bloor**

**Accountable Officer**

**NHS North Yorkshire Clinical Commissioning Group**