#### **Nottinghamshire County Teaching Primary Care Trust**

# Update Report on the A Picture of Health – Joint Health Scrutiny Committee

## 09 September 2008

#### 1. Introduction

The implementation phase of the Nottinghamshire Service Review will take place within a complex governance framework. This paper sets out the proposed key aspects of the partner organisations' response. It also provides an update on the period of public engagement regarding A Picture of health.

## 2. Period of Public Engagement on A Picture of Health

Between 9<sup>th</sup> June and 11<sup>th</sup> July 2008, the Service Review team led a period pf public engagement on A Picture of Health, which set out the draft vision for the future of health and health services in Nottinghamshire.

A comprehensive programme included engagement with key stakeholders, community and interest groups, staff, patients and the public (including a media campaign) and partner organisations' executive groups.

Over 26,000 full and executive vision documents and associated questionnaires were disseminated throughout the county (plus copies accessed through the website) and over 2,000 questionnaires have been completed. The questionnaires were supplemented by:

- Eleven focus groups, held by Ipsos MORI, to obtain the views of people who
  have recently experienced relevant health services of the underpinning themes
  and clinical priorities set out in A Picture of Health. There was one focus group
  per clinical area, plus a group for carers, learning disabilities and one for Polish
  speakers. The focus groups took place in venues across the county to ensure
  reflective, if not representative views;
- Relevant health questions included within the Citizen's Jury questionnaire; and,
- Children and Young People' surveys coordinated through Youth Zone and the Acorn Initiative.

Given the scale of the response to the engagement process, analysis of the results is ongoing and will be considered by the Programme Board in September.

# 3. Principles Underpinning the Development of the Nottinghamshire Service Review Governance Framework

The purpose of the Nottinghamshire Service Review is clinically-led transformational change and service improvement across organisational and professional boundaries. The project's structure has been developed in the context of the following principles:

- The project must be clinically-led and managerially supported with ongoing ownership by local patients and public;
- PCTs and practice based commissioners are the undisputed commissioners of services but change is critically dependent on all health organisations and their partners;
- Change should be managed at the most local level to affect the desired impact and reflect people's needs; and,
- All health organisation staff have a responsibility for continuous service improvement.

## 4. Programme Structure

A formal governance and management structure for the implementation phase of the Nottinghamshire Service Review was agreed at the Project Board on 9<sup>th</sup> July 2008, please see organagram attached as Annex 1.

The alignment of the governance structures for the county and East Midlands' programmes for service change will be ensured as the regional structures and the respective programmes are clarified.

#### 5. Programme Board

The Project Board is to be reconstituted into a Programme Board to reflect the implementation phase of the programme. The first meeting of this revised group was held on 20<sup>th</sup> August 2008. The Programme Board drives and oversees the Nottinghamshire Next Stage Review, providing leadership and executive support to the delivery of key milestones and the overall success of the programme.

It is responsible for:

- a) Driving the programme;
- b) Signing off the delivery of products; and,
- c) The acceptance of these into the commissioning intentions of the Primary Care Trusts and, where relevant, Local Authority.

The health community needs to ensure that all local health organisations can inform, influence and agree the products in so far as they relate to clinical and model of care decisions in an effective and timely manner. However, commissioning decisions also need to be made with due recognition of the Principles and Rules for Cooperation and Competition. Therefore, Programme Board meetings will be structured accordingly, with all appropriate items being considered in the first session (providers and commissioners) and commissioning decisions being made in a second session (if and where appropriate).

#### 6. Clinical Leadership Group:

The first meeting of the Clinical Leadership Group (CLG) was held on Wednesday 2<sup>nd</sup> July 2008. The CLG will provide clinical leadership, support and advice to the programme and to the Programme Board, which will lead it.

The CLG will not usurp the actual work of clinical transformation being taken forward by existing clinical groups. Rather it will support such groups and give assurance to the Programme Board by:

- Defining outcomes of care, pathway specification and quality standards;
- Agreeing standardised NHS preferred clinical pathways for a number of key clinical areas where there is existing variable clinical performance, heavy resource consumption associated with waste or where there are serious risks attached to the process of care;
- Reviewing and producing a set of preferred standards for all clinical areas leading to generation of outcome indicators; and,
- Identifying candidate areas for immediate and effective action

Terms of reference and membership of the CLG have been agreed, although the interface with practice based commissioning will be subject to further consideration.

### 7. Patient Advisory Group

A Nottinghamshire Service Review Patient Advisory Group is to be established to ensure an effective, systematic approach to ongoing dialogue with patients and the public, which ensures real influence on the development and implementation of the Nottinghamshire Service Review. The Group will report to the Programme Board. It will be supported by patient and public engagement throughout the clinical work streams.

Terms of reference have been considered by local patient involvement leads and membership is being confirmed, please see Annex 2.

#### 8. Clinical and Management Leads

The failure to activate and orientate clinicians in Nottinghamshire to both the case for change and the specific proposals for developing the care delivery system set out in *A Picture of Health* represents the greatest risk to implementation. Therefore, the recruitment process has commenced for clinical and management leads for the nine clinical work streams from across the health professions and the health and social care community.

Interviews will be held on 27<sup>th</sup> August 2008 and it is hoped that positions will be filled by mid-September.

In the meantime, the Service Review Team has been strengthened by the absorption of the experienced service improvement resources in The Nottinghamshire Service Improvement Academy.

The clinical and management leads for the first phase of the project have been asked to support the programme in advance of the appointments identified above. Where agreed, their input is helping to develop an initial work programme (see below).

#### 9. Clinical Work Streams

As noted above, wherever possible and appropriate, the work of the Nottinghamshire Service Review will be managed though existing groups and networks. Therefore, the team is currently mapping these across the health and social care community so that clinical and management leads can activate their clinical work streams quickly and effectively on appointment. This may also result in recommendations on changes to existing groups to ensure consistency of remit and focus across the health community.

The Service Review team has commenced development of a programme of initial priority projects, based on the recommendations of the Clinical Advisory Group reports and A Picture of Health.

The programme will be commenced in earnest on appointment of the clinical and management leads. However, in the interim, the Team is supporting the partner Primary Care Trusts' development of their 2009/10 operational plans and five year strategic frameworks to ensure alignment of strategic and operational plans.

## 10. Enabling Groups

Business support will be provided from experts within the following fields:

- Commissioning;
- Patient and public involvement;
- Communications:
- Human resources/workforce development;
- Research and development;
- Finance; and,
- Information management and technology and capacity planning analysis.

The enabling groups will:

- Offer expert support and advice, delivering as a client to clinical task and finish groups;
- Report to programme management on an exception basis, highlighting risks and recommending mitigating actions;
- Liase with provider organisations/SHA/Universities and other interfaces where there is a strategic enabling interface; and,
- Propose leads identified from across health community as key interface with each clinical work stream, who then feed back to/draw from relevant professional groups (as per IM&T).

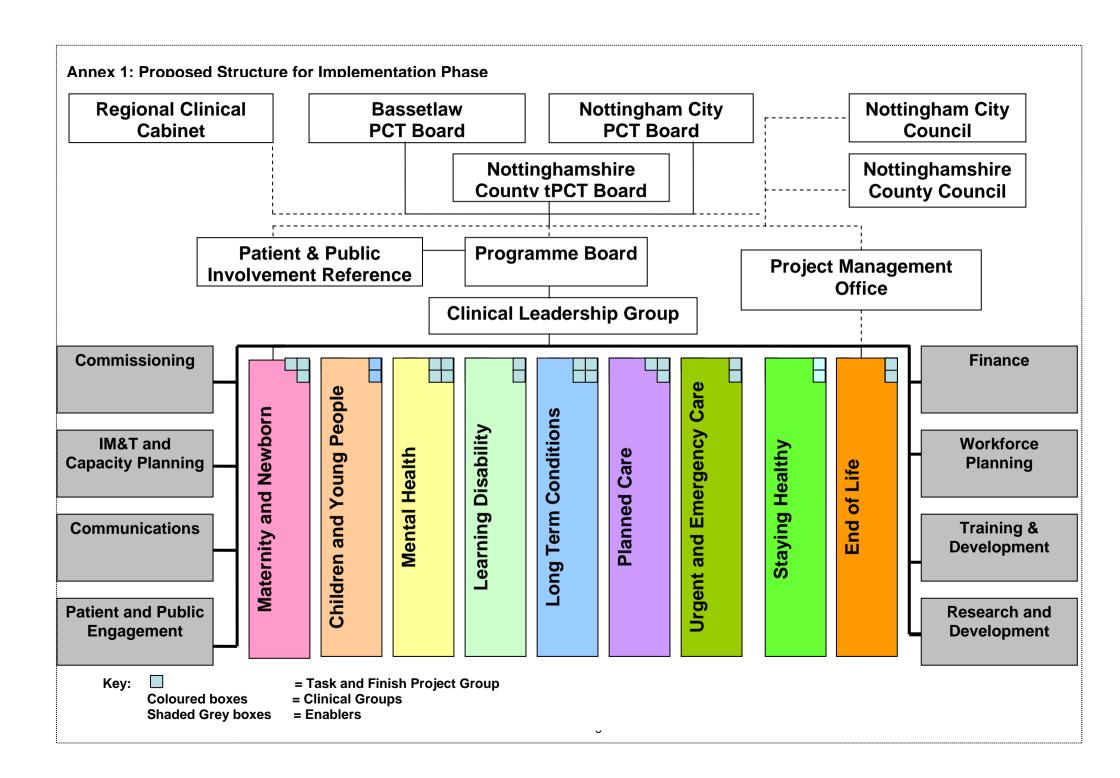
The IM&T and workforce development teams have already begun to interface with CLG and identify the implications of the Nottinghamshire Service Review on their local implementation strategies.

## 11. Stroke and Primary Angioplasty

Deborah Matthews, the Director of Service Review will be providing management support to the Chief Executive of Nottingham City PCT who is leading with regional stroke and primary angioplasty work streams.

## 12. Project Initiation and Financial Implications:

A draft budget for the rest of 2008/09 is currently under discussion and will be presented to the Programme Board on 20<sup>th</sup> August 2008 under cover of a Project Initiation Document for the implementation phase.



#### NOTTINGHAMSHIRE COUNTY TEACHING PRIMARY CARE TRUST

## **Proposed Membership of the Patient Advisory Panel**

#### 1. Introduction

Annex 1 includes the proposed terms of reference and membership of the Patient Advisory Panel, which, it is proposed, will report to the Programme Board.

# 2. Background

Following the Project Board on 9<sup>th</sup> July, the Head of Public Involvement for Nottinghamshire County Teaching PCT was asked to review the draft terms of reference for the Patient and Public Involvement Reference Group and circulate these, with view son membership to patient and public involvement colleagues across the health community.

No substantive changes to the terms of reference have been made. However, following concerns expressed by the Overview and Scrutiny Committee on the proposed name of the group, an alternative name, the Patient Advisory Panel, is suggested.

The following membership has been proposed:

From Nottinghamahira County	- Head of Dublic Involvement
From Nottinghamshire County	Head of Public Involvement
Teaching PCT	Cluster Lead for PPI
	• 2 representatives from each locality
	engagement group
	2 representatives from Principia Patient
	Reference Group
	2 representatives from Nottinghamshire Local
	Involvement Network
From Nottingham City PCT	Patient Experience Group (PEG)
From Bassetlaw PCT	Development Manager
	PPI Manager
From Nottinghamshire Service	Director of Service Review
Review	
	Clinical Lead

#### 3. Recommendation

The Programme Board is requested to:

• Endorse the name and terms of reference for the Patient Advisory Panel; and,

Support the proposed membership.