

Report to STP Board: 14 March 2019

<b>Agenda item:</b>	4.5		
<b>Title:</b>	Other item list		
<b>Lead:</b>	Rob Hughes, Chair, North West Anglia NHS Foundation Trust (NWAngliaFT); Gary Howsam, Clinical Chair, Cambridgeshire and Peterborough Clinical Commissioning Group (C&PCCG); and Matthew Winn, Chief Executive, Cambridgeshire Community Services NHS Trust (CCS)		
<b>Author:</b>	Laura Anthony, System Strategy Manager, System Delivery Unit and Aidan Fallon, Head of Communications & Engagement, System Delivery Unit		
<b>Report purpose</b> <i>(Please mark one in bold)</i>			
APPROVAL	DECISION	ASSURE	<b>INFORM</b>
<b>Link to STP Priorities</b> <i>(Please mark all applicable in bold)</i>			
AT HOME IS BEST	<b>SAFE &amp; EFFECTIVE HOSPITAL CARE, WHEN NEEDED</b>	<b>WE'RE ONLY SUSTAINABLE TOGETHER</b>	<b>SUPPORTED DELIVERY</b>
<b>Committees/groups where this has been presented to before</b> <i>(including date)</i>			
Health and Care Executive (HCE) – 12 February 2019			

<b>Purpose of the paper</b>
The purpose of this paper is to provide STP partners with assurance that there is a robust process in place for the management of those system issues that are over and above the currently agreed System priorities.
<b>The STP Board is invited to:</b>
<ul style="list-style-type: none"> <li>Note that the themes which emerged as either requiring further discussion to achieve a commonly-agreed approach or areas requiring further work are now been addressed;</li> <li>Note the update on System Items for Agreement;</li> <li>Note that two System Items for Prioritisation – Admissions Avoidance and Clinical Areas for Radical Transformation – are being addressed in other agenda items at today's STP Board; and</li> <li>Note the HCE decision to stand down the Planned Care Delivery Group (PCDG) and establish working groups which report into the North/South Alliances.</li> </ul>

**1. INTRODUCTION / BACKGROUND**

Earlier in 2018/19, system partners agreed to focus on a small number of priorities for the short term (Accident & Emergency, Delayed Transfers of Care and finance) and medium term (the development of the North/South Alliances and Integrated Neighbourhoods, in particular) in order to address long-standing System-wide operational difficulties.

Notwithstanding this agreement to focus on a small number of priorities, system partners also highlighted a number of themes and system-wide issues that also need attention.

The themes emerged as either requiring further discussion to achieve a commonly-agreed approach or areas requiring further work, as follows:

1. System finance;
2. Improving trust between Partners;
3. Engagement and involvement of the public and senior stakeholders;
4. Resourcing and (long-term operating) models; and
5. Governance and (programme) resourcing.

All of these themes are now being addressed, either through the longer-term models for greater integration, our work on a medium-term System financial plan, our stakeholder engagement plan and the newly-established task and finish group on aligning System resources.

In respect of the system-wide issues, a *Prioritisation and Agreement Framework* has been developed to ensure that these matters are prioritised effectively and scheduled from being “parked” to becoming “live” short/medium-term priorities. This framework was approved by the STP Board at its 22 January 2019 meeting.

## 2. Prioritisation and Dispute Resolution Framework

### ***Guiding principles***

The Board is reminded that the Framework is based on a set of guiding principles, which are:

#### Approach:

- patient interest across Cambridgeshire and Peterborough footprint being at the heart of our prioritisation;
- learning lessons from the past;
- taking organisational interests aside;
- sticking to decisions once they have been made - utilising the public STP Board meetings to ensure there is a commitment to the public when decisions are made to hold partners to account;
- sticking to a commitment already made to resolve an issue by an agreed date - reminding members of the STP Board the commitments the System agreed to in the Memorandum of Understanding; and
- making concessions in the interest of relationships.

#### Process:

- transparency – being clear on who needs to be involved in the issue;
- treating all issues equally regardless of what it is (e.g. clinical/ non-clinical);
- distinguishing between system business and organisational business;
- understanding the root cause of the issue (for example; transformational resource, commissioning, financial, resources, clinical governance/safety); and
- forward planning agendas populated with the key dates for decisions to be made.

### ***System Items for Agreement - Tracker***

The current version of the System Items for Agreement Tracker is available at annex 1.

All four items on the Tracker are currently going through an agreed process and it is proposed to provide the HCE with an update at its April meeting.

## ***System Items for Prioritisation - Tracker***

The current version of the System Items for Prioritisation Tracker is available at annex 2. Board members are asked to note the following:

- two of the items on the Tracker – Admissions Avoidance and Clinical Areas for Radical Transformation – are being addressed within other agenda items at today's STP Board agenda;
- there are a number of areas which could naturally be considered as part of the Longer-Term Models workstream as we develop our refreshed five year plan:
  - Giving children and young people the best possible start in life;
  - Ensuring our mental health services continue to be invested in and developed;
  - Enhancing, further, our renown in specific pathways e.g. cardiology, cancer;
  - Clinical strategy (whether we're doing enough to make the System clinically sustainable - in particular Hinchingsbrooke Hospital);
  - Operational and clinical standards;
  - Long-term plan 'must do's';
  - Outpatients re-design; and
  - Development of (and investment in) primary care (which will also be covered in the System's Primary Care Strategy which is due alongside our five-year plan);
- HCE agreed, at its 12 February meeting, to add 'prevention and health inequalities' to the list of System items for prioritisation; and
- HCE will consider further items for prioritisation at the next meeting planned for 18 April, including workforce.

## ***Items for de-prioritisation***

At the STP Planned Care Delivery Group (PCDG) meeting, held on 31 January, the working arrangements for 2019/20 was discussed. It was proposed that the Delivery Group stand down for next year and, instead, re-focus work via a working group which reports into the North and South Alliances. A final PCDG meeting is due to take place in March to close off any outstanding areas. The HCE, at its meeting of 12 February, agreed the proposal to stand down the PCDG.

## **3. RECOMMENDATIONS**

The STP Board are asked to:

- Note that the themes which emerged as either requiring further discussion to achieve a commonly-agreed approach or areas requiring further work are now been addressed;
- Note the update on System Items for Agreement;
- Note that two System Items for Prioritisation – Admissions Avoidance and Clinical Areas for Radical Transformation – are being addressed in other agenda items at today's STP Board; and
- Note the HCE decision to stand down the Planned Care Delivery Group (PCDG) and establish working groups which report into the North/South Alliances.

**Appendices:**            ***Annex 1 – System Items for Agreement – Tracker – to follow***  
                                 ***Annex 2 - System Items for Prioritisation - Tracker***

***Annex 1 – System Items for Agreement – Tracker – to follow***

**Annex 2 - System Items for Prioritisation - Tracker**

Prioritisation
Giving children & young people the best possible start in life
Ensuring our mental health services continue to be invested in and developed
Enhancing, further, our renown in specific pathways e.g. cardiology, cancer
Development of (and investment in) primary care
Clinical strategy (whether we're doing enough to make the System clinically sustainable - in particular at Hinchingbrooke Hospital)
Operational and clinical standards
Admissions avoidance – <i>being considered at meeting today</i>
RightCare
Clinical areas for radical transformation – <i>being considered by the STP Board at March 2019 meeting</i>
Outpatients redesign
Shared Services (excluding Estates)
Long-term plan 'must do's'
Prevention and health inequalities