

North Central London

MEETING:	Meeting of the Joint Boards of NHS North Central London		
DATE:			
TITLE:	Haringey Emerging Clinical Commissioning Group Performance		
	Report		
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SUMMARY:

This paper gives the Board of Haringey Primary Care Trust (PCT) a summary of the CCG monthly integrated performance report.

SUPPORTING PAPERS:

None.

RECOMMENDED ACTION:

The Board of Haringey Primary Care Trust is asked to:

• NOTE and COMMENT on CCG performance.

LINKS TO NHS NORTH CENTRAL LONDON STRATEGY

Performance management is a key part of CCGs progress towards achieving authorisation.

GOVERNANCE: Relates to internal Transition Programme governance only.

Barnet	Camden	Enfield	Haringey	Islington
Raula Kahn	Raula Kahn	Raula Kahn	Raula Kahn	Raula Kahn
David Riddle	John Carrier	Karen Trew	Cathy Herman	Anne Weyman
Caroline Rivett	Caroline Rivett	Caroline Rivett	Caroline Rivett	Caroline Rivett
Bernadette	Robert Sumerling	Deborah Fowler	Sue Baker	Sorrel Brookes
Conroy	Karen Trew	Cathy Herman	Anne Weyman	David Riddle
John Carrier	Deborah Fowler	Sue Baker	Sorrel Brookes	Bernadette
Robert Sumerling	Caroline Taylor	Caroline Taylor	Caroline Taylor	Conroy
Caroline Taylor	Ann Johnson	Ann Johnson	Ann Johnson	Caroline Taylor
Ann Johnson	Quentin Sandifer	Shahed Ahmad 🔪	Jeanelle De 🛛 🔪	Ann Johnson

Voting: *Please indicate which Board(s) has voting rights on this matter (if applicable)*

NHS North Central London is a collaborative working arrangement between Camden, Camden, Haringey, Camden and Islington Primary Care Trusts.

The Joint Boards of NHS North Central London refers to the joint meeting of the Boards of Camden, Camden, Haringey, Camden and Islington Primary Care Trusts.

Objective(s) / Plans supported by this paper:

To provide the Joint Boards with an overview of CCG performance.

Patient & Public Involvement (PPI): None

Equality Impact Analysis: None

Risks: As described in report

Audit Trail: None

Next Steps: As described in section 5.2

1. INTRODUCTION

- 1.1 A comprehensive integrated performance report has been developed for CCGs to use during the period of delegated responsibility. This report will be the vehicle by which CCGs are performance managed and will form the basis of the monthly stock take meetings between Caroline Taylor and NHS North Central London colleagues and the CCG Chair, Accountable Officer and CCG team.
- 1.2 This report provides the Haringey PCT Board with a summary of the integrated performance report for the period to 31 July 2012, as reviewed at the Performance Review meeting on 5 September 2012.
- 1.4 The Board of Haringey PCT is asked to:
 - **NOTE** and **COMMENT** on CCG performance.

2. PROGRESS TOWARDS ACHIEVING DELEGATED RESPONSIBILITY

2.1 **Progress against plan**

2.1.1 Delegation for all eligible budgets (Prescribing, Acute Commissioning, Children's Services, Integrated Care and Mental Health and Learning Disability) has now been achieved.

3. HEADLINES FROM THE LAST MONTH

3.1 What has gone well this month?

- 3.1.1 Haringey emerging CCG is pleased to be able to report the following achievements:
 - Overall there was a slight underspend on non-acute budgets
 - There has been a "step change" in discussions with Enfield and NMH to support and enhance QIPP Board delivery, following liaison between the interim Borough Directors for Haringey and Enfield with the Acting NMUH CE
 - The Quality Committee is now in operation and robustly managing ownership for quality throughout the transition
 - Community Ophthalmology pathway is now approved and the go live date is being finalised for October 2012
 - A project manager and a project director are now on board to support the authorisation process. Haringey CCG have recovered the slippage reported at the last meeting and are now on track for submission as part of wave 3 on 1 October.

3.2 What could we have done better?

- 3.2.1 Haringey emerging CCG recognise that they continue to develop and they could improve in the following areas:
 - Month 4 figures show a significant level of over spend. The year to date over spend on delegated budgets at m4 is £2.4m. This is exclusively the result of acute over performance, primarily at UCLH. Steve Rubery, UCLH Senior

Contract Account Manager provided an analysis identifying the majority of variance is critical care and specialist high cost/low volume treatments. Issues with the transfer of ENT work to UCLH from RFH were under review. The cluster contracting team are working with UCLH to produce meaningful datasets and the CCG is focused on referral management and the peer review of and support to individual practices. Helen Pelendrides explained the visits of CCG GP leads and herself to review actions at collaborative and practice meetings.

- A&E performance at North Middlesex University Hospital remains a concern. This is both in terms of recent A&E access indicators and constraints in the implementation of the UCC model. John Rohan, Urgent Care GP Lead, and Andrew Williams were meeting with NMUH CE and COO to agree plans to streamline the model to meet NCL and CCG contract requirements and NMUH A&E re-design led by the Trust's Emergency Care Board.
- TIA assessment (part of stroke pathway) received a report showing unexpected poor performance for quarter one of this year. This related to UCLH and only to Haringey. Further analysis was required by NCL Informatics and Contracts to establish whether this was a data anomaly of clinical change in practice and brief the CCG accordingly.
- There was a rise in mixed-sex accommodation breaches at the Whittington. Subsequent analysis identified this to be at a learning disability respite unit and action to resolve this has been taken by the integrated learning disability service management team responsible for this Section 75 agreement, also provided with London Borough of Haringey and BEHMHT.
- NCL and the CCG are forecasting an overspend of approximately £10m. Following the assessment of this emerging risk at the Month 5 Performance Review, the CCG's QIPP Commissioning group has initiated new work to address the QIPP gap, with a particular focus on the 13/14 run rate. Proposals were generated at a workshop on 4 September with CCG GP leads and NCL PMO colleagues, for review and development at the Clinical Cabinet on 6 September. Implementation and capacity plans and lead responsibilities are being progressed through the CCG's QIPP Commissioning group on 18 September.
- Critical capacity gaps are now becoming clear, both for leadership and QIPP delivery and the CCG is working to address these. The NCL team approved in principle the CCG's proposal for a senior QIPP manager to enable increased QIPP capacity to be deployed at consolidating existing QIPP plans and generating new ones through the QIPP Transformation Boards with NMUH, WH and BEHMHT and CCG collaborative commissioners.

4 GOVERNANCE HEADLINES

4.1 Achievements of the CCG Board and other sub-committees

- 4.1.1 Haringey emerging CCG's governance and structures continue to develop. The following headlines can be reported for the groups that met recently:
- 4.1.2 The CCG Board held an additional seminar on 23 August 2012 to focus on the authorisation process and associated issues. Following a governance presentation by Frank Donlon (the new authorisation project director) the Board reviewed the latest draft of the Constitution and the revised Committee and Management structures, and agreed the revised Communication and Engagement Strategy. The

forthcoming site visits and evidence for the Domain Groups were also discussed. The CCG is holding a follow-up session on the Domain Groups and Case Studies evidence on 6 September 2012, attended by additional members of the shadow CCG Governing Body and management team.

5 PROGRESS TOWARDS AUTHORISATION

5.1 **Progress against plan**

- 5.1.1 Progress has been made in the following areas:
 - Sarah Price has been appointed as the Chief Officer, and David Maloney has been appointed as the Chief Finance Officer
 - Additional resource in the form of a project manager and project director has been brought in to support the authorisation process. The CCG is on track to submit their authorisation application on 1 October with the other wave 3 CCGs
 - Documentation is now being uploaded onto the knowledge management system, and being sign-posted to ensure the reviewers are able to find the evidence they require
 - Following the submission of the written application, preparation will begin in earnest for the Mock Site Visit with NHS London on 11 October and the Site Visit with the NHS Commissioning Board on 13 November.

5.2 Milestones achieved and upcoming

- 5.2.1 Haringey Emerging CCG is on track for wave 3, and recently achieved the following milestones:
 - Appointments of the CO and CFO
 - Initiation of the 360° stakeholder survey
 - Ongoing preparation of the authorisation documentation and application
- 5.2.2 The CCG is currently working towards the following milestones:
 - Submission of the authorisation application on 1 October
 - Mock Site Visit with NHS London on 11 October
 - Site Visit with the NHS Commissioning Board on 13 November
 - Authorisation outcome expected by 31 December.