

Northern CCG Joint Committee

Date of meeting: 10 September 2020

Does paper need to be circulated before the agenda goes out (ie earlier than 10 working days prior to the meeting) (please circle): **No**

Title of report: Northern CCG joint Committee – Annual report 2019/20

Purpose of report (brief description):

To receive the Joint Committee's Annual Report for 2019/20

Recommendations:

Is the paper for (please tick):

Decision-making

Information Sharing

Discussion

Actions required by Northern CCG Joint Committee:

To receive the report.

Sponsor: Jon Rush

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Job Title: Business Support Manager, North of England Commissioning Support (NECS)

Date: 26 August 2020

Chair's foreword

The Northern CCG Joint Committee (hereafter referred to as 'the Joint Committee'), established in October 2017, has continued to meet regularly during 2019/20 and is guided by the following principles:

- Securing continuous improvement to the quality of commissioned services to improve outcomes for patients with regard to clinical effectiveness, safety and patient experience
- Promoting innovation and seeking out and adopting best practice, by supporting research and adopting and diffusing transformative, innovative ideas, products, services and clinical practice within its commissioned services, which add value in relation to quality and productivity.
- Developing strong working relationships with clear aims and a shared vision putting the needs of the people we serve over and above organisational interests
- Avoiding unnecessary costs through better co-ordinated and proactive services which keep people well enough to need less acute and long term care.

Throughout the year the Joint Committee routinely discussed governance proposals to support the shared ambition of the NHS organisations in Cumbria and the North East (CNE) to become an Integrated Care System (ICS).

Jon Rush
Chair
10th September 2020

Membership

During 2019-20 membership of the Joint Committee comprised the following Clinical Commissioning Groups (CCGs):

NHS Darlington CCG	NHS Durham Dales, Easington & Sedgefield CCG
NHS Newcastle Gateshead CCG	NHS Hambleton, Richmondshire & Whitby CCG
NHS North Cumbria CCG	NHS Hartlepool and Stockton-on-Tees CCG
NHS North Durham CCG	NHS Northumberland CCG
NHS North Tyneside CCG	NHS South Tees CCG
NHS South Tyneside CCG	NHS Sunderland CCG

Voting membership of the Joint Committee comprises the Chair and Chief Officer from each member CCG (or a nominated deputy) and each CCG is entitled to exercise one vote as required.

There are also two (non-voting) lay members of CCGs on the Joint Committee, one of whom is also the Vice-Chair.

The Managing Director of North of England Commissioning Support (NECS), Chair of the Cumbria and North East CCG Chief Finance Officers' Group and Director of Governance and Partnerships North East and North Cumbria Integrated Care System also attend meetings of the Joint Committee in a non-voting capacity.

Meetings

Public meetings of the Joint Committee were held in May, July, September and November 2019 and January and March 2020. These were also supported by development sessions, particularly as the role of the North East and North Cumbria ICS developed and the Committee aimed to understand the Governance and relationship issues.

Activity and approvals 2019/20

The following key areas of the Joint Committee work in 2019-20 are outlined:

Avastin - The work to enable the prescribing of Avastin was co-ordinated by the Committee and specifically led by two of our members – David Hambleton and Dan Jackson. The Court of Appeal decided in favour of the NHS against two multinational drug companies which has the potential to save the taxpayer millions in the treatment of wet age-related macular degeneration (wet AMD). Patients now have the option to choose Avastin for wet age-related macular degeneration (wet AMD) alongside two other more expensive drugs, Lucentis and Eylea.

North East and North Cumbria Prescribing Forum - The Committee discussed future reporting arrangements for the Forum and agreed to reflect reporting arrangements in the Committee's workplan to support a co-ordinated approach across the ICS..

ICS Briefing event - The Lay Members of the Committee led on the initial co-ordination and understanding of how the formation of the ICS may develop. This culminated in an event taking place in Durham on 4th November which was attended by CCG lay members, NHS Foundation Trust non-executive directors and representatives from local authorities, Healthwatch and third sector organisations.

Terms of Reference - The work to review the Committees Terms of Reference was commenced this year but the finalisation of them was delayed due to the response to Covid. The review was undertaken to account for the impending changes in the CCG structures in the ICS and to widen the scope of its delegated responsibilities.

Annual Workplan - This was commenced this year but was unable to be finalised due to the response to Covid. The review included the utilisation of a matrix, developed within the TOR to ascertain the appropriate geographical scope of the areas under review and has initially come up with the following:

- The joint commissioning of breast diagnostic services across the ICS area
- The joint commissioning of cardiology and specialised neuro-rehabilitation services with NHSE/I's Specialised Commissioning team
- The development of consistent VBCC and IFR policies across the ICS area
- To receive updates from the North East and North Cumbria Prescribing Forum
- To receive updates on plans for rheumatology services in the County Durham, South Tyneside and Sunderland ICP

NEC's Customer Owner Board funding - At the Committee in July 2019, NECS invited their CCG Customer owners to put forward ideas for transformation funding made available from NECS surplus which had been generated through its success in winning business across the country and thus meeting its financial targets. Following review against criteria agreed with the Joint Committee, Customer Directors agreed £1,578m of investment in schemes across the whole of the NENC ICS. (A list of the schemes is attached at Appendix A)

Development sessions and other key areas of discussion

These included:

- Regular reports and minutes of the North of England Commissioning Support (NECS) Customer Board and the NECS Annual review
- Individual Funding Requests (IFRs)
- Value Based Commissioning (VBC)
- Integrated Care System (ICS)
- Flash Glucose Monitoring
- Cyber Security
- Update on research and Evidence
- Representation on the Clinical Research Network North East and North Cumbria
- ICS Specialised Commissioning
- NHS national CCG Conference update
- Academic Health Science Network (AHSN) vacancy

Appendix A

Outline of NEC's Customer Owned Board Schemes supported in the NENC ICS

<p>Implementation of a formal, recognised and independent Digital baseline maturity assessment across the North East and North Cumbria ICS, to establish the gap towards the future state.</p>
<p>Integrated Single Point of Access within Southern ICP area to improve patient journeys across health and social care services, supporting people to remain in their own homes and providing an integrated approach to hospital discharge.</p>
<p>Transformation of pain management services across acute, community and primary care within Southern ICP area</p>
<p>Addressing population health and inequalities through Community pathfinder in Stockton-on-Tees to tackle population health and inequalities together with development of a 'Deep End' approach within general practice in areas with the highest health inequalities</p>
<p>Transformation funding to support Ambulance Service developments across the North East and North Cumbria ICS including</p> <ul style="list-style-type: none">• Clinical Modelling• Falls prevention and response: Falls Training for Care Homes• Sepsis awareness training• Urgent Care Pathways (UCP) development expansion
<p>Transformation funding for Mental Health across the North East and North Cumbria ICS including:</p> <ul style="list-style-type: none">• Support to the scaling up of Child Health integrated care• Physical Health of People with Serious Mental Illness work area - to support the scaling up of the successful MacMillan and Mind Collaboration project within Tees.• Drug Related Deaths - scoping and mapping to review areas of best practice within the region.• Optimising Health Services (Mental Health); to focus on emergency response service and joint working with the North East Ambulance Service, to scope and develop a delivery plan to reflect priority areas.• Support for wider communications and engagement with key stakeholders across the region. This would include, organising multi-stakeholder workshops and events, establishing a service users and carers approach, co-ordinating bulletins and information resources including website resources
<p>Development of the Violence Reduction Navigator role in Accident and Emergency across the North East and North Cumbria ICS ICS to offer support to help patients change their lives by establishing diversionary pathways from future violence, drugs, homelessness, unemployment and crime.</p>