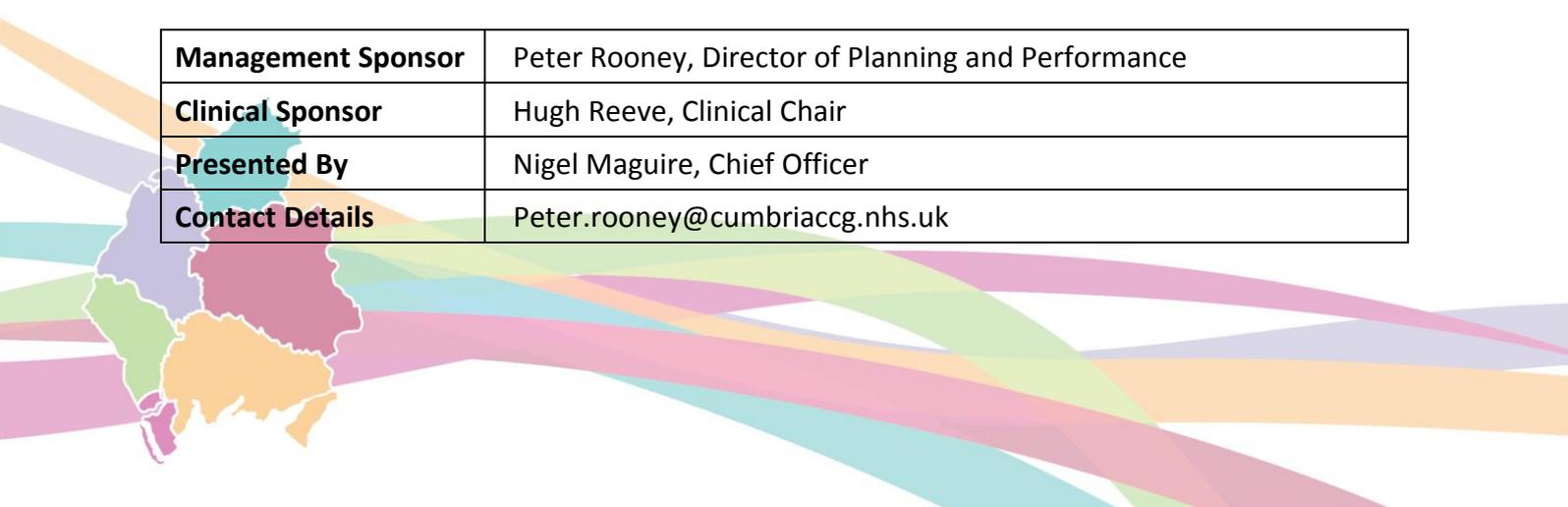


<b>NHS Cumbria CCG Governing Body</b>	<b>Agenda Item</b>
<b>17 April 2014</b>	<b>9</b>

### **NHS Cumbria PCT Corporate Handover Document Update**

<b>Exec Summary/Purpose of report:</b>
<p>The former NHS Cumbria Teaching Primary Care Trust (PCT) produced a corporate handover, and a quality handover, document in early 2013. These documents were intended to capture the final position on a range of issues as a formal record of the close down of the PCT, and to provide corporate memory to the PCT successor organisations. The Governing Body received the documents at its meeting in April 2013, and received a further report at the June 2013 meetings on the specific actions relevant to the CCG.</p> <p>The purpose of this report is to advise the Governing Body of progress against the identified actions. All of the actions have been either completed, or are now within the CCG work programme and are reported on through our existing governance structure. For example, the handover document highlighted the need for a south Cumbria clinical strategy, which is not yet complete, but is reported in relation to the Better Care Together process.</p>
<b>Key Issues &amp; Recommendations:</b>
<p>In order to close the handover process from the former PCT to the CCG, the Governing Body needs to determine if it is sufficiently assured to formally accept that the relevant handover actions have either been completed, or are now embedded in formal CCG processes for continued delivery.</p>
<b>Actions required by members:</b>
<p>The Governing Body is requested to:</p> <ol style="list-style-type: none"> <li>1. agree that the handover process from the former PCT to the CCG is now complete</li> <li>2. the incomplete actions identified will be reported through the existing CCG processes</li> </ol>

<b>Management Sponsor</b>	Peter Rooney, Director of Planning and Performance
<b>Clinical Sponsor</b>	Hugh Reeve, Clinical Chair
<b>Presented By</b>	Nigel Maguire, Chief Officer
<b>Contact Details</b>	Peter.rooney@cumbriaccg.nhs.uk



[Page left blank intentionally]

## NHS Cumbria PCT Corporate Handover and Quality Handover Document Summary Progress Update

Topic	Issue Identified	Action	Status
South Cumbria Strategy	Work with UHMBFT and other stakeholders to finalise the new clinical services strategy to deliver a sustainable set of service models; undertake the consultation process and proceed to implementation from April 2014.	Continued delivery of the strategy through the Better Care Together Programme, working towards the strategic outline case in June 2014.	Amber
North Cumbria Strategy	Work with NCUHT, NHFT and other stakeholders to deliver the outstanding components of the north Cumbria Clinical Services Strategy and support NHFT in the delivery of the new operational and financial plans in the lead up to and beyond the merger	Established the North Cumbria Programme Board and analogous process to Better Care Together.  Continued support to NCUHT in advance of delayed acquisition.	Amber
Mental Health Services	Support the implementation of strategies and patient pathways for community based recovery services, personality disorder, dementia services, suicide prevention and the integration of mental health and physical health; ensure clinically effective services are in place in response to serious untoward incidents; continue the dialogue with CPFT to agree robust ways to ensure systems and care delivery is safe	Continued performance management of the Trust, including strengthened arrangements for reviewing quality and specifically safety.  Commissioned an independent review of adult mental health service due to report May 2014.	Amber
Nursing Homes	Examine the outcome of the locality pilot process to develop more effective and consistent monitoring of standards of nursing care being provided; develop a high level quality profile for this sector with the potential for early warning signs to be identified; continue the work with Adult Social Care to refresh, strengthen and systematise joint commissioning arrangements; embed quality surveillance and quality development work as part of the commissioning of residential and nursing home care	We are working with Adult Social Care to establish shared processes for Nursing Homes, building to a new pooled fund and integrated team if appropriate. We have developed an Early Indicators' process to identify homes which are potentially failing with a standard system from May 2014. A system is now developed to standardise process which will be rolled out from May. The Hull University Early Indicators process has been used to develop standardised paperwork for Health and social Care staff.	Amber
<b>Legend:</b>	<b>Green: Complete    Amber: Incomplete with Progress    Red: Incomplete no progress    Blue: Not relevant</b>		

Safe-guarding	work within the Quality Intelligence Group, focused on the development of early warning systems and the use of data to identify trends, issues and underlying concerns; for adult safeguarding ensure the development of clear and simple communication channels to enable GPs to discharge their safeguarding duties and develop systems and soft intelligence to ensure providers are practicing safely to reduce safeguarding incidents	partnership basis through the Safeguarding Improvement Board and the Local Safeguarding Children Board.  The CCG has strengthened the GP leadership of children's and adult safeguarding and has provided clearer systems to GPs.	
Public Health Outcomes	Support the planning and implementation tasks in primary and community care services to assist Cumbria CC in the delivery of the various population based prevention programmes.	Each of the public health outcomes are addressed in the CCG Operational Plan 2014/15 – 15/16, including detailed trajectories, and the draft Strategic Plan.	Amber
Financial Strategy & QIPP	Secure the finalisation of all provider contracts and deliver the undelivered components of the 2012/13 QIPP plan (where still relevant to the CCG's commissioning plan)	All Provider contracts have been agreed for 2014/15, the CCG met its requirements for financial delivery in 2013/14.	Green
Primary Care Services	Work with the GP membership and other contractors to secure reduction in unacceptable variations in performance across practices.	Continued primary care development in each locality, which will be strengthened by the formation of Primary care Communities and through continual learning facilitated by CLIC.	Amber
Long Term Conditions	Develop a plan of action and implement the strategy for long term conditions	This is a core part of both Primary Care Communities and the Integrated model of care as outlined within the draft Strategic Plan.	Amber
Elderly Care	Support the work of the Cumbria Chief Nursing and Midwifery Advisory and Development Group in developing an action plan in response to the recommendations arising from the report commissioned by the Cumbria Health Overview and Scrutiny Committee	A final report was submitted to, and accepted by, the Cumbria Health Scrutiny Committee.	Green
Emergency Care	Assist in securing the implementation of the Integrated Emergency Floors and secure the delivery of the 12 ambulatory care pathways	The whole service model and operational delivery of urgent care is under continual review by the Urgent Care Working Groups, with some roll out of the ambulatory pathways. This is a continued feature of the strategic plan.	Amber



Services	services at NCUHT.		
Emergency Preparedness	Finalise the Memorandum of Understanding; complete all staff training requirements	Memorandum of understanding was completed and all staff trained.	Green
Community Health & Social Care	Strengthen service delivery models at locality level where already identified through locality self-assessment and ensure the appropriate use of community hospital beds	There has been continued strengthening at locality level, which will be further delivered through Primary Care Communities, and the optimal use of current community hospital beds has been reviewed.	Amber
End of Life Care	Ensure the continuing planning and implementation work associated with the delivery of the End of Life strategy, covering those components of the strategy relating to 24 hour support for patients and families, end of life training, advancing disease, increasing decline, first days after death and bereavement	A series of initiatives have been taken forward from the end of life strategy, but implementation is not complete.	Amber
Innovation	Ensure that the CQUIN pre-qualification criteria for Innovation are embedded in provider contracts and delivered	Agreed process for all Providers to meet the CQUIN pre-qualification criteria through the contract process for 2013/14.	Green
Medium Term Commissioning	Determine a medium term commissioning intention describing the vision for the future configuration of health care services	In progress through Better care Together and North Cumbria programme Board, building to the CCG Strategic plan.	Amber
Cumbria Wide Performance	Work with service providers to ensure improved delivery of the service targets that have not been met in 2012/13, including A&E, RTT, HCAI, NWS A19, mixed sex accommodation, IAPT, uptake of health checks, smoking quitters, 62 day cancer, 6 weeks diagnostics, stroke care, delayed transfers of care, reduction in NCUHT HSMR	Continued performance management through the contracting process, with significant escalation supported by the NHS Trust Development Authority, Monitor, the Care Quality Commission and NHS England. Significant improvement in UHMBFT, but entrenched challenges in NCUHT. Hospital mortality has improved at both Trusts.	Amber
Patient Experience	Develop a robust, strategic approach to the collection, analysis, and use of patient experience data.	Taking forward mechanisms for capturing patient experience including I Want Great Care.	Amber
Inform-	Finalise the review of the Informatics service, secure	The review was complete, and there has been significant	Amber

ation Management	deployment of the Children's and Young People's EPR and patient access to electronic records	progress in taking forward electronic patient records, but CPFT have not completed the implemented of their EPR.	
Human Resources	Recommence recruitment to vacant posts following the March 2013 lock down.	Recruitment was recommenced within agreed HR policies.	Green.
Cumbria wide Workforce	Follow through with the work already undertaken by NHS Cumbria PCT regarding the development of a proactive workforce strategy across all providers, ensure an appropriate assessment of the report commissioned from Skills for Health	The document was not provided to the CCG during the transition, and has been super-ceded by the current clinical strategy work which includes workforce planning.	Blue
Equality and Diversity	Review the Service Level Agreements with the three Diversity Networks	The SLAs have been reviewed and continued in a revised format.	Green.