

## Northern CCG Joint Committee

Date of meeting: 10 January 2019

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

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**Title of report: Local non-executive community networks**

**Purpose of report** (brief description):

To inform the Joint Committee that

- (i) CNE has been successful in its application for funding to develop a local ICS network for lay members and non-executive directors.
- (ii) To provide an update on progress in developing a Lay Member Network.

**Recommendations:**

n/a

**Is the paper for** (please tick):

Decision-making	<input type="checkbox"/>
Information Sharing	<input checked="" type="checkbox"/>
Discussion	<input type="checkbox"/>

**Actions required by Northern CCG Joint Committee:**

For information only

**Sponsor:** Feisal Jassat  
**Report Author:** Gillian Stanger  
**Job Title:** Business Support Manager, NECS  
**Date:** 13 December 2018

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## Local non-executive community networks

### 1. Background

- 1.1 In September 2018, NHS Clinical Commissioners, NHS England and NHS Improvement partnered and launched a bid process for funding to support the development of local non-executive community networks (lay members and trust non-executive directors). This was built upon the feedback received from members during two events held in Autumn 2017, that support for local networks of lay members and NEDS would facilitate and enable increased collaboration and integration, whilst also providing the non-executive community with a voice in the evolving commissioning system.
- 1.1 Bids were invited against a small amount of funding (approximately £3,000 per bid) to be used as a catalyst to develop innovative ways for establishing local non-executive community networks across an STP or ICS or ICP.
- 1.2 CCGs and Foundation Trusts were made of aware of the proposed application and in October 2018 we submitted a bid against this funding to hold a facilitated provider/commissioner workshop to gain consensus, agree the function and purpose of and determine the form of a local non-executive community network across CNE (bid attached at Appendix 1). Confirmation was received that the STP communications budget would provide match-funding.
- 1.3 In November 2018, we were notified that we were one of nine sites which had been successful and North Durham agreed to host the resource to support the pilot.

### 2. Progress

- 2.1 A project team was established comprising Feisal Jassat, Ken Readshaw, Michelle Thompson (Darlington CCG), Caroline Gitsham (South Tees CCG), Mary Bewley, Nicola Jones, Dan Jackson, Gillian Stanger and Kerry McQuade, our NHS Confederation lead.
- 2.2 The first meeting of the team was held on 11 December 2018 at which we discussed the attached action plan (Appendix 2) and agreed the following next steps:
  - 2.2.1 To establish a link to ICS structures
  - 2.2.2 To link this work into the event being hosted by John Burn on 14<sup>th</sup> January on the subject of NHS Integration and Governance: Challenges and Opportunities
  - 2.2.3 To establish links with local Authorities re population health, emerging governance framework etc.

- 2.2.4 To adopt a pragmatic, phased building block approach – involving CCGs initially, followed by FTs, followed by other parts of the system.
- 2.2.5 To hold an initial workshop in early March 2019 for CCG lay members and officers within the context of ICS system change and transformation.

The Joint Committee is asked to note this update for information.

## Appendix 1

**Application form – Local non-executive community networks funding**

Completed applications should be sent to [office@nhsc.org](mailto:office@nhsc.org) by 5PM on Sunday 7th October. We will confirm receipt of your application and inform you of an outcome by early November.

**Please provide the details of the key contact for this proposal**

<b>NAME</b>	Feisal Jassat
<b>POSITION</b>	Vice-Chair Northern CCG Joint Committee  Lay member – North Durham CCG and Durham Dales, Easington and Sedgfield CCG
<b>E MAIL ADDRESS</b>	<a href="mailto:Feisal.jassat@nhs.net">Feisal.jassat@nhs.net</a>
<b>TELEPHONE NUMBER</b>	07849152270
<b>STP/ ICS/ ICP Area</b>	North East and North Cumbria
<b>Who will be the partner organisations within your network?</b>	NHS Darlington CCG NHS Durham Dales, Easington & Sedgfield CCG NHS Hambleton, Richmondshire & Whitby CCG NHS Hartlepool & Stockton on Tees CCG NHS Newcastle Gateshead CCG NHS North Cumbria CCG NHS North Durham CCG NHS Northumberland CCG NHS North Tyneside CCG NHS South Tees CCG NHS South Tyneside CCG NHS Sunderland CCG  Gateshead Hospitals NHS FT Newcastle Hospitals NHS FT Northumbria Healthcare NHS FT City Hospitals Sunderland NHS FT South Tyneside NHS FT North Tees and Hartlepool NHS FT South Tees Hospitals NHS FT County Durham and Darlington NHS FT North Cumbria University Hospitals NHS FT Northumbria Partnership Trust Northumberland, Tyne and Wear NHS FT Tees, Esk and Wear Valley NHS FT

**What mechanisms currently exist for involving the Non-Executive community within your STP/ ICS/ ICP?**

The Northern CCG Joint Committee includes lay members. It is chaired by a lay member and the Vice-Chair as well.

Respective CCGs on the Committee, via their appropriate governance arrangements, share information and update accordingly to ensure lay member input and influence as appropriate.

**Please outline your proposal using no more than 800 words. This should include:**

- How you intend to spend the allocated funding
- What challenges you are looking to address
- An overview of how you intend to develop your network and what it will do
- How this will link to and influence the work of your STP/ ICS/ ICP

We would use the funding to organise a facilitated joint provider/commissioner workshop to gain consensus, agree the function and purpose of and determine the form of a local non-executive community network. The objectives of the network would be to:

- Understand and influence system change/transformation and look to ensure we adopt a strategic approach to engagement
- Be change agents for action to reduce inequalities in health across the North East and North Cumbria
- Consider assurance on governance and make recommendations on governance (in the absence of a legal framework to accompany consolidation among commissioners and providers)
- Be a critical friend about the approach to integration and transformation of local health communities
- Offer some co-ordination, with someone as part of the network to disseminate information and hold discussions with members of the group
- Have some level of activation in communities and using, if need be, the support from CCGs in terms of communications and engagement
- To consider links across with Healthwatch
- Consider what, if any, new mechanism is required to link formally into the ICS programme and look at learning from other parts of the country
- Model of working – having a community of interest which is more digitally supported because people can't get together face to face
- Seek opportunities to engage non executive elected members (overview and scrutiny) as appropriate (as and when basis) in order to strengthen closer collaboration and develop collectively our knowledge base for health improvements/health outcomes.
- Explore opportunities for collaborative links with the North East Leadership Academy (NELA) in support of leadership development for change agents

**Please identify at least two outcomes which will be achieved through your proposed approach and how you intend to measure and evidence these.**

1. Regional/ICS wide meetings with opportunities for ICP/cluster meetings if appropriate and necessary to deal with sub regional configuration.
2. A strengthening of the patient voice across commissioner and provider organisations with opportunities to develop change agents on action/influence to

refocus upstream thereby taking action on health inequalities; a network that improves a better understanding and develops a critical friend role to support system change/transformation that will be measured and evidenced by better health outcomes and vfm interventions.

**Is this proposal supported by the leadership of your local STP/ ICS/ ICP?**

- Yes
- No

**If Yes who is the key contact in your local STP/ ICS/ ICP?**

Dan Jackson  
[danjackson@nhs.net](mailto:danjackson@nhs.net)

Gillian Stanger  
[Gillisl.stanger@nhs.net](mailto:Gillisl.stanger@nhs.net)

**Has your local STP/ ICS/ ICP confirmed that if this proposal is successful that it will provide match funding (which could include in kind resources)?**

- Yes

Resources in terms of officer time to organise and contribute to the shape of the facilitated discussion and on going support from an administrative perspective.

Match funding from the ICS communications budget has been confirmed.

- No



	<p>As change agents for action to reduce inequalities in health across the North East and North Cumbria, demonstrate active role in:</p> <ul style="list-style-type: none"> <li>• Moving away from traditional engagement and consultation methods</li> <li>• Moving towards positive win/win engagement with local people and communities around integration and transformation of local health communities</li> <li>• Working with NHS, local authorities, third/voluntary sector and local communities to plan and design services together in ways we have not done before</li> <li>• Encouraging and developing local communities to take action, mobilise and focus on health and care – with support from CCGs in terms of communications and engagement</li> </ul>	engagement lead and project lead)	
Deliver an introductory scoping workshop*	<p>*See workshop development plan below. Reflect on engagement in the current landscape from a non executive and lay member perspective to determine:</p> <ul style="list-style-type: none"> <li>• What are the priorities?</li> <li>• What are common themes?</li> <li>• What are the common challenges?</li> <li>• Where are the gaps?</li> <li>• What can we work together on?</li> <li>• What support do we need</li> <li>• What as a network can we prioritise?</li> <li>• Have we got the right people here?</li> <li>• Is there anything we have missed?</li> <li>• What do we need to do to ensure work progresses?</li> </ul>	Feisal Jassat / Nicola Black (NECS engagement lead and project lead)	February 2019
Establish networking and bringing the system together in relation to the ICS	<p>Create a framework to co-ordinate a regular two-way flow of information and input between all member representatives and with partners involved in the Integrated Care System governance and work programmes in order to strengthen closer collaboration and develop collectively our knowledge base for health improvements/health outcomes. Build formal collaborative links with:</p>	Feisal Jassat / Mary Bewley / Nicola Black	March 2019



	<ul style="list-style-type: none"> <li>• ICS Communications and Engagement Delivery Group – overarching lead which ensures linkage with strategic approach and engagement delivery at ICP and place based</li> <li>• PPI/PPV network - Patient experience for both Trusts and Commissioners and Commissioner’s Improvement and assessment framework (in relation to PPI/PPV)</li> <li>• Non executive elected Health overview and scrutiny members at local, joint and regional level as appropriate</li> <li>• North East Leadership Academy (NELA) in support of leadership development for change agents</li> <li>• Healthwatch</li> <li>• NESCHA</li> <li>• VONNE, including Building Health Partnerships and the Social Prescribing Network</li> <li>• VCSE at all levels to support place based infrastructure arrangements which can help build understanding of their role</li> </ul>		
<p>Design and deliver a member development plan to share best practice/guidance, provide peer support and drive improvement across the region</p>	<p>Plan a schedule of thematic meetings and web sessions - linked to ICS and ICP work programme areas and any identified areas where development is required.                  Deliver at least three themed workshops to address suggested key themes:</p> <ul style="list-style-type: none"> <li>• Empowering communities to take action regarding their own health and look in to self-care options</li> <li>• Enabling communities to support each other by identifying their existing strengths, and to build on these</li> <li>• Developing strong partnerships with local communities to allow true co-production of services now and into the future</li> </ul>	<p>Feisal Jassat /                  Mary Bewley /                  Nicola Black</p>	<p>Ongoing during programme</p>
<p>Explore and disseminate best practice as a community of interest</p>	<p>Set up a system to co-ordinate individual members’ learning from other parts of the country as a regular set of recommendations to the wider ICS system – via C&amp;E Delivery Group.                  Explore mechanisms to support a virtual network e.g. Yammer platform                  Explore other COI models to refine structure</p>	<p>Feisal Jassat /                  Nicola Black</p>	<p>March 2019</p>

**Workshop planning**

<b>Activity</b>	<b>Detail</b>	<b>Lead</b>	<b>When</b>
Workshop development	Develop agenda Identify MC and key speakers Identify workshop facilitator to guide discussions Identify facilitator and scribes	Feisal Jassat Feisal Jassat and Mary Bewley Mary Bewley and NECS Comms and Eng team	December 2018 - January 2019
Supporting materials for workshop	Presentations Table work material Facilitator guides Evaluation sheets Attendee badges/Signing in sheets	NECS Comms and Eng team	January 2019
Reporting	Event write up	NECS Comms and Eng team	Within two weeks of event
Date for workshop	Select suitable date in February/March 2019 Identify whether ½ day or full day workshop	Feisal Jassat	11 December 2018
Venue for workshop	Identify central venue within Durham Book refreshments/lunch Equipment	NECS Comms and Eng	December 2018