

Chairs Report

Purpose

1. This report sets out public activities carried out by the Chair since the last Board meeting and the main issues noted.

Key issues

2. Section 7-14 updates on the patient and public involvement in the Sustainability and Transformation Programme (STP).
3. Section 15 summarises important matters about the local health and social care system.
4. Section 16 notes potential joint working opportunities raised in meetings held during this period.
5. The appendix lists the Chair's external meetings from 1 September to 31st October 2016.

Action required by the Board

6. The Board is asked to:
 - Note the report.

Author

Val Moore, Chair

1st Nov 2016

Sustainability and Transformation Programme

7. Health commissioners and providers are required by NHS England to work together to develop STP plans which will integrate, update and streamline health and care provision. England is divided into 44 local STP ‘footprints’.
8. The footprint for Cambridgeshire and Peterborough matches our Clinical Commissioning Group (CCG) area. Cambridgeshire and Peterborough Clinical Commissioning Group has worked with other organisations to establish a leadership model and a number of planning work streams. The Cambridgeshire and Peterborough STP was submitted to NHS England in June. See <http://www.cambridgeshireandpeterboroughccg.nhs.uk/news-and-events/Fit-for-the-Future---Changes-to-Health-and-Care-Services-in-Cambridgeshire-and-Peterborough.htm> . My July 2016 Chairs report identified reasons and opportunities for public and patient engagement in the STP and some early positive signs.
9. The final plan has since been submitted in mid-October and the CCG is planning a period of consultation, timing uncertain. NHS England is restricting the information about STP Plans that can be made public. Hence, there is little public knowledge of local detail.
10. Healthwatch Cambridgeshire, liaising with Healthwatch Peterborough, have worked with CCG colleagues to review patient and public involvement in drafting the STP plans and how we can learn from this to ensure effective involvement in the consultation and delivery phase.
11. One joint exercise has been to survey patient/ carer and lay representatives appointed to the planning groups. Healthwatch designed and analysed the survey. It proved limited in its reach due to a mismatch of intent and reality in terms of the deployment of patients and the public in the groups and the variable way they feel supported, but reveals some valuable learning which we will publish once the report is complete.
12. As an STP Care Advisory Group member and in my role on the Health and Wellbeing Board, I have voiced concerns that a more systematic approach to supporting public and patient participation in the STP is required. National guidance from NHS England belatedly now exists to support this. My concerns are as follows:
 - The opportunity to effectively involve people in the groups at the planning stage has in my view been patchy and not optimised.
 - The window to explore public values and dilemmas in prioritisation before the Executive decisions has not been used.

- The offer of a face to face development session to find and support the necessary leadership within the programme was not built into the autumn STP development programme.
 - New delivery groups are being developed without a strong message or example from the STP support team as to expectations, best practice and on-going support for patient and public involvement.
13. Jane Mordue, Chair of Healthwatch England has talked about a sense of fear from policy makers that proposed service changes will face an army of activists (Health Service Journal 26 October). It is acknowledged that good public engagement takes time, but that there is the golden opportunity to use feedback to make the right decisions the first time around.
14. New STP Chair David Astley has recently started in his role and will be contacted regarding these messages. Healthwatch Cambridgeshire, in conjunction with Healthwatch Peterborough, will keep the public updated and seek to maximise the use of patient insights and preferences to influence the changes ahead.

Information about the local health and social care system

15. Matters noted during the period are as follows:
- **The Sustainability and Transformation Plan was submitted to regulators on 21st October** (See above for discussion).
 - ***Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) is developing its staff and organisational capabilities to meet its transformation plans and developing its vision for primary care development and community services.*** This investment is crucial to the recovery of the health system.
 - ***The new 111 and urgent care service begun on 19th October.*** The new integrated service is provided by HUC (Hertfordshire Urgent Care). Healthwatch Cambridgeshire expressed Concerns about readiness to go live, and we were subsequently assured about plans for patient safety on the day, and immediately following.
 - ***Addenbrookes Hospital has been on 'black alert' for most of October*** due to pressures of admissions and problems identifying appropriate care on discharge for patients.
 - ***Local Executive Partnership Boards are being established*** to include local authority and other stakeholders to help develop partnership working.
 - ***Hinchingsbrooke Healthcare NHS Trust and the Peterborough & Stamford Hospitals NHS Foundation Trust*** approved a full business case for merger pending further detail. Each Trust will consider this,

along with the outcomes of extensive consultation and engagement with staff, patients and the public on 25th November.

- **Cambridgeshire Health and Wellbeing Board** considered the various transformation programmes underway and the need for coordination, integration and local place based partnership working.

Emerging joint working for Healthwatch Cambridgeshire

16. Interests raised during meetings (see appendix) are as follows:

- Work continues with the CCG to assess and develop the public and patient involvement within the Sustainability and Transformation Plan.
- Support by the Chair for Cambridge University Health Partners bid for research on patient safety for vulnerable groups, and offer to sit on overarching public and patient participation group.
- A consultant to Healthwatch Peterborough and Healthwatch Cambridgeshire is appointed to support the generation of future planning options for closer joint working.

Appendix - Meetings attended by the Chair 1st Sept to 31st October 2016

Meeting	Purpose	Date
CCG* Board meeting	Observer and networking	13 Sept
Cambridgeshire Community Services Board meeting	Observer and networking	14 Sept
CCC* Health and Wellbeing Board meeting	Member	15 Sept
Clinical Advisory Group meeting, STP*	Member	19 Sept
Hinchingbrooke Healthcare NHS Trust Board meeting	Merger with Peterborough and Stamford Hospitals Foundation Trust	29 Sept
Jess Bawden, Director of Corporate Affairs and Dr Richard Spiers Clinical Lead for Prescribing and Clinical Policies, CCG*	IVF policy	4 Oct
Sue Grace, Corporate Director, CCC*	Healthwatch Cambridgeshire Community Interest Company contract monitoring	5 Oct
Cambridge Health Sciences Centre event	Participant	6 Oct
CCG* Development Day	Observer and networking	13 Oct
Addenbrookes Founders Day celebration	Networking	13 Oct
Joint CCC/PCC committee meeting	Merger with Peterborough and Stamford Hospitals Foundation Trust	17 Oct
Clinical Advisory Group meeting, STP*	Member	17 Oct
Sustainable Primary Care Clinical Working Group, STP*	Member	20 Oct

*Abbreviations:

CCC - Cambridgeshire County Council

CCG - Cambridgeshire and Peterborough Clinical Commissioning Group

STP - Sustainability and Transformation Programme