

Report of the North West London CCGs' collaboration board

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This bi-monthly report provides a synopsis of the key issues recently discussed by the collaboration board (a joint committee) to support transparency as we collaborate across our individually sovereign CCGs in NW London. It summarises the main work undertaken since the previous report to the governing body meetings held in November 2016 (dated 18 October 2016).

Collaboration board meetings held between 18 October and 16 December 2016:

1. Business intelligence and informatics strategy session – Thursday 17 November
2. Strategy and transformation session – Thursday 1 December

Business intelligence and informatics strategy

Our Local Digital Roadmap (LDR) and the NW London Sustainability and Transformation Plan (STP)
– Bill Sturman, NW London CCGs' director of informatics, led discussion

The LDR was submitted on 4 November 2016, following the final submission of the STP on 21 October 2016. The board discussed the underpinning LDR work-streams and it was explained how these were designed to enable the delivery of the STP.

The first meeting of the new NW London LDR programme board (the 'digital programme board') had been held in October. This brought together acute and mental health providers, with lay member and local authority representation. These monthly meetings are chaired jointly by Imperial College Health Partners (ICHP), and by Dr Ian Goodman on behalf of the NW London collaboration of CCGs. It reported along with other STP delivery areas and enabler areas to the new joint health and care transformation group, bringing together system leadership representation across NW London as a whole (CCGs, local authorities and providers). The meeting minutes were included as an item for information for the board.

It was important for the LDR to be high on the agenda to enable STP delivery, and this would require innovation and pace. The board agreed that driving digital change forward through each part of the STP was vital to wider transformation. It was reported that a patient-led view would be taken on LDR digital workstream prioritisation criteria for available funding; input for individual CCGs would take place via the GP IT leads.

An action arising from discussion was that members would support co-production of an engagement plan mapping to the STP delivery areas, to be described in more detail in the LDR implementation plan.

Business intelligence (BI) tool re-procurement

– Ian Riley, NW London CCGs' director of business intelligence, led discussion

The outline business case (OBC) for BI re-procurement was being presented to the eight NW London CCG governing bodies during November, where the support of the NWL CCGs to move to market testing was being sought. It was confirmed that re-procurement would be a discussion item at the NW London CCG

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governing body meetings in January 2017. This would include a proposal to governing bodies for the governance arrangements for how the CCGs will jointly launch the Invitation to Tender later in January.

Given that the current contract with South East CSU for WHYSE (the current BI tool) was due to end on 31 March 2017, options for 1 April onwards were considered. One of these was to continue the current system under the new contract holder, as South East CSU was due to merge with NE London CSU by 1 April 2017. It was noted that some of the related assets relating to WHYSE were owned by NHSE (and were at end of life) and that work was underway to identify and confirm any assets that would be retained by the CCGs. The context of the delays to the re-procurement process during 2016 were collectively recognised as stemming from the need for in depth engagement and clarity from across the eight CCGs as to what the scope of the detailed specification needed to be, which was now complete. Following discussion, it was confirmed that the preferred option was to continue current arrangements (as an interim option within the existing funding envelope) allowing time for the formal tender process to run and for a new contract to be awarded.

[Estates and Technology Transformation Funds \(ETTF\) bids – Sonia Patel reported](#)

It was reported that three of the eight digital bids from the NW London CCGs had progressed to the final stage of review by NHS England, and noted that the “digital workforce and innovation” bid had been ranked in third place across the London bids. It was explained that the funds allocated to one of the bids would need to be spent by 31 March 2017, which would require an agile and equitable governance model to be established, with funds being hosted by Brent CCG on behalf of all NW London CCGs. A new ETTF strategic delivery group was proposed for this purpose. The importance of transparency in reporting was recognised and it was confirmed that this would be exercised in line with standing financial instructions. It was recommended that the CCGs’ investment committee would review any bids in relation to potential issues around conflicts of interest. Governance arrangements would be confirmed at the BI meeting in January, following discussions. A benefits summary would be produced to describe to practices how the available funding of £7m would be used.

[Whole systems integrated care \(WSIC\) dashboard delivery – Amanda Lucas, WSIC project lead, reported](#)

The board was advised that dashboards had been deployed and access was being extended to non-GP providers. Web analytics showed that the dashboard was now in use across 114 practices. Other CCGs from outside of NW London had also expressed an interest in acquiring the tool.

The benefits in terms of long-term condition management were recognised, and information governance approval had been granted to enable analytics of non-patient identifiable data. Potential application to population health and Accountable Care Partnership development was being explored. One area where the WSIC dashboard could offer value, for instance, was in relation to the vaccination status of children.

[Governance arrangements for joint working – Rob Larkman, BHH chief officer, led discussion](#)

The board was supportive of a workshop proposed for January 2017 to explore how the NW London CCGs could work together to most effectively deliver the Sustainability and Transformation Plans, through structures that support responsive and transparent strategic commissioning decisions.

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The item was postponed until the next meeting in February 2017, pending a more detailed evaluation of the service in collaboration with the service provider.

Out of hospital evaluation criteria

– presented by Simon Cook, Programme Director for Hospital Transformation and Tessa Sandall, Managing Director, Ealing CCG

The purpose of the paper was to confirm a consistent scoring methodology for the evaluation of out of hospital hub business cases for use in the next phase of business cases. This methodology would apply:

- 1) minimum threshold criteria (pass/fail) to be applied while developing a shortlist of possible hub sites at the strategic service delivery plan (SSDP) stage;
- 2) prioritisation criteria to be applied whilst developing qualitative option appraisal as part of value for money assessment and outline business case stages (which includes risk assessment), and;
- 3) expectations of service providers to be applied while developing the OBC and to be delivered through implementation (and applied as a formal commitment for tenants at Full Business Case).

The board endorsed the approach and it was confirmed that the totality of any void premises costs would be included as part of the core financial appraisal of business cases.

STP delivery area 2 and 3: local services strategy

– Rob Larkman, BHH CCGs chief officer and Senior Responsible Officer (SRO) for local services delivery area in NW London, led discussion

A detailed strategy proposal was presented outlining the ambitions for local services, which addressed:

- key challenges facing local services;
- the vision for local services in NW London and the approach to deliver the vision;
- a detailed breakdown of the Strategic Commissioning Framework (SCF) Delivery, including the Self-Care Framework and GP Access Fund extended access modelling and approach;
- a joint approach for improving care for older people;
- elements of social care contributing to the local services model;
- indicative high-level finance and activity measures, including primary medical care allocations 2016/17 to 2020/21;
- commissioning intentions and infrastructure;
- implementation plans per initiative detailing the key milestones required for successful delivery.

It was noted that the primary care strategy described had been expanded to include local services plans, and that it also incorporated social care elements. The plan further included a visual model for local services and presented how the patient journey would vary according to patients' health and care needs, and how this aligned with the STP. Additional feedback was given by lay and patient representation that the paper, which was quite technical, needed to be adapted for different audiences. Finally, it was recommended that the role of carers be given greater attention.

The board supported the plans to discuss local services strategy at CCGs' governing bodies.

Other items noted for information:

- [NW London maternity network update](#) – an item for the November governing bodies
- [STP delivery area 5: \(D\) productivity programme – Procurement Alliance update](#) – an update on work underway in NW London
- [NW London STP delivery area and enabler minutes](#) – minutes of the meeting for Like Minded (delivery area 4) and workforce (an STP enabler) were included for information.

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[Any Other Business](#)

Louise Proctor, MD, West London CCG, updated the board that a joint meeting had been held with local authority colleagues to discuss the funding allocations for the STP and that this was under review.

Angeleca Silversides, representing Healthwatch for NW London, recommended that a central repository be broadened out for all projects and programmes across the different boroughs in order to make it easier to share information and avoid the risk of duplicated efforts. The board was supportive of this.

[Implementation Business Case \(ImBC\) update](#)

A closed strategy session of the collaboration board was held on 1 December to discuss the Implementation Business Plan, which was later taken as a single discussion item at all eight NW London CCG extraordinary governing bodies on Tuesday 13 December and on Wednesday 14 December, at which investment into Strategic Outline Case Part 1 was debated and formally agreed.

The 'ImBC' is a bid for over £500m of investment to improve our NHS buildings and facilities over the next ten years. It will now be subject to approval by NHS England and central government. The investment would see around £69m for improving GP practices, £140m for modernising and building new out of hospital community hubs and just over £300m for local hospital buildings and facilities across NW London, including changes at Ealing Hospital.

A second business case will be developed in 2017 to cover improvements to hospitals within the inner NW London boroughs, including Charing Cross Hospital. This decision is major step forward in our plans to provide the best possible care, outcomes and experience for our patients. More information on the capital case, including the executive summary, can be found [here](#).

[About the NWL CCGs' collaboration board](#)

The collaboration board meets fortnightly on a Thursday to discuss strategy and transformation proposals across North West London. It brings together eight CCG chairs, two chief officers and shared directors to discuss joint strategic objectives and proposals in order to form a consensus view taking into account the needs of local health populations. It has delegated authority from the CCGs in which it can take joint decisions in response to the recommendations of NWL CCGs' Policy Development Group on Planned Procedures with a Threshold (PPwTs).

The board additionally serves to guide the CCGs' overall approach to the annual contracts rounds and to developing business intelligence and informatics strategy, as well as to develop for approval and then review progress against the NWL CCGs' joint finance strategy.