

Report from the Accountable Officer

December 2018

This meeting of the Joint Committee is intended to be our first formal meeting with delegated powers. As I reported in October, the eight CCGs voted overwhelmingly in favour of the new collaborative arrangements across North West London, so subject to final authorisation from NHS England our meetings will no longer be in 'shadow' form.

Future meetings will continue to be held in public and to include a half hour question and answer session for the public at the end. I am delighted to welcome our Independent Chair, Alan Wells, to his first meeting. We also welcome our new Chief Finance Officer, Paul Brown, to his first meeting. I am also delighted to confirm that Jo Ohlson has been appointed as Interim Director of Commissioning for North West London. Many colleagues will know Jo from her current role at NHS England and her former position in Brent CCG. She will cover the role for six months, starting part time in December and full time from January.

We will also have had our second meeting of the NW London Shadow Quality and Performance Committee on the 6 December, from which we will be receiving an update at the Joint Committee in relation to Winter Preparedness.

Planning for winter

A big focus of our work in recent weeks has been putting plans in place across North West London to cope with the usual winter pressures faced by the NHS. We are taking a coordinated approach across the whole system. Our four A&E Delivery Boards (Chelsea and Westminster, Hillingdon, Imperial and London North West) have developed their local plans and we are working closely with each of them to ensure that pressures are minimised and that local people get the care they need at the right time in the right place.

Financial recovery plan

Since the last meeting, I have met with every CCG and directorate to discuss their financial recovery plan. These discussions have been consolidated into a single plan with twenty overarching actions which have been agreed by the NW London Finance Committee for submission to NHS England. The plan by itself does not solve our financial problems but it has achieved:

- A much clearer identification of where financial risks and opportunities lie
- The identification of the best, worst and most likely position for each organisation
- Alignment and consistency in the judgement of risks
- Alignment on the understanding of our position with acute contracts.

I should emphasise that the plan is not introducing lots of new measures and savings proposals: it essentially looks at the initiatives identified by CCGs and directorates,

measuring progress against them and ensuring that the targets are met as far as possible.

Meetings with providers

I went to the London North West Healthcare NHS Trust CQC quality summit to discuss their plans for addressing the shortcomings that were found in their recent inspections. I participated in discussions about the need to develop a plan for Ealing Hospital which both gave it an agreed future role and kept it going safely until it arrives at its eventual destination.

With the CCG chairs I also had meetings with West London NHS Trust, Central London Community Healthcare NHS Trust and CNWL – three very strong local trusts.

I also went to Ealing for a presentation from West London NHS Trust on behalf of the consortium of local organisations that will deliver the Ealing's single contract community services from next year. The presentation was very impressive and the consortium has clearly thought very carefully about how to integrate and improve local services. A consortium of providers in Hammersmith and Fulham (the Alliance) held a workshop with the CCG on their next steps to develop integrated care, and I was struck by the seniority of the leadership in the room and the desire to make things better for patients by working together.

Health and care partnership/NHS ten year plan

The governance for the North West London Health and Care Partnership continues to develop. The North West London clinical board held a workshop in November to review and refresh our clinical strategy. It was a good event to get everyone around the table and engaged, and the next meeting will focus on the specific work we want to take forward.

The Joint Health and Care Partnership Board when it met agreed three short term priorities for the partnership to demonstrate we can work together and make a difference to patients. They are:

- Ensuring patients have access to IV antibiotics either in the community or in an ambulatory care setting;
- Catheter care in nursing homes;
- Addressing inconsistencies in eligibility for community services across different NWL boroughs at the point of discharge.

We are expecting a new NHS 10-year plan to be launched in early December. At the time of writing the national plan is still being finalised, so I can only give a flavour of its likely themes, and of course things can change between now and publication, but I would highlight two things which are likely to emerge. One is even greater

emphasis on integration, with the expectation that integration is advanced at both the level where the NHS and local government are co-terminus (in London's case at borough level), and at STP level with the creation of more integrated care systems (ICS) to give a strategic overview. The second theme that is likely to emerge, is greater emphasis on NHS commissioners and providers working together to drive improvement for local people. What the mechanisms are for driving improvements in quality and efficiency are in the context of the £20bn additional investment, we shall have to wait to and see.

NHS England have indicated that local areas will be expected to engage with the public and stakeholders from January to April as we look to develop our local versions of the 10 year plan by next summer. We will be taking a best practice approach to engagement and we will work with Healthwatch, the voluntary sector and our partners in the NHS and local government to involve as many people as possible.

Campaigns and public health

We have continued to support a number of national public health campaigns through our social media and internal communications. Our campaign on cervical cancer was picked up by the London Mayor earlier in the year and we have continued to draw attention to national initiatives, including Self Care Week, Atrial Fibrillation Awareness Week, World Antibiotics Week and World Diabetes Day.

I am pleased to report that during a Westminster Hall debate on avoiding preventable deaths for people with autism and/or learning disabilities, Tulip Siddiq MP (Hampstead and Kilburn) praised the NHS in North West London for our training programme 'Treat Me Right' and encouraged other areas of the country to learn from our work. 'Treat Me Right' is a training programme, designed and delivered in partnership with people who have autism or a learning disability themselves, and rolled out across frontline NHS services in North West London.

Mark Easton

Chief Officer

November 2019