

**Operational Resilience and Referral to Treatment 2014/15
 Guidance – Gateway Reference 01632**

Item 11i

Governing Body meeting

3 July 2014

Author(s)	Anne Dray, Urgent Care Lead
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Is your report for Approval / Consideration / Noting	
Noting	
Are there any Resource Implications (including Financial, Staffing etc)?	
<p>This guidance, (Gateway Reference 01632) necessitates a review of the Urgent Care Working Group, which now becomes the System Resilience Group. This group has expanded responsibilities and membership to cover both urgent and elective care.</p> <p>There is a significant amount of preparatory work required across the health and social care system to enable the completion of planning summaries and costings/workforce templates for non-elective and elective care by the end of July. Plans need to be signed off by all System Resilience Group partners.</p>	
Audit Requirement	
<p><u>CCG Objectives</u></p> <p><i>Which of the CCG's objectives does this paper support?</i></p> <p>1. To improve patient experience and access to care</p> <p>4. To ensure there is a sustainable, affordable healthcare system in Sheffield.</p>	
<u>Equality impact assessment</u>	
<p><i>Have you carried out an Equality Impact Assessment and is it attached?</i> No</p> <p><i>If not, why not?</i> This report to the Governing Body identifies actions required of the organisation by NHS England. No equality impact assessment is required at this stage.</p>	
<u>PPE Activity</u>	
<p>PPE activity will relate to the potential actions that are identified in proposals. For this reason, the Terms of Reference of the System Resilience Group refer to the inclusion of voluntary sector and Healthwatch representation. Further PPE will be carried out as appropriate to the nature of the schemes.</p>	

Recommendations

The Governing Body is asked to:

1. Note the publication of the operational resilience and capacity planning guidance for 2014/15.
2. Noted the responsibilities and membership of the System Resilience Group (previously the Urgent Care Working Group).
3. Note the requirement for a System Resilience Plan to be submitted by 30 July 2014.

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1. Introduction / Background

- 1.1. On 13 June NHS England, Monitor, the NHS Trust Development Agency and the Association of Directors of Adult Social Services published a joint guidance document to support planning for operational resilience during 2014/15. This guidance covers both urgent and planned care and measures to support the changes which will arise through the Better Care Fund.
- 1.2. The guidance sets out best practice requirements across planned and urgent and emergency care that each system should reflect in their local plan and the evolution of Urgent Care Working Groups (UCWGs) into System Resilience Groups.
- 1.3. System Resilience Groups are to become the forum where capacity planning and operational delivery across the health and social care system is co-ordinated
- 1.4. This guidance also requires the Sheffield health and social care system to publish a System Resilience Plan, signed by all members¹ of the System Resilience Group. The plan needs to be submitted by 30 July.
- 1.5. The guidance makes clear that resilience needs to be delivered while maintaining financial balance and that there can be no trade-off between finance and performance.
- 1.6. The paper also refers to the work being undertaken by local systems this year setting the ground work for the longer term changes to strategic and operational delivery that will be brought about by outputs from the Urgent and Emergency Care Review. It states 'the review and its proposals will have a clear impact on the operations of UCWGs within local systems'. Phase 2 of this review is expected to report in the Autumn of 2014.

2. System Resilience Group

- 2.1. The Sheffield System Resilience Group (SSRG) is a whole system network designed to bring together multiple stakeholders from across the city. It enables all parts of the local health and social care system to co-develop strategies and collaboratively plan safe, efficient services for patients. On an annual basis the SSRG is responsible for recommending the approval of, updating and monitoring the Sheffield System Resilience Plan and ensuring the actions it contains deliver the required level of performance improvement.

¹ It is currently assumed that NHS Trusts and Foundation Trusts and NHS and Social Care Commissioners are the required signatories

- 2.2. The SSRG links closely with the work of the Better Care Fund and the Right First Time partnership which are responsible for developing the principles and direction of travel in their respective areas of responsibility. It does not take on any responsibilities currently delegated to those groups.
- 2.3. The proposed Terms of Reference of the Group have been drafted and build on those of the predecessor Urgent Care Working Group and take into account guidance to expand the group's remit to cover elective care and to extend the membership of the group to include public health and the independent and voluntary sectors.

The draft Terms of Reference include the following proposed membership:

Commissioners

- a) Chairman of the SSRG will be the Medical Director for the Sheffield CCG
- b) Sheffield CCG Chief Operating Officer
- c) Sheffield CCG senior commissioning leads responsible for urgent and elective care, adults and children
- d) Sheffield CCG acute and children's portfolio clinical leads
- e) Sheffield City Council (SCC) Adult and Community Services
- f) Sheffield City Council Public Health
- g) NHS England (Specialised Commissioning)
- h) NHS England (SYB Local Area Team)

Providers

Representatives (clinical and or managerial) from:

- a) Yorkshire Ambulance Service (999 and 111)
- b) Mental Health Trust (SHSCFT)
- c) Acute and Community Trusts (STHFT and SCHFT)
- d) GP Out of Hours (Sheffield GP Collaborative and Care UK)
- e) Broad Lane Walk In Centre
- f) Urgent dental service providers
- g) Local Pharmaceutical Committee representative
- h) Independent sector
- i) Voluntary sector
- j) Healthwatch

3. Next Steps

- 3.1 Organisational leads in NHS providers and the Local Authority have met to discuss the requirements for the development of a System Resilience Plan by 30 July. A timetable has been set and actions identified to enable a coherent and comprehensive plan to be compiled and reviewed and signed off by system leaders and the System Resilience Group in advance of the deadline for submission of 30 July 2014.
- 3.2 Within the submission will be a schedule of proposals for the use of winter resilience monies and sums allocated to meet elective performance challenges

(nationally these are around meeting the 18 week referral to treatment target, diagnostics and cancer treatment targets).

4. Recommendations

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2. Noted the responsibilities and membership of the System Resilience Group (previously the Urgent Care Working Group).
3. Note the requirement for a System Resilience Plan to be submitted by 30 July 2014.

Paper prepared by Anne Dray, Urgent Care Lead

On behalf of Idris Griffiths, Chief Operating Officer

25 June 2014