

## Accountable Officer's Report

Item 19e

Governing Body meeting

7 March 2019

<b>Author(s)</b>	Maddy Ruff Accountable Officer
<b>Purpose of Paper</b>	
Noting	
<b>Key Issues</b>	
<ul style="list-style-type: none"> <li>• Independent Assessment of NHS Sheffield CCG</li> <li>• Sheffield General Practice Nurse and Healthcare Awards</li> <li>• Medicines Management PLI</li> <li>• Members Council Meeting 14 March 2019</li> <li>• End of Life Care Survey</li> <li>• Care Home Apprenticeships</li> <li>• South Yorkshire and Bassetlaw Integrated Care System – Urgent and Emergency Care</li> </ul>	
<b>Is your report for Approval / Consideration / Noting</b>	
Noting	
<b>Recommendations / Action Required by Governing Body</b>	
The Governing Body is asked to note the report.	
<b>Governing Body Assurance Framework</b>	
<p><b><i>Which of the CCG's objectives does this paper support?</i></b>                  This paper provides assurance that risks will be identified and managed to help ensure the achievement of the CCG's objectives.</p>	
<b>Are there any Resource Implications (including Financial, Staffing etc.)?</b>	
No	
<b>Have you carried out an Equality Impact Assessment and is it attached?</b>	
<p><b><i>Please attach if completed. Please explain if not, why not</i></b>                  There are no specific issues associated with this report</p>	

***Have you involved patients, carers and the public in the preparation of the report?***

Not applicable

## **Accountable Officer's Report**

### **Governing Body meeting**

**7 March 2019**

This report summaries the business that has been concluded on behalf of the CCG during January and February 2019.

### **Independent Assessment of NHS Sheffield CCG**

In November NHS England commissioned an independent assessment of the CCG's leadership and culture as part their role as our regulator.

Our governing body received the assessor's report in February and the Executive team are currently reflecting on the findings and recommendations in the report.

The report from the assessor recognised NHS Sheffield CCG has a number of strengths which included being rated as "good" in 2018 by NHS England for the second year running and having a good range of initiatives to improve staff health and wellbeing. However, there were areas which need to be improved.

Some of the recommendations include having a more proactive strategy on the role of the CCG in Sheffield and the wider region. They found issues with continuing healthcare (CHC) processes and recommended the CCG more actively engage families in receipt of CHC funding.

Although we're disappointed with some of the findings of the report, we recognise we could do better. We are taking the recommendations in the report seriously.

To help become an "outstanding" CCG, an improvement plan will be presented in public to our governing body in May.

### **Sheffield General Practice Nurse and Healthcare Awards**

On 6 February I was invited to be involved in the Sheffield General Practice Nurse and Healthcare Awards. Nominations for all the categories had been received from Practice and CCG staff and patients. I was delighted to be able to present the award for Healthcare Assistant of the Year; an overwhelming amount of nominations had been received for this award, very much identifying our unsung heroes in practices who go above and beyond their role for patients and their practice. It was a fabulous afternoon and a tremendous achievement for all of the winners.

## **Members' Council Meeting – 14 March 2019**

Arrangements are currently underway for the CCGs bi-annual Members Council meeting that will be taking place on 14 March 2019 from 1pm to 5pm at the Double Tree by Hilton, Sheffield Park. The focus for the meeting will be to '*Plan a Positive Future for Primary Care*'; colleagues from across the city's health, public service and voluntary sector organisations will also be in attendance and will support a series of workshops and stalls. The session will give us all an opportunity to build and share thoughts and ideas for what the NHS 10 year plan will mean for our practices in the future; and how the additional resources will help the development of our neighbourhoods.

## **Medicines Management PLI**

I am delighted to feedback to you that we received an excellent response to the Medicines Management PLI that was held last month. Over 262 people attended, the audience was made up predominantly of GPs, Pharmacists, and Nurse Prescribers. The aim of the PLI was to further improve quality and safety of prescribing. Some of the key take home messages were around: increased confidence in de-prescribing, particularly in older people; knowledge of where to signpost transgender patients for support; how to use the Eclipse tool to monitor safety and outcomes; and thinking about the potential pitfalls of commonly prescribed drugs such as Proton Pump Inhibitors and Oral Anti-coagulants. Those attending were very keen to see more PLI events in the future, which we are happy to support.

## **End of Life Care Survey**

We are currently running a survey to gather information from people who have experience of end of life care – I would appreciate your help with sharing this survey, as all the responses we receive will help shape better services for the future. I have attached the details of the survey under Appendix 1.

## **Care Home Apprenticeships**

We have come together with Sheffield City Collage and Broomgrove Trust Nursing Home to put in place a pilot apprenticeship scheme for care home staff. The aim of the initiative is to bring about a culture of development for care home staff across the sector, to give Care Assistants the opportunity to progress into other nursing roles and drive up the quality of care for patients.

We are very happy to be involved in this ground-breaking piece of work, it's great to see organisations working in this way and pooling our resources and expertise to develop staff and improved care for patients.

## **Sheffield Accountable Care Partnership**

ACP activities have been provided in the ACP Programme Director's report (included in the supporting information pack at item 19cv)

## **South Yorkshire and Bassetlaw Integrated Care System – Urgent and Emergency Care**

CCGs across SYB are working together with YAS to mobilise the newly commissioned Integrated Urgent Care service (IUC - NHS 111 and Clinical Advice service). The new service starting on 1 April 2019 will build on the current service and patients will see an improved experience with service developments taking place over the coming months and years. Some of the key service changes that will be in place include, providing clinical validation to patients who receive a disposition to attend A&E – this has shown to change the output with patients being advised to access lower acuity services, electronic prescribing and improved patient pathways into locally commissioned services.

A diversionary pathways group continue to review pathways to increase the volume of hear and treat and hear, see and treat (or refer into community based services). The first priority to be considered will be respiratory pathways, with consideration being given to improving support to Care Homes and mental health pathways.

The Escalation Management System (EMS) has been adopted and rolled out across SYB with each locality now having a range of business critical services reporting their daily pressures providing CCGs and partners with greater transparency and consistency of local system pressures and an understanding of pressures elsewhere across SYB.

Hospital Ambulance Liaison officers (HALO) have been deployed into Doncaster, Rotherham and Sheffield hospitals. These are aimed at improving patient handover from ambulances on arrival at the A&E Departments and supporting flow through the A&E Departments. Positive feedback has already been received from the areas where this has been implemented.

Additional patient transport journeys to facilitate timely inter facility transfers at Sheffield Teaching Hospital have been supported to help improve patient flow.

The Care Home Bed capacity tracker tool has also been adopted and used by most of SYB's care homes improving the information on the availability of care home beds. This tool should make it easier for staff supporting patient discharges to identify and appropriate care home bed to suit the patient's needs, increasing both patient experience and improving the discharge process.

Paper prepared by Alison Kuppusamy, Business Manager to CCG Chair and Accountable Officer

On behalf of the Accountable Officer  
25 February 2019

# PRESS RELEASE

For immediate release



21 February 2019

## Have your say on Sheffield's end of life care services

**NHS Sheffield Clinical Commissioning Group (CCG), Macmillan Cancer Support and Sheffield Hallam University are coming together to improve services and care for people at the end of their lives.**

In order to understand what the current issues and requirements for these services are, people are being asked to share their experiences of end of life care in a survey. Anyone can complete the survey, including people currently receiving end of life care, as well as carers, relatives, partners and friends who have experienced any aspect end of life care.

Although it varies for everyone, end of life care typically begins when people are within the last twelve months of their lives after a terminal diagnosis. People with incurable illnesses such as advanced cancer, heart failure, strokes, neurological conditions and dementia are among the most likely to receive end of life care.

During this time, health, social care and charity services work together to help people live as well as possible until they die, and to die with dignity.

Currently a range of end of life care services are commissioned by NHS Sheffield CCG, including, but not limited to, beds and hospice support, nursing support teams, counselling and bereavement services, training for GPs, management of pain and GP support in care homes. Charities including St Luke's Hospice, Western Park Hospital, Marie Curie, Cavendish Cancer Care and Macmillan help to deliver all of these services and more.

Conducted by the CCG and Sheffield Hallam University as an independent body, this new research is being funded by Macmillan. The feedback gathered from the survey and other research will help develop a plan to improve these services and better meet the needs of people in receipt of end of life care.

Dr Anthony Gore, Sheffield GP and Clinical Lead for NHS Sheffield CCG said: "The level of end of life care for our city is good, but we want to make it even better.

"It can be a difficult thing to talk about, but we really want to start a bigger conversation around end of life care. By taking the time to tell us your feedback and experiences, both good and bad, we can make sure we are developing services that work for everyone.

"How someone wants to spend their last days is different depending on your background, your culture, your beliefs, and many other things. That's why it's important for us to hear from as many people as possible.

"The one thing we can all agree on is that everyone should die with dignity - how we care for people at the end of their lives is a measure of our society, and we only get one chance to get it right. Please help us take everything into account by sharing your thoughts and ideas in the survey."

If you are currently receiving end of life care or are a carer, relative, partner or friend who has experiences of end of life care services, please visit <http://bit.ly/shefflife>. The survey will be open until 8 March 2019.

### ENDS

For further information please contact [sheccg.comms@nhs.net](mailto:sheccg.comms@nhs.net) or 0114 305 1398.

### NOTES TO EDITORS:

- NHS Sheffield CCG are responsible for buying and contracting (otherwise known as commissioning) many of Sheffield's healthcare services.
- Approximately 1% of the population of Sheffield pass away every year – this statistic includes both unexpected and anticipated deaths. End of life care is a way for services to deliver appropriate care and planning where a person has received a terminal diagnosis.
- Exactly when end of life care (EOLC) begins will vary for each individual, but typically people become frailer, less mobile, and their symptoms and treatment needs may increase. For more information on EOLC, [please see the NHS website](#).
- This new research is being conducted in response to the end of life care strategy for Sheffield being due for review. The aim is to develop a workplan to ensure our plans and services are fit for the future.