



County Durham and Darlington

INTEGRATED BUSINESS BOARD
Thursday 25 February 2010
Item No: IBB/10/43-1

NHS COUNTY DURHAM AND DARLINGTON INTEGRATED BUSINESS BOARD

Chief Executive's Update

1. Introduction

The purpose of this report is to provide information to the board on a range of issues which affect NHS County Durham and Darlington.

2. Implications and risks

The report is designed to provide an overview of the key issues and activities facing the chief executive and the team of directors. In certain circumstances, areas touched upon within this report will in future be dealt with in greater detail, including implications and risks, within the integrated business board agenda or discussion at a board development and seminar session.

3. Recommendations

The board is asked to note the content of this report.

4. Author and sponsor director

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Chief Executive: Yasmin Chaudhry
Title: Chief Executive
Date: February 2010

Document management				
Purpose of the Paper: 1. Info sharing: Yes 2. Development/discussion: No 3. Decision/action No				
Version	Date	Summary	Owner's Name	Approved
1.0	25/02/10	To be considered at the integrated business board on 25 February 2010	Yasmin Chaudhry	

Purpose of paper	Information sharing Yes Development/discussion <input type="checkbox"/> Decision/action <input type="checkbox"/>
How does the paper support / have implications for:	
NHS County Durham's four strategic aims	Due to the nature of this report it touches on each of the strategy aims.
Our Vision Our Future workstreams	Due to the nature of this report it touches on a range of the OVOF workstreams.
World class commissioning competencies	Due to the nature of this report it relates to a range of the WCC competencies.
Standards for better health	None specifically due to the range of issues covered.
Use of resources	None specifically due to the range of issues covered.
Targets and vital signs	None specifically due to the range of issues covered.
NHS Constitution	Due to the nature of this report it relates to the aims of the NHS Constitution.
Darzi Principles	Due to the nature of this report it relates to the range of Darzi principles.
Impact on / involvement of partners	Due to the nature of this report it touches on a range of issues which we will work on with partners.
Equality & Diversity	None specifically, due to range of issues covered.
Other policies / issues	None specifically, due to range of issues covered.

NHS COUNTY DURHAM AND DARLINGTON

CHIEF EXECUTIVE'S UPDATE

February 2010

The issues that I would like to draw to the attention of the board this month are as follows:-

Best Business Award for Best NHS Commissioner – NHS County Durham

I am delighted to inform members of the integrated business board that NHS County Durham has won the Best Business Award for Best NHS Commissioner for commissioning services on behalf of County Durham and Darlington residents.

Andrew Areoff, Chairman of the Judges said: "NHS County Durham is setting the standards for innovation and forward thinking in the NHS sector. It is pioneering a new urgent care service designed to ease pressure on overstretched accident and emergency centres which may be rolled out nationally, improving access to treatment and delivering significant improvements for millions of patients. The second ground-breaking pilot project is a Superflow, a revolutionary new approach to improving efficiency – developed by a US hospital, based on the Japanese car industry. NHS County Durham is the first health organisation in the UK to use the innovative approach, promising major improvements to commissioning, procurement and contract management. Another innovative new service being spearheaded by County Durham is ScriptSwitch, a sophisticated new warning system for prescribing medicines for patients suffering chronic pain. Cutting edge ideas are often the domain of dynamic private sector companies so it is particularly pleasing to see NHS County Durham leading the way with new patient care initiatives."

We will be listed on the Best Business Award website as a winner and it will be announced via twitter and other media - www.bestbusinessawards.co.uk

Quality Improvement Award – nomination for Medicines Management

I am also pleased to inform members of the Integrated Business Board that the medicines management teams of NHS County Durham and Darlington have been recognised nationally for their innovative approach in influencing prescribing. The teams across commissioning and community health services have worked collaboratively to improve the safety and quality of prescribing. By integrating education, which presented the latest evidence and key messages, with prescribing audits and data, the teams have produced demonstrable changes in prescribing.

NHS County Durham and Darlington have sponsored two pharmacists as National Prescribing Centre therapeutics trainers. The Drug and Therapeutics Committee supported the pharmacists' delivery of multi-disciplinary therapeutic workshops for prescribers. This incorporated an educational element within the medicines management indicators of the Quality and Outcomes Framework.

The teams are one of four finalists selected for a Quality Improvement BMJ award, which is a tremendous achievement.

Good Ideas Investment Fund 2009/2010 – Project Isabel

I am pleased to inform members of the Integrated Business Board that NHS County Durham and Darlington has been successful in being offered £6,000 for 2009/2010 to support Project Isabel.

Richard Errington, Research Governance Lead, gave a presentation about the proposed project to NHS North East in December. 134 submissions were initially received by NHS North East, of which 33 made it to Stage 2. Of these, 22 have been offered support. The short-listed bids were of a very high standard and I am pleased to say that our proposal has been successful.

Isabel is a web-based diagnostic tool aimed at improving clinical diagnosis and supporting the referral process in primary care. It utilises information from a variety of sources, providing primary care clinicians with a range of diagnoses based upon symptoms presented during consultation. Therefore it has the potential to prevent unnecessary investigations, ensure relevant referrals and improve patient quality. Isabel will increase the information available to GPs and nurses and help reduce mis-diagnosis and unnecessary referrals to acute care. The software will be introduced during February to both the Clinical Reference and Informatics Clinical Quality groups within the organisation.

The effectiveness of the tool will be evaluated after a six month pilot beginning in April 2010.

NHS North East

Ian Dalton returned to his role of Chief Executive of NHS North East on 1 February 2010. He has been able to return due to the continued reduction of the incidence of influenza caused by the H1N1 pandemic virus. He will return whilst continuing in his role as part of David Nicholson's leadership team, as the National Director of Flu Resilience. This is expected to continue to the end of March 2010.

In returning to the North East, Ian has said that we face challenging times ahead. The whole NHS system will need to work together to ensure we deliver the best care to patients, reduce management costs, transform community services, deliver our ambitious vision and continue with strong leadership to stay ahead in what we deliver. He has sought our continued support and involvement in the transformational QIPP agenda, saying that NHS North East will continue to work in close partnership with us.

North East Offender Health Commissioning Unit - Event Friday 26 February 2010, Hardwick Hall Hotel, Sedgefield

The North East Offender Health Commissioning Unit is holding an event on Friday 26 February to set out the future strategy for developing offender health care services in the North East. This event will give existing and prospective providers the opportunity to hear about the unit's future strategy for developing offender health care services in the North East and provide an opportunity to raise questions regarding the strategy.

The Unit will be holding two identical sessions, one in the morning and one in the afternoon. For more information about the event please e-mail the team at cd-pct.offenderhealth@nhs.net

Health Plans for 2010/11 – two forthcoming engagement events

As part of our ongoing commitment to engagement, NHS County Durham and Darlington have arranged two events in March for interested members of the public, patient and carer representatives, partner organisations and service providers. They have been invited to give their views on how we should best invest the £1bn of taxpayers' money available to us to deliver health improvement and health services.

These two events will provide an opportunity for NHS County Durham and Darlington to share our Five Year Strategy, and to invite comments and views on the development of the Annual Operational Plan for 2010/2011.

Both events will be held in March and the details are as follows:

- **Durham** Venue: Ramside Hotel and Golf Club, Carrville, Durham, County Durham, DH1 1TD
Date: Wednesday 3 March 2010
Time: 12.00 -12.45pm lunch (provided) – 16.30 finish
- **Darlington** Venue: Dolphin Centre, Horsemarket, Darlington, DL1 5RP
Date: Monday 8 March 2010
Time: 12.00 -12.45pm lunch (provided) – 16.30 finish

Members of the integrated business board would be welcome to attend either of these events and should contact Debra Richardson on 01207 523 659 or email debra.richardson@nhs.net for the Durham event or Rebecca Haynes on 01325 746234 or email r.haynes@nhs.net for the Darlington event.

NHS campaign to raise awareness of NHS dentists in County Durham

A new dental awareness campaign was launched on 1 February 2010. NHS County Durham and Darlington launched the campaign to highlight that there are lots of NHS dentists within the County Durham area, as well as to explain the range of treatment, NHS charges and exemptions, oral health tips and how to access emergency care.

The campaign includes local poster, newspaper and radio advertisements and the production of new information leaflets which will be available from dentist and GP surgeries, local libraries and children's centres.

In 2008/09 221,717 people saw an NHS dentist in County Durham, however, we are keen to remind people that with more dental practices now welcoming new patients, it's never been easier to look after your teeth. NHS dentists are able to assess local people's oral health and should treatment be required, explain what's involved and how much it will cost, as well as give tips to help avoid problems in the future. They will also advise patients how often they need to visit for check-ups.

David Landes, Deputy Director of Public Health at NHS Durham and Darlington has led the work on this campaign.

New Headquarters Project

As members of the Integrated Business Board are aware we are investigating options to review our estate and ways of improving our operational efficiency to generate revenue savings. This is being done via WorkSmart and the New HQ Project which includes planning to accommodate all of our staff in one building. We are currently in the process of forming a New HQ Working Group which will be chaired by Lady Ann Calman, Chairman of NHS County Durham. The group will comprise of staff representatives from a wide cross section of the organisation, covering different directorates, teams and sites. We are currently seeking nominations from all of our directors for staff representatives for this group. The nominated staff will be expected to attend, engage and contribute to the group and to give feed-back to colleagues.

To kick start the New HQ Working Group we are going to hold a half day workshop with all of the nominated representatives. The purpose for this workshop is to:

- provide a summary of progress to date,
- develop an evaluation criteria,
- carry out an options appraisal,
- select a preferred option for a new HQ,
- develop recommendations for the Integrated Business Board.

The workshop will take place on 24 February 2010. The lead director for this work is David Gallagher, Director of Partnerships and Services.

Further information can be found on the intranet or you can contact Claire Colgan via e-mail at claire.colgan@nhs.net or by phone on 0191 374 6074.

Swine Influenza (H1N1)

As of 11 February the National Pandemic Flu Service will be stood down and all patients with suspected swine flu will be referred to their GP for advice. This follows a further decline in swine flu numbers over the past month and UK flu activity being at, or below, baseline levels for this time of year. As referred to earlier, this has allowed Ian Dalton,

National Director for NHS Flu Resilience, to return to his post of Chief Executive of NHS North East whilst continuing in his role, as part of David Nicholson's leadership team.

The Scientific Advisory Group for Emergencies considers that we have now passed the maximum peak of the UK second wave. It is anticipated that there will be a declining trend in numbers of new cases of pandemic influenza and it is considered unlikely that there will be a third wave of any significant size. As a result, the response to the swine flu pandemic has been reviewed to ensure that it is clinically appropriate to the levels of threat posed to the general public and the pressure being put on the NHS.

The National Pandemic Flu Service has been hugely successful in easing pressure on primary care services during the busiest times of the pandemic. It has allowed GPs to focus on those who are most ill and ensuring high volumes of people received rapid access to antiviral medicines when they needed them. The pandemic strain remains in circulation and although for the majority of people the illness is mild, for some the illness has been more severe. The Scientific Advisory Group for Emergencies has reviewed the antiviral policy and has advised that, subject to their clinical judgement, GPs can continue to offer treatment to all those with influenza-like illness who wish to receive it, until the end of the seasonal flu period in 2010, defined as the end of March 2010. The Government has accepted this recommendation.

Anna Lynch, Acting Director of Public Health will continue to inform members of the board of the position with regard to H1N1 as part of her verbal update on communicable diseases at each board meeting.

Tackling Health Inequalities in the North East

The audit commission and Deloitte, appointed auditors to many public bodies in the North East, have published their final joint report on tackling health inequalities in the North East. The report looks at how public sector bodies across the North East, as well as the voluntary sector are working together to tackle health inequalities. The report notes the progress being made through leadership from regional agencies, partnership working and at local level and by increasing or prioritising funding. Life expectancy is increasing and, in most areas, the mortality rate reducing at a faster rate in the North East than nationally, narrowing the gap between the North East and the rest of the country. Whilst life expectancy is improving, men and women in the north east are still likely to die younger than the national average. The report highlights a number of key areas that partnerships need to focus on to address health inequalities successfully and provides recommendations and a checklist of actions that can be used by partners to review arrangements.

The report has already been discussed and supported at a meeting of North East Directors of Public Health. It is being taken to the North East NHS Management Board to be held in February to agree the action to be taken across the North East in response to the recommendations contained in the report. Anna Lynch, Acting Director of Public Health, will lead the work required for any of the actions agreed at the meeting.

Core Case Inspection of Youth Offending Work in County Durham

This core case inspection of youth offending work in County Durham took place as part of the Inspection of the Youth Offending programme. A representative sample of youth offending cases were inspected from the area and judged how often the public protection and safeguarding aspects of the work were done to a sufficiently high level of quality. The findings will feed into the wider annual comprehensive area assessment process.

The inspection judged that safeguarding aspects of the work were done well enough 68% of the time; public protection aspects, work to keep to a minimum each individual's risk of harm to others, was done well enough 64% of the time and that work to make each individual less likely to re-offend was done well enough 66% of the time. To date, the average scores are 63%, 57% and 65% respectively. The Chief Inspector of Probation says that he considers this to be an encouraging set of findings. Attention was being paid to improving the quality of work with children and young people. A new case management model has been implemented, although many of the cases in the sample pre-date this model. He said that nevertheless, there was plenty of evidence of very good practice with individual children and young people. The challenge for the Youth Offending Service would be to spread this quality of good practice.

I have passed the inspection report to Brian Key, Director of North East Commissioning Mental Health, Learning Disabilities and Offender Health.

Care Quality Commission – NHS Registration under the Health and Social Care Act 2008

The application window for NHS registration applications under the *Health and Social Care Act 2008* closed on Friday 29 January 2010. Registration was for organisations providing any regulated activities at or after 1 April 2010. County Durham and Darlington Community Health Services (CDD CHS) has registered. NHS County Durham confirmed that it did not provide any such regulated activities.

The Care Quality Commission (CQC) has confirmed that all but two trusts submitted their application by this date and both of those have now submitted their applications. This is a great achievement by the NHS in response to a very challenging timetable.

CQC assessors are now reviewing all of the application forms received alongside the information contained in the quality and risk profiles and any new information, such as that arising from its mortality outliers programme. The CQC will release registration decisions (Notices of Decision) to trusts as it makes them. Press releases will be issued two days after individual trusts have received their Notice. Each press release will include the list of

trusts that have received their Notice that week with links to the CQC's website where the details of the decisions will be available. In this way there will be a series of weekly press releases in February and March, rather than a single announcement for all of the NHS.

Conditions of registration will appear on the Certificate of Registration. All trusts will be registered with conditions as there are two types of condition:

- 'restrictive' conditions are routine and define the regulated activities the trust is registered to carry out; the locations at which they may be carried out; and whether there are any further restrictions, for example, they might say a trust cannot provide a service to children of a certain age.
- 'compliance' conditions might be applied where the CQC has concerns about non-compliance. These will require trusts to make improvements to services in order to meet essential standards of quality and safety.

If CDD CHS does not agree with the CQC's decision about its initial registration (including any conditions imposed) it can make representations within 28 days of receiving our Notice of Decision.

Audit Commission Report: '*Giving Children a Healthy Start*'

I have received a copy of the Audit Commission's latest national report, '*Giving Children a Healthy Start*', published at the beginning of February. The report considers that, despite an estimated £10.9 billion invested by the government in improving the health of children under the age of five years, significant progress has not been made. There have been some improvements, such as a lower infant mortality rate, but there is also evidence of widening inequality.

The report includes sections on:

- national health policy for children under the age of five years,
- planning and delivering local services to improve health,
- challenges to service delivery and accessibility,
- finance and value for money in services for children under the age of five,
- recommendations for the government, local authorities and primary care trusts.

As members of the integrated business board (IBB) are aware, to give children a better start in life is one of our four strategic objectives and is a priority for NHS County Durham and Darlington. A presentation on the work we are doing was given at the IBB's seminar/development session held in public in January.

I have passed the Audit Commission's report to Anna Lynch, Acting Director of Public Health, who will ensure that the recommendations contained in the report are considered locally.

A Smoke Free Future: a comprehensive National Tobacco Strategy for England

England's first ever national tobacco strategy was published on 1 February. It plans to halve the number of smokers by 2020. The new vision from the Department of Health sets out goals to make smoking history for more people, cut the number of children who start smoking and tackle the harm it causes families, communities and the economy.

It singles out the role of Fresh Smoke Free North East. The North East has seen the biggest decline in smoking in England, from 29% of people smoking in 2005 down to 21% of people in 2008 - a total of around 170,000 fewer smokers.

Smoking nationally is estimated to cost the NHS £2.7bn a year and UK businesses £2.1bn a year through sickness and absenteeism alone.

Key goals in the strategy include:

- reducing the number of people who smoke down to 10% of the population by 2020,
- cracking down on illegal tobacco, which is already underway in the North East through *the North of England "Tackling Illicit Tobacco for Better Health"* programme, highlighted as a case study in the strategy,
- reducing the number of children aged 11-15 who smoke from 6% now down to 1% by 2020,
- moving cigarettes out of sight in shops and removing cigarette vending machines in the *Health Act 2009*,
- reviewing the impact of the smokefree legislation,
- further strengthening of NHS Stop Services to encourage and support smokers to quit through the NHS,
- reducing second hand smoke, which is strongly linked to chest infections in children, asthma, ear problems and cot death.

NHS County Durham and Darlington will continue to work in partnership with Fresh Smoke Free North East to implement the strategy. The strategy can be viewed via the Department of Health's website www.dh.gov.uk/publications

Care Quality Commission: Review of NHS Organisations in 2009/10

Last year the Care Quality Commission (CQC) set out plans for assessing and rating health and social care organisations in *Reviews in 2009/10*. The CQC has recently reviewed those plans and has decided to make some changes to ensure it presents a clear picture of the quality of care provided by the NHS, in a year that they also register trusts against essential standards of quality and safety.

Publication of a trust's registration status will replace the score for core standards as the main way to share publicly how NHS organisations are meeting essential standards of quality and safety.

Therefore the CQC will be making the following changes to the assessment of compliance with core standards:

- it will not score compliance with core standards;
- it will not carry out inspections to check declarations and will not alter or qualify declarations.

Performance against the two sets of national indicators and assessment of the quality of financial management will continue as set out in *Reviews in 2009/10*. However, the decision not to score the core standard assessment means that there will not be an aggregated score for quality of services.

Therefore, the three assessments the CQC will publish in 2010 are:

- registration status, which will be continuously monitored and updated,
- achievement of national priorities in 2009/10 which will be scored,
- quality of financial management in 2009/10 which will be scored.

For PCTs as commissioners, the CQC's assessment plans remain broadly the same as in *Reviews in 2009/10*. They will consist of:

- achievement of national priorities in 2009/10,
- quality of financial management in 2009/10 based upon the Audit Commission's "*managing finances*" score (which is an assessment for the whole of a PCT).

The CQC will also report selected world class commissioning scores and have made no changes to its plans for special reviews in 2009/10.

NHS Carbon Reduction Strategy Update: '*Saving Carbon, Improving Health*'

It has been a year since David Nicholson, NHS Chief Executive, and the Sustainable Development Unit launched the NHS carbon reduction strategy. I have received an update on the strategy from the Sustainable Development Unit – '*Saving Carbon, Improving Health*'.. The document provides an updated carbon footprint for the NHS and highlights the large scale challenge ahead. It also contains information on how cutting carbon saves money and how this can be achieved in NHS trusts. The Unit believes that creating a more sustainable, low carbon NHS will help deal with some of the challenges and will relieve budgetary pressures in the difficult times ahead. I have passed the update to David Gallagher, Director of Partnerships and Services, who leads on carbon reduction as part of his estates remit.

If you would like to find out more about the Sustainable Development Unit, its website address is www.sdu.nhs.uk

'Building Partnerships, Staying Safe: the prevention of violent extremism – pilot programme: guidance for healthcare organisations'

I have received, via NHS North East, '*Building Partnerships, Staying Safe*' a document produced by the Department of Health. The document contains guidance and a toolkit for NHS Chief Executives and senior staff within healthcare organisations and will be used to support 'prevent' pilots.

'Prevent' is the government's long term engagement strategy, being led by the Home Office. It focuses on working with individuals and communities which may be vulnerable to the threat of violent extremism and terrorism. The Department of Health and health services are key partners in 'Prevent'. The overarching principles of 'Prevent' are to improve health and wellbeing through the delivery of healthcare services, while safeguarding vulnerable individuals. There is no intention of healthcare organisations to take on a surveillance or enforcement role. Rather, healthcare organisations must work with partner organisations to contribute to the prevention of terrorism by safeguarding and protecting vulnerable individuals and making safety a shared endeavour. 'Prevent' pilots are currently underway in selected health services. They aim to test the implementation of 'Prevent' as an ongoing initiative across the healthcare sector. It is designed to become part of everyday routine for healthcare staff within the public, private and voluntary healthcare sectors. It will be rolled out nationally across the healthcare sector in spring 2010.

Anna Lynch, Acting Director of Public Health, is the lead director for this area of work as part of her emergency planning remit.

National Prescribing Centre Annual Report for 2008 - 2009

At the end of January I received a copy of the National Prescribing Centre's (NPC) annual report for 2008-2009 which detailed the NPC's programme of delivery during the last financial year.

During 2008/09 the NPC expanded both its remit and work programmes. It delivered on the agreed business plan of well-established activities and in addition completed a range of major, additional pieces of policy-related work commissioned by the Department of Health including support for,

- primary care trusts in the delivery of new patient rights (set out in the NHS Constitution) around local decision-making about medicines,
- Accountable Officers in their new roles involving controlled drugs,
- non-medical prescribing.

I have passed the report to Hilton Dixon, Director of Clinical Quality. The report can be seen via the NPC's website www.npc.nhs.uk

Consultations

The Care Quality Commission: Assessments of Quality in 2010/11

The Care Quality Commission (CQC) is currently consulting on its plans for assessing quality in 2010/11 and beyond, and is seeking feedback on this area of its regulatory role. Designed to complement its registration programme, which assesses and continuously monitors essential standards of quality and safety, the CQC believes its assessments of quality will drive improvement in the quality of care over and above those essential standards. This includes its powers under the *Health and Social Care Act* to carry out periodic and special reviews and publish information.

Our consultation details how the CQC proposes to assess the quality of:

- councils as commissioners,
- primary care trusts as commissioners,
- NHS trusts and primary care trusts as providers,
- adult social care organisations as providers.

The consultation document can be found on the CQC's website at www.cqc.org.uk/getinvolved/consultations.

Residential Charging and Consultation

A twelve week consultation concerning the charging arrangements for residential social care started at the end of January. Views are sought on proposed amendments to the residential charging arrangements suggested by a stakeholder group. Elizabeth Graham, Director of Nursing and Clinical Quality will be co-ordinating a response from NHS County Durham and Darlington.

Universal Free School Meals Pilots

In his pre-budget report, the Chancellor announced that there would be an extension to universal free school meals pilots so that there will be a pilot in each Government office region. Local Authorities and primary care trusts have been asked to express an interest in becoming a pilot area. Anna Lynch, Acting Director of Public Health, will be looking at the proposal.

Yasmin Chaudhry
February 2010