Welcome to the Chief Officer’s Board update for March 2019 featuring news and highlights from NHS Hull CCG.

I’ll start with the great news that the Jean Bishop Integrated Care Centre (ICC) is featured on NHS England’s website dedicated to the NHS Long Term Plan as the leading case study in the Ageing Well section. The touching film of how the ICC made such a difference to Ray Eshelby, allowing him to be independent in the last few months of his life is highlighted on the website. This is truly the experience we wanted to see for our patients from the way the services at the ICC work. You can see the case study here: https://www.longtermplan.nhs.uk/areas-of-work/ageing-well/

**NHS Staff Survey 2018**

I was delighted with the results of the NHS Staff Survey 2018. Our response rate at NHS Hull CCG was 84%, which was the highest in our group of eight CCGs in the North Yorkshire and Humber area for the second year running. I was very encouraged to see that a high percentage of people feel enthusiastic about their jobs and feel trusted and well supported by their colleagues. Our overall satisfaction score was again the highest in our group at 68.4%, although we know this percentage rate has dropped slightly from last year. I want to make sure we do everything we can to resolve any issues raised in the survey to further improve staff engagement.

**Strategic update**

We have reduced the size of the Humber Acute Services Review (HASR) Board to enable it to focus more on what needs to happen at the five hospital sites around meeting population health need and ensuring services are sustainable. I’m hoping we will make good progress over the next few months. The recent HASR engagement events to help ensure that patients have input into key elements of the Review have been successful and well attended, particularly the recent stroke, neurology and complex rehabilitation patient event in Hull.

To support the Hull Place Plan we now have a very thorough report on the Beverley Road area of the city - in particular the HU5 population where access to healthcare is 3-4 times higher than other parts of Hull due to some of the wider determinants of health. We are really seeing what the issues are across police, social care and health and we are talking to the community about what’s important to them. We will be presenting more about this at a future Board and to other stakeholders soon.

**Well North**

Whilst my current roles don’t allow for much time to travel away from Yorkshire, I think it is important to look at good practice
happening in other parts of the NHS and bring the learning back to Hull. I spent the day at West Lancashire CCG earlier this month. It was very interesting to see some of the work they are doing particularly around the Well North programme, where they are one of ten pilot sites. I was able to see a great project in Skelmersdale that looks at developing social entrepreneurs, in a similar vein to our Healthier Hull community groups. Like many areas they are seeing health workforce recruitment issues and the CCG there has worked with their local college and to develop a ‘tube map’ that helps young people get from A to B in their career via different routes with ‘tube stops’ where they can get on and off during their education journey. It really encourages students to think outside the traditional routes into a health and care career and I will be watching this with interest. West Lancashire CCG representatives will be coming to see the ICC later this year for a return visit.

**Israeli health system learning**

We have also been exploring how our healthcare system in Hull can learn from the Israeli health care system, specifically Israel’s largest health care provider Clalit. Israel is considered one of the efficient health systems in the world, anchoring its services around the local population, which is very much in line with the development of Integrated Care Systems here in the UK. Clalit is an integrated, primary care–led system supporting 8.5 million people which is publically funded and free at the point of access, like our NHS. Clalit is interested in working with the NHS around frailty and population health management and we are interested in learning more and drawing on some of its best practice.

**CCG Annual Review**

In preparation for our Annual Review we have submitted our Quality of Leadership and Patient and Public Involvement assessments. I want to thank everyone who has been involved in putting together the documents and evidence in preparation for us receiving our assessment rating from NHS England later this year. We have been an outstanding organisation for the last two consecutive years and we continue to aspire to be a high-performing organisation for the benefit of our local population.

**CCG Board changes**

At the Council of Members meeting on 7 March 2019 the representatives confirmed the following appointments to the NHS Hull CCG Board:

- Dr Dan Roper as GP Board Member and Chair of NHS Hull CCG
- Dr Bushra Ali, Dr Masood Balouch, Dr Amy Oehring, Dr James Moult and Dr Vince Rawcliffe as GP Board Members
- Karen Marshall and Jason Stamp as Lay Representatives

I want to pay tribute to outgoing GP Board members. Dr Raghu Raghunath who was one of our original CCG GP Board members, right back from the shadow Board in 2012. He’s been a pleasure to work with over the last six years, providing invaluable input into clinical programmes and we hope he will be able to continue to work with us. Dr Scot Richardson has provided some fantastic leadership in the time he has been here. He has made such a difference in the many different areas he has been involved, juggling his different roles in local health care. He is a key clinical leader for the future and we want to continue engaging him in other CCG work.

I am very pleased to see the re-appointment of Jason Stamp and Karen Marshall as our Board Lay members who both continue to provide excellent support and guidance to the organisation. It is our intention to phase the election of Lay Members and the third appointment will be later in the year.

This will be the last Board for Erica Daley as Director of Integrated Commissioning as she retires from the role at the end of April 2019. Erica’s enthusiasm and passion for improving services across health and social care is evident in the excellent work she has led around the Integrated Care Centre and out of hospital strategy. I’m so proud of what she’s achieved and we are lucky to be able to retain her in a different CCG role. She’s done incredible things for the city and her calmness, good humour and ability to see the bigger picture will be really missed.

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