

Response to 360° stakeholder survey report

CCG name: NHS Trafford CCG

Completed by: Dr N Guest

1. Are there any factual errors you would like to highlight?

Please provide a brief description of the error, along with the necessary correction

No Factual Errors

2. Is there any further context or information you would like to be taken into account when reviewing this document?

General Comments Regarding All Domains:

It is NHS Trafford's vision to deliver integrated care within Trafford. This work has been for the past 3 years, and continues to be, led by clinicians. Part of this work is, the New Health Deal (redesign of acute services), which is currently out for formal public consultation. The overall aim of this is to achieve safe appropriate local services, to ensure the financial stability within our health economy locally, and to ensure capacity in the system to support the health needs of the local population.

The Trafford Strategic Programme Board was set up to lead on the development of a commissioner led, clinically designed vision (integrated care) for the provision of healthcare in Trafford, implement an effective public engagement and consultation process throughout the development and implementation process and implement a safe, sustainable health system for Trafford. The membership of this Board includes representatives from the local council, NHSGM, SHA, chairs of Central Manchester and South Manchester CCG, representatives from community and acute providers, representatives from the NW Ambulance service and a LINKs member.

The South Sector Leadership Board was also set up with a similar purpose for South Manchester and its membership is reflective of this. Trafford CCG is an active participant at this Board. This forum brings together the co-commissioners and heads of provider organisations to manage the strategic direction of the south sector economy. In addition to this, the contracting architecture underpinning the UHSM FT contract is fully engaging with lead and associate (co-ordinating) commissioners. Our work on collaboration is strengthening on a weekly basis as all new commissioning organisations within the south sector of Greater Manchester work together more formally.

Domain Specific Commentary Response

Domain 1: Overall we are pleased with the responses within this Domain – we recognise that we are on a journey which inevitably means that the pace of change can be faster for some than others and we believe that some of the “negative” comments reflect this. This is something we are constantly learning and making good progress consistently to improve upon. However, we are disappointed that only half of practices feel they were involved in decisions about the proposed configuration, structure and governance arrangements. Trafford CCG has appointed a Clinical Director for Member Relations, who is working hard with Practices locally and the Constitution has been discussed regularly at quarterly GP Membership Forums. We are committed to continuing engagement with all Practices to ensure a greater degree of understanding going forward.

We will develop our neighbourhood footprints to develop and strengthen our two way communications and engagement with our member practices.

In addition, we are disappointed that the other health professionals are not satisfied with arrangements for them to input into the CCG given the level of engagement that has occurred due to the New Health

Deal and Trafford's move to integrated care. The CCG Senior Leadership has engaged with the Local Medical Committee on many occasions over the past 12 months formally and informally and has in fact also moved to a position of shared office accommodation with the LMC to help further build and develop the relationship

Domain 2: Through a series of high level discussions with the Council Leader and Chief Executive it has been clear from the outset that neither the Council, nor the CCG, would wish to see any adjustments to the CCG boundaries from those of the legacy PCT. We are pleased that the boundary issues are broadly recognised and acknowledged as in line with stakeholder expectations.

Domain 3: Again we are pleased overall with the responses to this Domain. They clearly indicate a good level of understanding of our plans and priorities and a high level of confidence in our ability to deliver them. We are disappointed that NHS Provider stakeholders are less positive in relation to the CCGs commitment to helping them deliver their own QIPP plans. Trafford CCG is a member of the Strategic Programme Boards that include the relevant NHS Providers as members and the CCG has actively engaged and worked with providers in relation to QIPP. Trafford CCG is also an active participant of the NHS Greater Manchester QIPP group. We are committed to working further with our Providers to engage them more and understanding better how the CCG can help them deliver their QIPP plans. This will be a focus of work through our formal committee structure throughout 2012/13 and beyond.

Domain 4: We acknowledge is not probed through the 360 Degree process

Domain 5: We are pleased with the responses for this Domain. We have worked hard with the emerging CSU to develop a robust level of service input to the CCG and the arrangements are working well. We will need to ensure that we continue this positive level of professionalism between the CCG and CSU going forward. We recognise that we have some further work to do to ensure that *all* stakeholders fully understand which individual is responsible for what within the CCG but we also recognise that we are continuing to develop our external relationships and this level of full understanding by all stakeholders will take a bit longer to fully embed.

Domain 6: We believe it is important to ensure things remain in context. Overall we are engaging well but we also recognise that we have more to do. Specifically, we are disappointed that only half of practices feel that there are clear arrangements for delegation of functions within the CCG, with just over half of these being satisfied with the arrangements. Trafford CCG has appointed a Clinical Director for Member Relations, and the Constitution which sets out the delegation of functions has been discussed regularly at GP Membership Forums but again the pace of change needs to be managed carefully and consistently at a pace that is manageable for all our Member Practices and in a style, tone and language that is appropriate to all our Member Practices. We continue to learn as we evolve and develop. Our OD Plan identifies learning needs around communicating and engaging so we remain committed to improving without losing sight of the progress we have made already.

3. If you feel this document is inconsistent with any aspect of your application, please a) describe the inconsistency and b) provide any necessary clarification

In relation to Domain 2 we have held a series of high level discussions with the Council Leader and Chief Executive it has been clear from the outset that neither the Council, nor the CCG, would wish to see any adjustments to the CCG boundaries from those of the legacy PCT. These original discussions were through the original Transformational Change Steering Group meetings set-up by the CCG with the support of the PCT and involving the Local Authority and then carried over into regular liaison meetings between the CCG Leadership Team and the Council Leader and Chief Executive. We believe that this working assumption has been understood by all stakeholders from the outset without the need for formal clarification letters to

confirm the understanding.

4. Do you have any other comments?

The CCG as an organisation is pleased with the result of the 360 survey and the high response rate, as we believe that this indicates strong support from member practices and other partners for the work that we are doing to improve health services. We will ensure feedback from this survey is integrated within our on-going plans.

The CCG is particularly pleased with the feedback in relation to Domain 5 the collaborative working arrangements with all partner organisations and the safeguarding arrangements. Safeguarding is a priority for the CCG, positive feedback about this from GPs is a measure of the importance it holds in Trafford. The CCG feels that collaboration will be vital moving forward and was pleased to see this reflected as strength.

Finally, the CCG is pleased with the result of the 360 survey given the very limited staffing support to date, as this indicates strong support from member practices and other partners for the work that we are doing to improve health services. We will ensure feedback from this survey is integrated within our on-going plans.