



North Central London
Clinical Commissioning Group

Annual General Meeting 2020/21

23 September 2021

Welcome



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Clinical Commissioning Group

- Welcome to the Annual General Meeting of the North Central London Clinical Commissioning Group (NCL CCG)
- 2020/21 was dominated by the Covid-19 pandemic – and today is therefore not a traditional AGM.
- Focus on the NCL pandemic response, our financial performance, and work in key areas – tackling inequalities, Green NHS, our workforce and two major strategic reviews.
- We will also present on our journey to the NCL Integrated Care System

Housekeeping points

- We are disappointed not to be able to come together in person today
- We warmly invite you to send in questions throughout the event – typing these in via MS Teams platform
- We will answer as many as we can during the Questions session. A response to any questions not answered today will be posted on our website
- This is a live event. A recording will be uploaded to our website. Only CCG representatives will appear in the recording
- A British Sign Language interpreter will appear on screen – and audience members can also turn on ‘captioning’ during the event

Agenda

- 14.30 Welcome
- 14.35 Responding to the pandemic
- Tackling health inequalities
- Our people
- Strategic commissioning review
- A greener NHS
- 14.55 Looking ahead to our future plans and priorities
- 15.05 Accounts for 2020/21
- 15.10 Questions
- 15.40 Closing remarks

A personal message from Dr Jo Sauvage, Chair



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- COVID-19 has continued to affect everyone living and working in Barnet, Camden, Enfield, Islington and Haringey
- Our heartfelt sympathies are with the families and friends of those we have lost to COVID-19 in North Central London (NCL)
- The NCL health and care system has worked tirelessly to support our local communities throughout the pandemic and we thank all our system partners
- We remain committed to supporting our communities and colleagues in every way we can, while the pandemic continues and into the future

Thank you



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This is our last Annual General Meeting as a Clinical Commissioning Group, and we would like to thank everyone who has worked with us to help deliver our ambitions over the last six years.

Particular thanks go to – past and present – our Governing Body members, clinical leads, member practice colleagues, NHS, Council and voluntary sector partners, community representatives and all our staff.

As we move to form the NCL Integrated Care System, we look forward to continued close working to deliver the best health for all.



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Responding to the pandemic

An unprecedented year: the CCG's role in responding to the pandemic

As commissioners, we convened and supported the health and care system response. Wide-ranging changes were rapidly mobilised:

- Prioritising and re-directing hospital services to create intensive care unit capacity
- Wrapping dedicated support around our care homes
- Offering 'digital' appointments appropriate to circumstance
- Strengthening our 111 response
- Creating 24/7 mental health crisis telephone lines
- Innovative approaches to patient care - pulse oximetry at home

Critical role of primary care in responding to the pandemic



559,811 COVID-19 vaccines delivered
62% of all COVID-19 vaccines in North Central London



50,000 online consultations
(October - December 2020, average/month)



52.5% of appointments via telephone
47.5% of appointments face-to-face
91% attendance rate
(October - December 2020)



13,071 referrals to social prescribing
12,500 personalised care and support plans (target)



NCL GP annual appointments	6.7m
Annual referrals to secondary care	339,086
Annual learning disability health checks	3,000+

% of North Central London 2016-20 mortality

Data as of April 2021

COVID-19 Vaccination Programme

1,928,922 vaccinations
delivered in NCL

1,014,292 first doses and **914,630** second doses
delivered throughout Phase 1 and 2 of the
programme

Over **80%**
uptake in
the over
40's

989,712
vaccinations
through
primary care

395,414
vaccinations
through
Community
Pharmacy

388,022
vaccinations
through
Vaccination
Centres

155,171
vaccinations
through
Hospital
Hubs

54% uptake
in the under
40's

* data as of
September
2021

Supporting equitable access to vaccines

- Data driven - analysis of uptake across ethnicities, indices of deprivation, wards, languages spoken etc.
- Delivery models designed to meet local communities' needs – with a mix of local venues, buses and in-reach delivery, large sites across boroughs
- Large vaccination events at the Emirates stadium and the Tottenham Hotspur stadiums where over 20,000 people were vaccinated
- Data used to focus hyper-local level – e.g. pop-up clinics, supported by door knocking and street-level interventions as an outreach model
- Work with local community groups to reach residents in areas of low uptake with information and support to access the vaccine

Engaging with our communities

- Events shaped with, and for, local communities e.g. webinars, pop-up clinics
- Working with faith leaders, Community Champions, grassroots organisations
- Local healthcare professionals of diverse ethnicities speaking at events
- Online information in multiple different languages and formats
- Video creation in different languages with community groups
- Working with local influencers (e.g. Arsenal football team)
- Setting up a vaccine hub for people with learning disabilities, autism and phobias
- Community TV and radio activity to share information e.g. Greek/Turkish/Somali media
- Youth-focused engagement work, including YouTube live sessions
- Paid-for social media and organic influencer-led campaigns

Delivering planned patient care

- NCL has been selected for additional funding to trial ways of seeing more patients awaiting elective care or outpatient appointments
- Moving to extended hours working, including weekends and evenings and adding additional outpatient clinics
- Launching a community-led audiology service - open to self-referral
- Increasing capacity in community phlebotomy services (blood tests) for three months to meet increased demand and improve service access
- NCL community gynaecology providers working more closely together to triage patients on waiting lists
- Introducing a comprehensive integrated care package to help address the physical, mental, dental, sexual and social needs of refugee families in NCL
- Against our pre-pandemic baseline of elective care, we are currently delivering 86% of elected care and 95% of outpatient activity, compared with 72% and 74% at the same point in 2020. We are working hard to maintain these levels

System achievements during COVID

- We created integrated discharge teams in each acute hospital to support collaborative working and speed up discharge of patients ready to go home
- Pulse oximetry at home led by primary care, and virtual wards led by secondary care to avoid COVID patients' admission to hospital
- GPs forming strong Primary Care Networks and working together to deliver projects, such as the COVID Vaccine programme
- Innovative approaches to care pathways - new Cancer pathways have improved outcomes and experiences for patients
- Ongoing development of integrated care partnerships (ICPs) with strong community focus and local government leadership
- Enhanced support for Care Homes in areas such as infection prevention and control, testing, staff training and access to clinical support
- System-wide surge planning increased capacity in intensive care by 250% across system



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Tackling Health Inequalities

Since 2020, the CCG has made a significant level of progress to deliver its equality, diversity and inclusion priorities – both as a commissioner of NHS services to achieve the best clinical outcome and reduce health inequalities for patients, and as an employer, to advance workforce equality and fairness.

We recently published our Diversity and Inclusion Strategy (2021-23) – demonstrating our commitment to continue to give our staff and patients a true sense of belonging through engagement and collaboration:

- **For our workforce** - how the CCG will continuously strengthen the way we employ, support and retain a high quality diverse workforce, implementing a ***fair and just organisational culture***
- **For our patients** – how the CCG plans to tackle health inequalities and strengthen a systems approach to population/place-based health and care management

Our diversity inclusion themes for 2021-2023

- 1. Equality in access to services and information and equity in health outcomes**
 - 2. Effective and inclusive engagement with patients and communities**
 - 3. Representative and supported workforce**
- Collaboration and co-production is key to building inclusion and tackling inequalities
 - We have learnt a great deal since the pandemic started - what works and what does not
 - We will use this experience and the new mandate to further strengthen our collaboration and focus on key service and workforce inclusion priorities
 - We will ensure the new ICS body continues to build on the CCG's work to successfully deliver inclusion outcomes at all levels:
 - Locality / PCN level
 - Borough level
 - System level

Borough priorities at a glance

All five borough partnerships:

- **Shift to proactive care (early intervention and prevention)** – move to delivering more proactive care through the use of population health management tools (e.g. risk stratification, case management)
- **Inequalities and deprivation** – all boroughs are gathering data related to inequalities and are working towards addressing them as part their priority areas of work
- **Cross-sector workforce planning and skills development** – partnerships have identified the need to develop collective workforce plans
- **Supporting care homes/providers** – all partnerships are focused on providing enhanced and integrated support to care homes and their residents
- **Digital inclusion** – partnerships have acknowledged the need to emphasise digital inclusion and learn from resident experiences related to the use of technology over the pandemic
- **Vaccinations and immunisations** – partnerships are working together to deliver COVID vaccinations and delivered a highly successful flu campaign

NCL CCG's Inequalities Fund



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- NCL CCG has created a £2.5m Inequalities Fund (phase 1) to help address inequity of access, outcomes and experience between different communities in the same borough and to address the 'social gradient' between better and under-served groups
- The most deprived NCL neighbourhoods are amongst some of the most ethnically diverse wards in the borough
- Second phase launch of the Inequalities Fund planned for later in 2021/22
- 26 projects funded through Phase 1
- The funded proposals are diverse and innovative
- They include proposals to support parent and family health in our poorest areas, engage vulnerable young people with mental health support, reduce serious youth violence, explore barriers to accessing post-Covid syndrome services and enhance the management of people with long-term conditions in deprived communities

Working with our voluntary and community sector



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The importance of the voluntary and community sector (VCS) has been highlighted during the pandemic through supporting and developing strong relationships with those in our local communities who face the highest health inequalities.

As we move into an ICS and place-based partnership model, we are working more effectively in partnership with the VCS and are developing a 'live' VCS Strategy. This will support:

- Our transition into an ICS
- The development of a best practice approach to working with the VCS
- Ensuring we are raising the voices of local communities and addressing health inequalities
- The work of the Health Inequalities fund and our Borough Specific Partnership Priorities

Key areas identified in the strategy include:

- Recognising the VCS as a strong strategic partner : ensuring the voice of the VCS is heard within the ICS
- Developing procurement processes which support the VCS to work with us (larger organisations to grass-roots)
- Ensuring sustainable funding: developing how we commission community projects so that our approach supports and empowers local communities
- Innovative commissioning and service delivery: supporting the VCS to work alongside statutory and mainstream services to ensure diverse communities have access to care in a way that reflects their needs

Example: Digital inequalities

- Two community-based research programmes across NCL, gathering insight into people's lives, and their experiences of accessing digital support
- Supporting local residents to access digital services and support via training, peer support and providing equipment
- Conducting an Equalities Impact Assessment to understand the impact of non-face-to-face appointments, and digital booking systems, on protected characteristic groups, carers, and groups which are socio-economically disadvantaged
- 'Digital first' pilot across 15 GP practices to understand how patients experience accessing online services and the quality of these services
- All community development projects delivered through the pandemic have included elements of digital inclusion

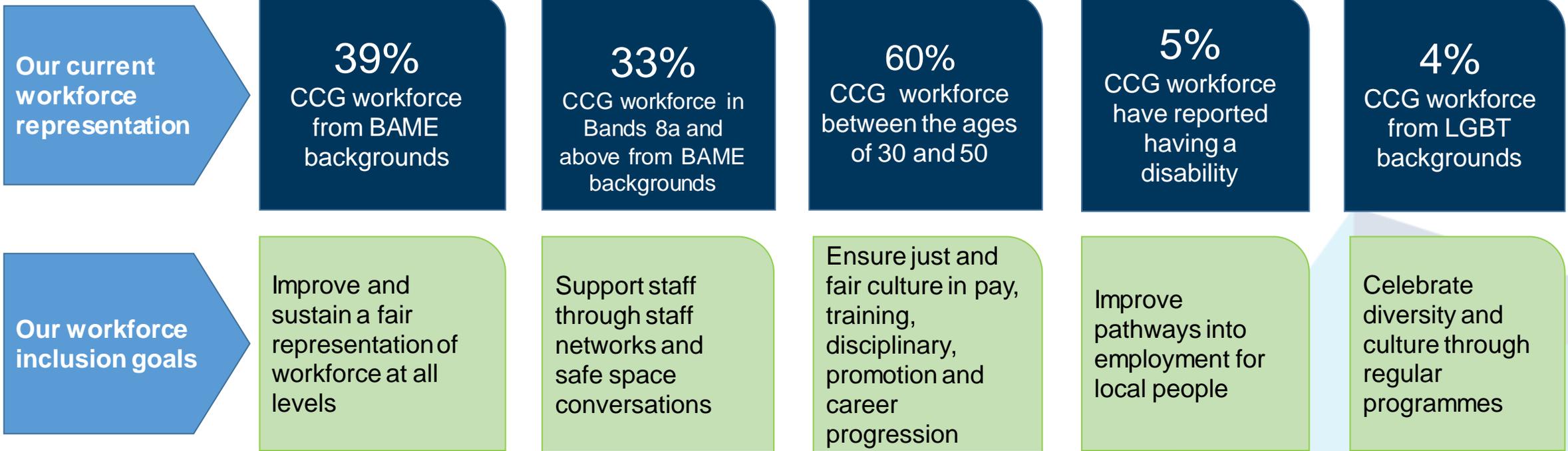


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Our people

Building a more representative and supported workforce for the future



Staff experience - why it matters so much to us



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We understand that staff experience of working in the NHS is adversely affected by the experience of discrimination, bullying, and harassment, as well as global events such as the pandemic and Black Lives Matter movement. We want to provide our staff an experience of fair and just culture so they feel they belong in an inclusive organisation. Our staff networks will continue playing a crucial role in meaningful engagement and co-designing solutions.

Disability Staff
Network

LGBT+ Staff
Network

BAME Staff
Network

- Provide a safe space to share lived experiences, and hold honest and open conversations
- Co-design actions and find solutions
- Raise awareness and provide advice



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Strategic commissioning review

Strategic reviews of community and mental health services

- The strategic reviews of community and mental health services seeks to address the variation in the way services are commissioned and delivered across NCL by the 5 legacy CCGs
- Aim is to create a consistent and equitable core service offer for both community health and mental health services that addresses service access inequalities and contributes to improving health outcomes for our residents regardless of where they live in NCL
- Following an extensive engagement process, draft core service offers have been developed in partnership with our community and mental health service providers, primary care, local authorities, voluntary and community sector, service users, carers and residents
- Moving forward, a transition plan to support implementation of the core offers will be developed comprising:
 - The level of delivery of different elements of the offer i.e. place, borough, ICS
 - Requirements for enablers to deliver at place, borough and ICS level
 - Roadmap for transition
 - Recommendations for commissioning



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A Greener NHS

A Greener NHS



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- The Greener NHS programme was launched in 2020 to take forward sustainability across the NHS and deliver a Net Zero NHS
- The NHS in England is responsible for an estimated 4% of the country's carbon footprint, and 40% of the total public sector footprint
- With over 1.3 million staff and c.£160bn annually, the NHS has a huge opportunity to lead the world in delivering "net zero" healthcare

A Greener NCL



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- Primary care programme to raise awareness and establish an inhaler switching incentive
- Great Ormond Street Hospital - first London hospital to declare a climate and health emergency
- 25% of our trusts have switched to renewable energy
- First Greener NCL Programme Board on 20 September 2021 - action in line with COP26
- 25% of trusts only use recycled papers for all work
- One trust has a refurbishment and reuse scheme and five others working on establishing one
- Trusts to have Green Plans approved by January 2022
- Integrated Care System (ICS) to have plan in place by March 2022



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Looking ahead to our future plans and priorities

Frances O'Callaghan
Accountable Officer

Integration and innovation: working together to improve health and social care for all



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- Integrated Care Systems (ICSs) will become statutory organisations and will be responsible for strategic commissioning, with a financial allocation set by NHS England
- Services will continue to be coordinated and delivered at place level
- NHS providers will work together in Provider Collaboratives and organisations across health and care sector will have a duty to collaborate
- Population health is at the heart of these proposals – enabled to work more flexibly with longer term contracts, rather than focused on levels of activity
- There will be reduced bureaucracy across the system to remove transactional barriers to collaborative working

Our journey towards an ICS

- A track record of close working between the CCG, councils, NHS providers, general practice, voluntary and community organisations
- Continued progress towards a more strategic approach to health commissioning and beginning a strategic reviews of services across NCL
- Our borough partnerships' continued work on population health and health inequalities. Five borough partnerships support working at a 'place' level, with a focus on tackling health inequalities – supported by 32 thriving primary care networks
- The core purpose of forming Integrated Care Systems is to:
 - Improve outcomes in population health and healthcare
 - tackle inequalities in outcomes, experience and access
 - enhance productivity and value for money
 - help the NHS to support broader social and economic development

Our vision for an ICS in NCL

We want to enable our residents to Start Well, Live Well and Age Well

We asked our residents what Integrated Care means for them; and this is what they told us...



Clinical leadership at the heart of the ICS



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Future clinical leadership

- Clinical leadership will remain at the centre of the NCL ICS - at system, borough and neighbourhood level
- Must reflect the multidisciplinary nature of an ICS, and the diversity of our population
- Continued need for primary care clinical leadership
- Setting objectives for effective partnership working between clinical and professional leaders, officers and system partners to provide high quality health and care for NCL patients and residents

Our clinical workforce

- COVID has made us think and act in a more integrated way, aiming to deliver the best care for our population
- Development of the North Central London ICS will build on the good work done to support staff throughout the pandemic
- We are looking at the possibility of having some NHS staff based across multiple sites, to manage the demand on the system
- Working together offers the opportunity to reduce duplication, learn best practice and learn from / teach each other

Working like an ICS in 2020/21

- 2020 informally brought partners together to think and act more like system, aiming to deliver the best and seamless care for our population through the pandemic
- Built stronger partnerships, relationships, and new ways of working as a system across social, primary and secondary care
- We have started focusing work on a number of areas:
 - Working collaboratively to tackle challenges / find solutions to meet needs of local people
 - 5 Borough Partnerships focused on out of hospital services based on population needs.
 - Supporting the development of Primary Care Networks
 - Ensuring resident voice is heard at all levels of work
- COVID vaccine programme – use of data to underpin our system response, boroughs used local know-how to meet local needs; neighbourhood pharmacies and PCNs key to delivering the vaccine to all

What will the ICS mean for residents?

How integrated care can help

- ✓ Clearer information about local services and how to use them will be available to help residents access the right support
- ✓ Better access to mental health care, with residents given more support to find the help they need.
- ✓ Patients ready to leave hospital will be discharged, through hospitals, community services and social care working together
- ✓ Ensuring all people have their mental health care needs met, and providing interim support for when people are on waiting lists for complex care treatment
- ✓ Our Integrated Care System can not just focus on how healthcare services operate. Evidence shows that as little as 10% of a population's health and wellbeing is linked to access to healthcare. Therefore we need to work with partners to look at the bigger picture, including:



Fulfilling work



Education and skills



Our surroundings



The food we eat



Money and resources



Transport



Housing



The support of family,
friends and communities



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Accounts for 2020/21

Simon Goodwin
Chief Finance Officer

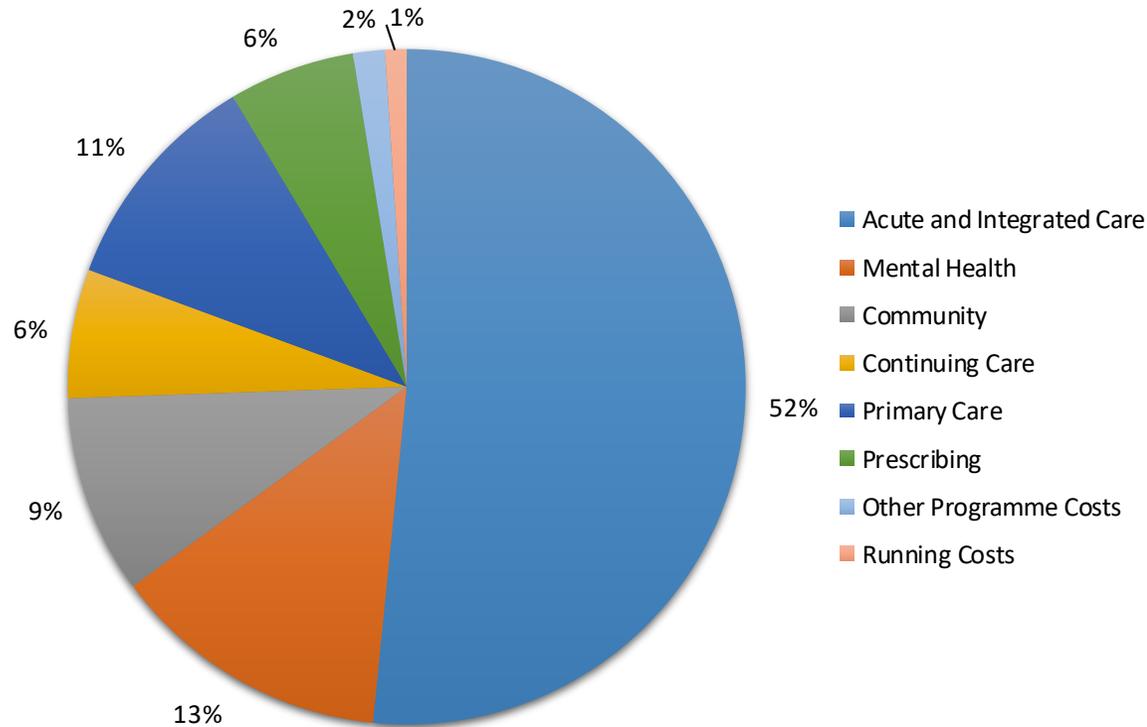
Financial Performance 2020/21

- North Central London CCG operated under the unprecedented impact of the national Coronavirus pandemic in 2020/21. The CCG's funding was set by NHS England to enable the CCG to implement additional measures to respond to COVID-19.
- The CCG worked within the financial allocations set by NHS England and delivered a surplus of £0.4m for 2020/21 against a planned deficit of £6.3m.
- The spend on the administration function of the organisation in 2020/21 was £29.7m which is within the planned spending target.
- The CCG agreed and delivered a £2.8m System efficiency plan(SEP) target for 2020/21.

	Plan	Actual	Achieved
Overall spending does not exceed the CCG allocation	£2,895m	£2,894m	Yes
To stay within plan and deliver a required deficit	£6.3m deficit	£0.4m surplus	Yes
To meet our running cost allowance	£29.7m	£29.7m	Yes

How the money was spent

North Central London CCG - Where your money was spent



OUR SPENDING

- Acute health services accounted for £1,493.6m (52%) of spend in 2020/21

OUR SERVICES

- The vast majority of this spend was on the provision of healthcare services at the CCG's four main acute hospitals: Royal Free London NHS Foundation Trust, University College London Hospitals NHS Foundation Trust, North Middlesex University Hospital NHS Trust and Whittington Health NHS Trust

OTHER AREAS

- The CCG spent £1,401.2m (48%) on other services, including £108.6m investment in the Better Care Fund.
- £238.8m on Primary care services for General Practice, including payment of GP contracts, quality and outcomes framework (QOF).
- We have achieved the 2020/21 'Mental Health Investment Standard', and continue with our commitment of ensuring that spending on mental health services is in line with physical health services.

BUDGET (April 2021 to September 2021)

- The CCG has submitted a plan to NHSE/I for 2021/22 for the first half of the year (April 2021 to September 2021), this is in line with planning guidance.
- The CCG plans to breakeven against its allocation for the first half of the year.

LOOKING FORWARD

The key planning principles for the for the second half of the year (October 2021 to March 2022), are set out below (formal planning guidance is yet to be published);

- NHSE/I have nationally calculated the organisational plans for both CCGs and Providers,
- The system will receive funding as determined by NHSE/I, which includes adjusted CCG allocations, system top-ups, and COVID-19 allocations.
- NHS Provider Block payment arrangements will remain in place for relationships between CCGs and Providers
- Within this, the system is expected to report a balanced position.



Questions



Closing remarks

Dr Jo Sauvage
Chair