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Meeting	Health and Well-Being Board
Date	19th September 2013
<b>Subject</b>	<b>NHS England's "Call to Action" Programme</b>
Report of	Chief Officer, Barnet Clinical Commissioning Group
Summary of item and decision being sought	To update the Health and Well-Being Board on the NHS England's "Call to Action" programme and Barnet CCG's plans to engage on the programme locally.

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Officer Contributors	John Morton, Chief Officer, Barnet CCG
Reason for Report	To update the Health and Well-Being Board on the NHS England's "Call to Action" programme and to ask the Health and Well-Being Board if it wants to comment on local engagement plans.
Partnership flexibility being exercised	N/A
Wards Affected	All
Enclosures	Apendix A - Background Paper Call to Action
Contact for further information	John Morton, Chief Officer, Barnet CCG, <a href="mailto:john.morton@barnetccg.nhs.uk">john.morton@barnetccg.nhs.uk</a> , 0203 688 1793

## **1. RECOMMENDATION**

- 1.1 That the Health and Well-Being Board comments on the proposed local response to NHS England's "Call to Action" Programme.

## **2. RELEVANT PREVIOUS DISCUSSIONS AND WHERE HELD**

- 2.1 NHS England's "Call to Action" programme is a national engagement exercise. All national partners below were signatories to the "Call to Action" document and have committed to preserving the values that underpin the NHS and supporting the development of locally-led responses:

- NHS Commissioning Assembly
- Monitor
- Public Health England
- Care Quality Commission
- NHS Trust Development Authority
- NHS Higher Education England
- National Institute of Health and Care Excellence
- Health and Social Care Information Centre
- Local Government Association

## **3. LINK AND IMPLICATIONS FOR STRATEGIC PARTNERSHIP-WIDE GOALS (SUSTAINABLE COMMUNITY STRATEGY; HEALTH AND WELL-BEING STRATEGY STRATEGY; COMMISSIONING STRATEGIES)**

- 3.1 This is a strategic forward look and this will inform future goals rather than impact on existing activity however it would be anticipated there will be strong alignment between existing and future plans.

## **4. NEEDS ASSESSMENT AND EQUALITIES IMPLICATIONS**

- 4.1 The proposal will engage the public on the challenges in the national and local health economy, set in the context of Barnet CCG's Recovery Plan.

## **5. RISK MANAGEMENT**

- 5.1 NHS England's "Call to Action" programme team will provide strategic advice, support and materials for local engagement.

## **6. LEGAL POWERS AND IMPLICATIONS**

- 6.1 Not applicable.

## **7. USE OF RESOURCES IMPLICATIONS- FINANCE, STAFFING, IT ETC**

- 7.1 Not applicable.

## **8. COMMUNICATION AND ENGAGEMENT WITH USERS AND STAKEHOLDERS**

- 8.1 Two public engagement events are planned for 1 October 2013 (11.00 – 1.00 at St Paul’s Hall, Long Lane, N3, and 7.00 – 8.30pm at Hendon Town Hall) to initiate a conversation on the national context and local strategic challenges.
- 8.2 An engagement booklet and feedback form is being developed and will be available at local events and on the NHS England website. The feedback form will weave in central questions proposed in a “Call to Action”:
- How does NHS England release money from acute services to invest more in prevention, primary care and other community services?
  - How does NHS England encourage people to take more responsibility for their health and put them in control of their own care?
  - How does NHS England develop services that are genuinely centred on patients and not organisations?
  - How does NHS England speed up centralisation of services where clinical evidence supports the benefits?
  - How does NHS England use technology to deliver better outcomes and better value?
  - What are the main barriers to local service transformation and what national solutions would address these?
- 8.3 To support local debate, NHS England is developing a series of products for localities to use as they see fit, fully involving their communities, voluntary sector organisations, staff and providers. The CCG will utilise these and promote national events, where relevant.
- 8.4 The engagement period is planned to last six-weeks and will inform the CCG’s 2014-15 planning round and development of five year strategic plans.

## **9. ENGAGEMENT AND INVOLVEMENT WITH PROVIDERS**

- 9.1 Barnet CCG will continue to work with NHS England to ensure local engagement is aligned to the national process.

## **10. DETAILS**

- 10.1 NHS England’s “Call to Action” programme aims to:
- Build public awareness on the challenges in the “Call to Action” document published on 11<sup>th</sup> July 2013 and other more localised challenges as identified by commissioners;
  - Generate a broadly consistent debate with the public, staff and stakeholders about how the NHS could meet these challenges, the priorities and the trade-offs this will require;
  - Gather feedback and insights to inform future strategies and commissioning plans (for CCGs and for direct commissioning);
  - Support the creation of public legitimacy for future commissioning decisions;
  - Create a platform for future transformational change; and
  - Include these transformational change plans within a five year strategic plan, submitted as part of the planning round for 2014/15.
- 10.2 The programme has identified seven key strategy work streams to provide the strategic framework for developing excellent local and national strategic plans that will deliver a sustainable NHS for the future.

### **1. The Case for Change**

2. The Call to Action
3. Future scenarios
4. Specialised services commissioning
5. A strategic framework for Primary care commissioning
6. Transparency & public participation
7. Tools, levers and incentives

10.3 A “Call to Action” will be delivered through four strands nationally:

Title	Summary	Cascade	Dates	Output
Local activity led by CCGs, area teams & HWBs;	Engagement activity (e.g. events) with local partners, staff, patients and the public on the national context and local strategic challenges  Generating feedback from public engagement and work with local partners to inform commissioning plans	Through calendars of local events developed by CCGs and area teams, and supporting local comms activity  Through national and local engagement materials	Aug - Nov	Local feedback to inform 14-15 planning round and development of 5 year strategic plans
Resources	Commissioning, creating and publishing research, case studies and toolkits to help stimulate local debate  An integrated planning template including strategic plan requirements	Through products issued for use locally during the main campaign phase  Through NHS planning framework guidance	Aug - Nov	To inform 14-15 planning round and strategic plans
National engagement	Co-ordinating five national events that rotate across England	Through a national calendar of events and supporting comms	Sept - Dec	To build momentum and generate approaches for strategy and planning
A digital platform	A website to support the campaign	Website publicised through comms and engagement activity	July - Dec	Website

10.4 A “Call to Action” launched nationally on 11<sup>th</sup> July 2013, setting out current issues, identifying future challenges and establishing what a ‘do nothing’ scenario would look like in funding terms. This provided a backdrop for a nationwide engagement exercise, to

begin a public debate on the difficult questions, and to seek ideas and feedback that would be used as the basis for developing and agreeing future commissioning plans and five year strategic plans. Requests for co-design partners issued through Leadership Forum and Commissioning Assembly. These would help identify and develop supporting material. Teleconferences held with regions and area teams to share progress and next steps, and to request feedback and information on planned schedule of autumn activity.

10.5 In August, the plans for the programme are as follows:

- Co-design events held to share and develop further draft material re a “Call to Action”
- Requests to share details of local events cascaded via Area Teams so NHS England can build a live calendar of events to share with each other
- Engagement themes developed to help drive momentum and synchronise local and national conversations

10.6 It is important that localities (CCGs, NHS England area teams and Health and Well-Being Boards) take forward the debate with communities – so that discussions and decisions are made as close to patients as possible, and that the commissioning plans and strategies that emerge reflect local priorities. To support this debate, a series of products will be available for localities to use as they see fit, fully involving their communities, voluntary sector organisations, staff and providers. The local debate will lead to five year strategies being developed through 2014/15 strategic & operational planning.

10.7 The engagement themes of the “Call to Action” programme have been developed to maintain momentum and link the strategy work streams with the domain visions. During each month, various debates, events and material will be available to support discussions at all levels. Local teams will already have engagement plans in place and should therefore consider the engagement themes complementary to existing engagement plans.

- **Prevention**  
How can NHS England work together to prevent ill health and treat disease quickly?
- **Future Scenarios**  
(This will be a programme of stakeholder rather than a public engagement theme)
- **Valuing mental and physical health**  
How can NHS England ensure mental and physical health are valued equally?
- **Patients in control**  
How can NHS England support patients being in control of their health care
- **Well co-ordinated care**  
How can NHS England develop services centred on patients not organisations?
- **Learning from the best**  
How does NHS England identify, learn from and implement good practice in health?

10.8 The “Call to Action” is framed by the national context but informed by local priorities and challenges. It is designed so CCGs and area teams, in partnership with Health and Well-Being Boards, can ask the questions that will drive the development of the local commissioning response. There will also be consistent themes across the country. NHS England proposes 6 strategic questions, that they will ask through national activity, but which can also be weaved into local public engagement:

1. How does NHS England release money from acute services to invest more in prevention, primary care and other community services?
2. How does NHS England encourage people to take more responsibility for their health and put them in control of their own care?
3. How does NHS England develop services that are genuinely centred on patients and not organisations?
4. How does NHS England speed up centralisation of services where clinical evidence supports the benefits?
5. How does NHS England use technology to deliver better outcomes and better value?
6. What are the main barriers to local service transformation and what national solutions would address these?

These questions will need to be tailored in a way that is meaningful and resonates with communities, and generates useful feedback. NHS England would welcome views on the questions above.

- 10.9 This programme of work will take place alongside the Priorities and Spending Review Programme led by Barnet Council, and steps will be taken locally to ensure that these discussions are aligned. The Priorities and Spending Review will, like the “Call to Action” Programme, develop a set of proposals which will set out how the Council can transform its services to ensure they are sustainable over the course of the decade, in the face of continued austerity. The Priorities and Spending Review will be considering a number of similar questions to those outlined above in order to develop its proposals. It will be important that the Health and Well-Being Board support linkages to be made between the “Call to Action” and Priorities and Spending Review Programmes, to ensure that local service transformation planning across health and social care is sufficiently joined-up.
- 10.10 NHS England, London Region has launched a programme of work on “Call to Action” with the following aims:
- To provide linkage and input to the national programme
  - To provide coordination of “Call to Action” engagement across London
  - To communicate with and engage stakeholders at a London wide level
  - To support CCGs in their local engagement activities
  - To develop a London wide Case for Change
  - To coordinate a series of pan-London engagement events across London to build on the local engagement carried out by CCGs

In order to do this the programme has been split into three phases:

**Phase 1 (July – September)**

Establish programme structure, develop resources and produce Case for Change

**Phase 2 (October – December)**

Support local engagement, collate and analyse information from engagement across London, provide initial outputs to support development of strategic plans

**Phase 3 (Jan – March)**

Agree key themes from local engagement, carry out pan-London engagement, provide outputs to support development of operating plans

The high level timeline is provided in section 11.0 Background papers

- 10.11 The following supporting resources will be made available by the programme:

Resources	Provisional release date
Start pack for CCG engagement	Week Commencing 2nd September
London Engagement plan	Week Commencing 2nd September
Full CCG support packs, including: <ul style="list-style-type: none"> <li>National Call to Action material</li> <li>CCG specific data pack</li> <li>Engagement framework</li> <li>Template for collection of engagement outputs</li> </ul>	Week Commencing 30th September
London financial modelling and scenarios	TBC
Case for Change for London	Week Commencing 30th September
Case for Change for Primary Care in London	October
Case for Change for Integrated Care in London	TBC
Report on collated London engagement	December

NHS England, London Region, have produced a pack that will be shared shortly. The below is a summary of the range of support available:

Face to face engagement	
<ul style="list-style-type: none"> <li>Principles of engagement</li> <li>Sample event outline</li> <li>Sample case studies</li> <li>Participation guide</li> </ul>	<ul style="list-style-type: none"> <li>How to run focus groups</li> <li>Recruiting representatives</li> <li>Template for representative application form</li> <li>Template representative role description</li> </ul>
Participation recourse (online from 25 <sup>th</sup> September)	
Using Digital Media	Recording Activity
<ul style="list-style-type: none"> <li>Using My Health London</li> <li>Guide to dialogue apps (free recourse)</li> <li>Guide to citizen space (free survey resource)</li> </ul>	<ul style="list-style-type: none"> <li>Calendar for events</li> <li>Template for recording themes</li> </ul>

10.12 There is a very compelling case that the NHS in London needs radical reform in the next few years. Communications activity will be designed to trigger debate amongst NHS stakeholders, commentators, and the public about solutions. The London case for change will provide stimulus for conversations with the media, MPs, voluntary sector, NHS leaders, and clinicians.

Key dates:

- September 2013 – pitch-rolling and planning
- October 2013 – case for change launch, leadership events, briefings
- Late/October – November 2013 – primary care, integrated care, cancer focus
- NHS England is looking for ideas for stories, event opportunities, social media activity etc. all welcome as part of pan-London debate

10.13 In summary, CCGs should be preparing themselves for engagement and planning for the following:

- Raising awareness with Health and Well-Being Boards, partners, staff etc.
- Booking events and making use of engagement opportunities
- Informing London Region of dates and details of engagement events
- Developing commissioning intentions for 2014/15 and 2015/16
- Developing plans for how to produce 3 to 5 year strategies

## **11 BACKGROUND PAPERS**

11.1 A Call to Action – August update