

## Item 9.1

### **PLANNING & COMMISSIONING COMMITTEE MEETING HELD ON 4 MAY 2018 CHAIR'S UPDATE REPORT**

#### **INTRODUCTION**

This is the Chair's report to the Clinical Commissioning Group Board following the May 2018 Planning and Commissioning Committee.

#### **6.1 PUBLIC HEALTH WORK PLAN – OUTCOME FRAMEWORK**

The outcome of the public health framework was as follows:

- There would be high level indicators for each outcome
- It would be separate to 'performance management'
- Part of the JSNA
- Strategic and population-focussed
- Excludes outcome indicators that any one service/organisation was wholly/primarily accountable for, or are covered elsewhere

The outcome framework would be used to view the direction of travel across the breadth of the high level outcomes and to provide a detailed look at what was being done in relation to specific outcomes.

The Sentinel Outcome indicators would indicate the direction of travel of the overall outcome.

Workshops had been undertaken to update colleagues from various organisations of the Place Based Plan were feedback had been collated and would be cascaded prior to the final framework being taken to the June Place Based Plan Strategic Partnership Board.

It was requested that a mini workshop be undertaken at the June 2018 Committee to ensure the maximum number of colleagues are informed.

#### **6.5 PROGRAMME HIGHLIGHT REPORTS BY EXCEPTION**

##### **Children Young People and Maternity (CYPM)**

- The SEND Written Statement of Action (WSA) was resubmitted on 01.05.2018 to HMIC, Ofsted and CQC with an expected outcome within 10 working days. The SEND Accountability Forum was responsible for taking forward the WSA and SEND Improvement Action Plan and meets monthly.

The DMO role had been strengthened through the Community Paediatric Medical Service and the DCO commences in post in the CCG 14 May. This would provide additional strategic clinical capacity across the health family.

The national pilot for SEND Tribunal (Single Route of Redress) commenced 3 April 2018 for 2 years. Parents appealing against education assessment and provision now includes health and social care.

- Speech and Language Service. The CCG had additional resource to take forward the requirements for service improvement and remodelling that would address the waiting times and ensure a long-term sustainable model. There would be an application to the June prioritisation panel for non-recurrent funding supported by a clear improvement plan that would address the waiting list to ensure the service was 18 week compliant within a specified timescale.
- Sensory Processing assessment and support. There was a current gap in service provision. The integrated project group (including parent representation) was developing a service model with the intention to include sensory processing assessment that was integrated to other universal and specialist assessments wherever possible with clear criteria for specialist assessment. Initial plans were for the model to be tested over an agreed period from Autumn 2018 that would further define capacity and demand and support plans for a more sustainable model going forward.
- Hull Maternity Voices Partnership (MVP). A successful inaugural meeting took place on 25.04.2018 and was chaired by a service user. The MVP had agreed the outline of the annual work plan that was aligned to the Humber Coast and Vale Local Maternity System delivery plan and objectives. The CCG was working with maternity provider and service users to establish the requirements for service user engagement, involvement and co-production as required in the national maternity transformation plan.

*V. A. Rawcliffe*

**Vincent Rawcliffe**  
**Clinical Chair, Planning and Commissioning Committee**  
**May 2018**