

**NHS DORSET CLINICAL COMMISSIONING GROUP
GOVERNING BODY MEETING
ORGANISATIONAL DEVELOPMENT STRATEGY 2012-2017
UPDATE**

Date of the meeting	15/01/2014
Author	E Parson, Head of Workforce
Sponsoring GB member	T Goodson, Chief Officer and Dr A Rutland, Poole Bay Locality Chair
Purpose of report	To provide an update to the Governing Body on the delivery against NHS Dorset Clinical Commissioning Group's Organisational Development Strategy for 2012-2017.
Recommendation	The Governing Body is asked to Note the report.
Resource implications	Within Budget
Link to strategic principles	<ul style="list-style-type: none"> • Services designed around patients • Preventing ill health and inequalities • Sustainable healthcare services • Care closer to home
Risk assurance Impact on high level risks	None
Outcome of equality impact assessment process	N/A
Actions to address impact	N/A
Legal implications	None
Freedom of information	Unrestricted.
Stakeholder engagement	Staff and members have been engaged through specific development and engagement events, communication bulletins and local team meetings.
Reason for inclusion in Part 2	N/A
Previous Committees/Governing Body	None.

1. Introduction

- 1.1 This report provides an update on the delivery against NHS Dorset Clinical Commissioning Group's (CCGs) Organisational Development Strategy for 2012-2017.
- 1.2 The report is set out in line with the Organisational Development themes and objectives which detail delivery against of the authorisation programme in 2012/2013, as well as the actions and progress to date in 2013/2014.

2. Report

- 2.1 The Shadow CCG Board approved its Organisational Development Strategy in June 2012. This report reflects the broad scope of the plan over the past 18 months, noting a large element of delivery.
- 2.2 The CCGs current review of its strategy, set in the context of the Commissioners Clinical Services Review and the development of the Better Care fund with local government from 2015/2016, will require a further revision to the CCGs Organisational Development planning. Work is in progress to achieve this concurrent with development of the CCG strategy.
- 2.3 The notable areas of delivery identified in this report include;
 - Established clinical leaders across Locality and Clinical Commissioning Programmes structures;
 - Established clinical engagement and development mechanisms including leadership development;
 - Developed succession planning for clinical roles;
 - A robust and sustainable commissioning support function;
 - Successful authorisation underpinned the development that was put in place.
- 2.4 The notable areas for further delivery identified in this report include;
 - A continued focus on the development of the CCGs culture, including further leadership development;
 - A continued focus on engagement internally with staff and clinicians, and more widely through the strengthening of public engagement through locality management structures in concert with the public narrative of system change.

3. Conclusion

- 3.1 Governing Body members are asked to note the progress on the delivery of the Organisational Strategy set out in Appendix 1.

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Date : 16 December 2013

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Appendices

Appendix 1

**Delivery against the Organisational
Development Strategy 2012-2017**

Appendix 1: Delivery against the Organisational Development Strategy 2012-2017

Theme 1: Governance, Structures and Processes

Objectives		
<ul style="list-style-type: none"> Establishment of shadow board and governance arrangements; Successful achievement of authorisation leading to full responsibility and accountability (NHS Dorset Clinical Commissioning Group fully authorised as a statutory organisation by April 2013). 		
Key Deliverables	Delivered	In Progress
<i>Confirmation of GP Locality Leads and Deputy Locality Leads, including capacity and capability to undertake this role on behalf of the locality and the Clinical Commissioning Group.</i>	<p>Clinicians are well established in each locality providing leadership at a Lead and Deputy Lead level and with succession planning taking place.</p> <p>Leadership Development has been provided and is available in 2014 for new Leads.</p>	
<i>Development of an effective structure for NHS Dorset Clinical Commissioning Group, including the appointment of members and lay members in line with national guidance.</i>	<p>Well defined and transparent structures for the organisation are established with clear supporting governance arrangements in place.</p> <p>Members and lay members have been appointed to cover all governance meetings and Clinical programmes.</p> <p>The summary commissioning support staffing structure is available on the intranet and updated on a monthly basis.</p>	Clinical member organisational structures are to be developed and available in 2014 including details of portfolios.
<i>Design and roll out of development events for the governing body to include</i>	A regular programme of development is in place, including;	The Clinical Education strategy is being revised in line with the organisation's

<i>strategy development aligned to aim, missions and values.</i>	<ul style="list-style-type: none"> • Governing Body and extending Clinical/ Support Leads development • Membership engagement sessions, which take place on a quarterly basis. 	programme of development and to address member development needs as commissioners.
<i>Identification of clinical and management domain leads, with accountability to the Commissioning Support Steering Group.</i>	<p>Domain Leads were identified through the transition.</p> <p>The organisation has now aligned its commissioning support to the delivery of the 7 clinical commissioning programmes.</p>	The focus of the commissioning support steering group is being reviewed to take account of assurance requirements, and will report through the Audit and Quality Committee.
<i>Engagement of localities and practices in the constitution arrangements of the Clinical Commissioning Group through Learning events and briefing sessions.</i>	<p>Engagement of localities and practices is organised via membership engagement events, communication bulletins and through the commissioning support locality teams.</p> <p>The Service Delivery and Engagement and Development Directorates are further aligned to locality based work.</p>	
<i>Development and implementation of appointment process.</i>	The development of the clinical appointment process has been set up and is available on the CCG intranet.	These will be continually reviewed to ensure they are fit for purpose and developing guidance.
<i>Development of locality arrangements and structures.</i>	Clinical locality arrangements and structures are in place, with aligned commissioning support locality teams.	
<i>Understanding of its Public Sector Equality Duty under the Equality Act 2012 and a plan to outline the delivery of this duty as part of an Equality and Diversity Strategy.</i>	The shadow CCG adopted equality objectives in line with the equality delivery system as part of its Equality Diversity Strategy.	A summary of activity that demonstrates the CCG's compliance with its Public Sector Equality Duty is being drawn together for publication by the end of January 2014.
<i>Agree internal structure for management</i>	This is covered under the CCG's	Licence exists to revise the CCG

<i>of discharge and execution.</i>	Constitution.	Constitution on an annual basis as advised by the Board Secretary.
<i>Agree Terms of Reference for all governing bodies.</i>	This is covered under the CCG's Constitution. Terms of reference have been established for all governing body meetings.	Licence exists to revise the CCG Constitution on an annual basis as advised by the Board Secretary.
<i>Agree Scheme of Delegation.</i>	This is covered under the CCG's Constitution. The scheme of delegation has been established and is in place for the organisation.	Licence exists to revise the CCG Constitution on an annual basis as advised by the Board Secretary.

Theme 2: Locality and Commissioning Development

Objectives		
<ul style="list-style-type: none"> • Successful achievement of Domain 1 - Strong Clinical and Multi-Professional Focus and Locality Development (NHS Dorset Clinical Commissioning Group fully authorised as a statutory organisation by April 2013); • Successful achievement of Domain 3 - Clear and Credible Commissioning Plan Development (NHS Dorset Clinical Commissioning Group fully authorised as a statutory organisation by April 2013). 		
Key Deliverables	Delivered	In Progress
Locality Development		
<i>Development of locality structures and functions, including principles and processes.</i>	Clinical locality arrangements and structures are now in place, with aligned commissioning support locality teams.	
<i>Confirmation of representation, contribution and influence at Health and Well Being Board, CCG Board, Clinical Commissioning Programme.</i>	Clinical engagement is in place across the Health and Well Being Boards for Dorset and Bournemouth and Poole, CCG Board, Clinical Commissioning Programme.	The CCG will continue to develop its intelligence gathering to capitalise on the relationships with external partners to inform its commissioning strategy and planning.
<i>Development of capacity and capability of the locality teams to develop and deliver commissioning plans with a clear</i>	A regular programme of development is in place, including; <ul style="list-style-type: none"> • Governing Body and extending 	

<p><i>focus on outcomes and quality (protected time for locality teams to identify and shape their learning and leadership needs).</i></p>	<p>Clinical Leads development</p> <ul style="list-style-type: none"> • Membership engagement sessions, which take place on a quarterly basis • Protected Learning time for practices for practices which has been widely welcomed • A 'Hot Topics' programme which was attended by over 90 GPs. 	
<p><i>Ensure clinical leadership and engagement, as appropriate to 'add value' and lead transformation and transactional change, with a key focus on continual quality improvement across all commissioned services and within primary care.</i></p>	<p>A regular programme of development is in place, including;</p> <ul style="list-style-type: none"> • Governing Body and extending Clinical Leads development • Membership engagement sessions, which take place on a quarterly basis • Protected Learning time for practices which has been widely welcomed • A 'Hot Topics' programme which was attended by over 90 GPs. 	
<p><i>Develop expertise and knowledge to enable the prioritisation of clinical improvements, based on clear rationale, such as Joint Strategic Needs Assessment and patient and carers experience, enabling robust decision making with an emphasis on benefits realisation and sustainable outcomes.</i></p>	<p>The CCG strategy and Clinical Commissioning Plan priorities have been informed by the JSNA, pathway needs assessments and patient and public views.</p> <p>As part of the 2013/14 Annual Planning round CCG Clinical Members undertook a priority setting process using pairwise comparison which took into account cost and outcomes benefits and links to other priorities e.g. National, Health and Wellbeing Strategies etc</p>	<p>The Strategy and Planning team with colleagues will be developing a systematic tool to bring together all of the existing information which informs our priorities and plans.</p> <p>They will also be reviewing and developing a priority setting policy for the CCG.</p>

<p><i>Identification of robust systems and processes to ensure increasingly timely information and relevant incentives to drive continual improvements in clinical quality (both within constituent practices and the services which are commissioned).</i></p>	<p>The CCGs authorisation report notes clear plans for ongoing patient and public involvement and systematic processes for capturing patient feedback at practice level.</p> <p>The CCG has a listening approach and responds to feedback from stakeholders and patients, for example, in determining the CCG's vision and values and also in commissioning services.</p> <p>There are clear arrangements for handling complaints and for communicating actions taken.</p>	<p>The CCG has implemented CQUINS with all providers and the Quality Premium scheme. The priority incentives within both schemes align with the aim to maximise quality improvements across the health system. In addition the Quality team have set up a 'niggles' system and are regularly reviewing the results of the friends and family test.</p>
<p><i>Ensure that the right systems, processes and behaviours are developed and sustained to ensure clinicians are involved in and understand their local service and economic context to enable them to influence, engage and collaborate as appropriate with stakeholders in respect of pathway developments.</i></p>	<p>A regular programme of development is in place, including;</p> <ul style="list-style-type: none"> • Governing Body and extending Clinical Leads development • Membership engagement sessions, which take place on a quarterly basis • Protected Learning time for practices which has been widely welcomed • A 'Hot Topics' programme which was attended by over 90 GPs. 	<p>We will continue to improve links between localities and Clinical Commissioning Programmes through the named Clinical Leads, clinical development and engagement events.</p>
<p><i>Ensure that there is a robust process in place for local clinicians working in collaboration across the locality and wider health community to develop and implement innovative proposals leading to sustainable service delivery.</i></p>	<p>As clinically led organisation the CCG has GP (clinical) representation on the following:</p> <ul style="list-style-type: none"> • Dorset and Bournemouth & Poole Health and Wellbeing Boards; • GP lead and localities represented on CCPs; 	<p>Strengthen the links between localities and Clinical Commissioning Programmes as well as wider health system.</p>

	<ul style="list-style-type: none"> • The CCG is a member of Dorset Innovation Group; • Contract monitoring and negotiation meetings; • The 'Better Together' for Health and Social Care Integration Transformation Programme. 	
Commissioning Plan Development		
<i>Ensure plans for development of 2013/2014 commissioning plans are aligned with Health and Well Being Board requirements.</i>	A strategy and development team informs and guides commissioning plan development.	The current strategy refresh is scheduled for discussion at the 2 x Health and Wellbeing Boards in early 2014.
<i>Develop proposals focussing on clinical added value in relation to commissioning plan developments and implementation.</i>	A strategy and development team ensures key people across the CCG and our external partners are involved in the development of commissioning plans.	
<i>Develop and agree relationships and collaboration between Clinical Commissioning Programmes and localities.</i>	The commissioning support Locality teams are aligned to the Clinical Commissioning Programmes through internal line management arrangements. The Clinical Commissioning Committee provides a forum for collaboration between localities and the Clinical Commissioning Programmes.	Locality Chair representatives are currently being identified to represent 3 x clusters on the Clinical Commissioning Committee.

Theme 3: Leadership Development

Objectives		
<ul style="list-style-type: none"> • Successful achievement of the 'Great Leaders' domain (NHS Dorset Clinical Commissioning Board fully authorised as a statutory organisation by April 2013); • Develop the capability of the Governing Body to be intelligent clients, ensuring that their commissioning support needs and expectations are met; • Ensure that the Clinical Commissioning Group structures, which include commissioning support are fit for purpose, demonstrating that the organisation has the capacity and capability to meet its statutory obligations and achieve its vision, mission and values. 		
Key Deliverables	Delivered	In Progress
Leadership Domain		
<i>Development and roll out of the Clinical Commissioning Group Board and Individual Development Programmes.</i>	<p>Extensive leadership development is in place including;</p> <ul style="list-style-type: none"> • Leadership Development for Clinicians, Directors and Deputy Directors • An Executive Development programme • A number of local team development programmes • The Wessex Leadership Academy 	Leadership Development continues to be a priority and delivered through the afore mentioned programmes.
<i>Roll out of Learning Events and Protected Learning time for practices for practices across Dorset.</i>	<p>A regular programme of development is in place, including;</p> <ul style="list-style-type: none"> • Governing Body and extending Clinical Leads development • Membership engagement sessions, which take place on a quarterly basis • Protected Learning time for practices which has been widely welcomed 	The Clinical Education strategy is being revised in line with the organisation's programme of development and to address member development needs as commissioners.

	<ul style="list-style-type: none"> • A 'Hot Topics' programme which was attended by over 90 GPs. 	
<i>Undertake a leadership needs analysis linked to specific requirements of the domain.</i>	This work was completed in relation to the CCG's authorisation programme and has informed the development programmes noted.	
<i>Development and roll out of skills development programme for GPs and practice managers.</i>	<p>A regular programme of development is in place, including;</p> <ul style="list-style-type: none"> • Governing Body and extending Clinical Leads development • Membership engagement sessions, which take place on a quarterly basis • Protected Learning time for practices which has been widely welcomed • A 'Hot Topics' programme which was attended by over 90 GPs. 	In line with the revision of the Clinical Education strategy, development for Practice Managers will be considered. There are examples of Practice Managers beginning to be engaged in commissioning development.
<i>Succession Planning – identification of emerging leaders through a range of activities including leadership development and role development opportunities.</i>	Demonstrable succession has taken place in senior clinical roles and the continuing development of commissioning support structures.	
<i>Mentoring and coaching support aligned to development programme.</i>	Delivery has been individual and issue based for some clinical leaders as part of authorisation.	Links are now available for both the Wessex and South West Areas and are to be advertised and promoted in early 2014 for all staff and clinicians.
<i>Development and implementation of proposals for the Clinical Commissioning Group to establish a leadership role in the commissioning and co-ordination of education for primary care aligned to pathway developments.</i>	A GP Education Lead is in place to support members and their development through links with the Wessex Local Education Training Board.	

Commissioning Support		
<i>Roll out of staff support framework for PCT staff.</i>	HR staff, local Union Representatives, Occupational Health and the Employee Assistance Programme supported staff with the PCT transition to CCG.	
<i>Identification and alignment of management and clinical capacity to work alongside the shadow Clinical Commissioning Group through corporate and locality working arrangements.</i>	Domain Leads were identified through the transition. The organisation has now aligned its commissioning support to the delivery of the 7 clinical commissioning programmes.	
<i>Undertake an organisational needs analysis aligned to the skills identified in the commissioning support prospectus, leading to the development and roll out of a 'commissioning skills development programme'.</i>	A Training Needs Analysis for commissioning support staff has been developed and presented to Directors. Delivery against a number of development priorities has been achieved.	
<i>Development of detailed and meaningful KPIs aligned to the functions detailed in the prospectus.</i>	Initial KPIs for commissioning support were identified as part of the authorisation programme. Reporting on these KPIs while undertaken, is accepted as requiring further development.	Greater emphasis is required to ensure that the KPIs are a robust means of assuring the quality of commissioning support. This will form part of the commissioning support assurance programme, reporting to Audit and Quality.

Theme 4: Values, Behaviours and Relationships

Objectives
<ul style="list-style-type: none"> • Roll out of Clinical Commissioning Group Board Development Programme; • Alignment of Locality Development Plans; • Ensure the effective achievement of the Commissioning Support Prospectus for Dorset.

Key Deliverables	Delivered	In Progress
<i>Reputation management included as a key component in the Clinical Commissioning Group Board Development Programme.</i>	Incorporated as part of the authorisation programme in early 2013.	The suite of development and engagement events, commissioning bulletins ensure the clinical leaders are informed of the key issues in order to manage local messages.
<i>Director/Deputy Director Development events to understand shared vision and compelling messages for cascade to the wider organisation and health Community.</i>	A specific forum takes place on a bi-monthly basis, in addition to the development and engagement events.	
<i>Strengthening of GP locality working arrangements.</i>	Clinical locality arrangements and structures are now in place, with aligned commissioning support locality teams	A review of the Clinical Commissioning Programme links is planned for early 2014 as part of further strengthening clinical engagement at locality level.

Theme 5: Collaboration and Engagement

Objectives		
<ul style="list-style-type: none"> • Development and implementation of an overarching Communications and Engagement Strategy; • Achievement of the Clinical and Multi-professional Focus and Locality Development and Engagement Domains (NHS Dorset Clinical Commissioning Board fully authorised as a statutory organisation by April 2013); • To work with partners to develop the Health and Well Being Board(s), the JSNA and the Health and Wellbeing strategy; • To ensure the delivery of 2012/13 and 2013/2014 QIPP plans through the Clinical Commissioning Programmes; • To deliver NHS Dorset Clinical Commissioning Group Health Strategy in line with the Health and Wellbeing Strategy; • Effective and supportive feedback from the 360 degree feedback stakeholder process required for authorisation. 		
Key Deliverables	Delivered	In Progress
<i>To ensure the development and implementation of a Communications and Engagement Strategy for NHS Dorset Clinical Commissioning Group.</i>	A Communication and Engagement strategy was approved by the shadow CCG.	

<i>To identify and understand local stakeholders through a stakeholder analysis and the development of effective feedback mechanisms.</i>	A comprehensive report into local stakeholder arrangements including recommendations has been undertaken. Those recommendations have informed the redesign of the communication and engagement team.	
<i>To ensure a productive and effective working relationship exists between the Health and Well Being Board and NHS Dorset Clinical Commissioning Group.</i>	The CCG Chair and lead Clinicians are engaged with Dorset and Bournemouth and Poole Health and Wellbeing Boards.	The CCG will continue to develop its intelligence gathering to capitalise on the relationships with external partners to inform its commissioning strategy and planning.
<i>To ensure key stakeholders are engaged in NHS Dorset Clinical Commissioning Group and understand and support its vision and values, and its priorities for the coming years.</i>	Engagement with key stakeholders took place as part of the CCG authorisation programme. This has been furthered by the large scale engagement events held spring/summer 2013 and latterly by the 'Big Ask' survey of NHS service across Dorset.	The results of the 'Big Ask' are being published in December and are being analysed.
<i>To work in collaboration with relevant provider organisations to ensure an integrated approach to pathway development aligned to QIPP.</i>	We are working in collaboration with provider organisations through the work of the Clinical Commissioning Programmes and pathway development.	
<i>To agree structures for sustainable engagement with stakeholders.</i>	The PCT legacy health forums have provided interim structure to the engagement with stakeholders in 4 hubs across Dorset, and a forum for advising on commissioning progress.	The CCG Health Involvement Network will transfer the legacy health forums and provide a clearer focus on commissioning, and links to locality management will be progressed in early 2014.
<i>To ensure ongoing clinical leadership and engagement through Clinical Commissioning Programmes and other related work programmes, with a focus</i>	Engagement of clinical leaders is organised via membership engagement events, communication bulletins and through the commissioning support	

<p><i>on 'added value'.</i></p>	<p>locality teams.</p> <p>The organisation has now aligned its commissioning support to the delivery of the 7 clinical commissioning programmes.</p>	
<p><i>To ensure clinical input into the Joint Strategic Needs Analysis (JSNA).</i></p>	<p>The CCG strategy and Clinical Commissioning Plan priorities have been informed by the JSNA, pathway needs assessments and patient and public views.</p> <p>As part of the 2013/14 Annual Planning round CCG Clinical Members undertook a priority setting process using pairwise comparison which took into account cost and outcomes benefits and links to other priorities e.g. National, Health and Wellbeing Strategies etc</p>	<p>The Strategy and Planning team with colleagues will be developing a systematic tool to bring together all of the existing information which informs our priorities and plans.</p> <p>They will also be reviewing and developing a priority setting policy for the CCG.</p>
<p><i>To develop effective processes and systems for internal engagement within NHS Dorset Clinical Commissioning Group to ensure ongoing clinical engagement, understanding and support.</i></p>	<p>A regular programme of development is in place, including;</p> <ul style="list-style-type: none"> • Governing Body and extending Clinical Leads development • Membership engagement sessions, which take place on a quarterly basis • Protected Learning time for practices which has been widely welcomed • A 'Hot Topics' programme which was attended by over 90 GPs. 	<p>We will continue to improve links between localities and Clinical Commissioning Programmes through the named Clinical Leads, clinical development and engagement events.</p>

Theme 6: Organisational Change

Objectives		
<ul style="list-style-type: none"> • Formal transfer of commissioning support functions to NHS Dorset Clinical Commissioning Group in line with TUPE by March 2013 • Formal transfer of public health functions in line with TUPE by March 2013 • Formal transfer of relevant functions to other 'receiver' organisations in line with TUPE by March 2013 • Formal transfer of HR/Workforce related policies and procedures (including education and training) with a detailed programme of review post March 2013 		
Key Deliverables	Delivered	In Progress
<i>Implementation of Staff Engagement and Communication Framework (Staff Transition Forum, Staff Support Framework).</i>	<p>During transition, staff engagement and briefing forums were delivered. The CCG continues to engage and communicate with staff through;</p> <ul style="list-style-type: none"> • 2 x full staff events • Staff orientation sessions • Weekly communication bulletins • Monthly Chief Officer briefings • Local team meetings and 1-1s. 	
<i>Establishment of the HR Transition Group to lead the development and implementation of HR Transition Plan.</i>	The HR Transition Group led the staff transition programme as part of the PCT close down and this work was completed with minimum staff, financial and organisational impact.	
<i>Development/alignment of Organisational Change Policies.</i>	Organisational Change and Transition consultation Policies were delivered as part of the authorisation programme.	
<i>Implementation of changes to public health arrangements, including the development and implementation of a</i>	These changes have been implemented and staff transferred to Dorset County Council on behalf of the 3 local	

<i>transition plan.</i>	authorities.	
<i>Implementation of changes to primary care and specialist commissioning arrangements including the development and implementation of a transition plan.</i>	These changes have been implemented and staff transferred to the NHS England Wessex Area Team.	
<i>Formal consultation with staff affected by the proposed changes.</i>	Formal consultation took place with all former PCT staff in line with the HR Transition Framework and notified national guidelines.	
<i>Development of reward and recognition scheme for staff.</i>	The shadow CCG approved its position on pay and reward in line with provisions for senior managers and wider commissioning support staff. The shadow CCG has further developed its reward arrangements for clinical appointments.	The remuneration committee is responsible for maintaining oversight to pay and reward provisions by the CCG. Staff recognition is currently being reviewed as part of our HR Policy review programme.
<i>Undertake a programme of review of all contractual HR policies and develop a prioritisation plan post transfer.</i>		A review of all HR policies is currently underway and will be in place from 1st April 2014, following discussion and agreement with local staff side representatives and approval of Directors group.
<i>Review the statutory and mandatory training matrix to ensure that it is fit for purpose for the CCG and fully demonstrates compliance with safeguarding training requirements.</i>	Statutory and mandatory training requirements are currently being delivered to all staff through e-learning system, supplemented by quarterly training days for clinicians working in commissioning support teams.	The induction is currently being reviewed and a revised programme will be in place by early 2014.