# Leeds Health & Wellbeing Board

Report author: Penny Allison

**Report of:** Penny Allison, Senior Communications and Involvement Manager, NHS West Yorkshire Integrated Care Board (Leeds-based)

Report to: Leeds Health and Wellbeing Board

Date: 27 September 2022

**Subject:** Developing the NHS Leeds CCG Annual Report 2022-23 (Q1)

| Are specific geographical areas affected?                                       | ☐ Yes | ⊠ No |
|---|-------|------|
| If relevant, name(s) of area(s):  |       |      |
| Are there implications for equality and diversity and cohesion and integration? | ☐ Yes | ⊠ No |
| Is the decision eligible for call-In?   | ☐ Yes | ⊠ No |
| Does the report contain confidential or exempt information?                     | ☐ Yes | ⊠ No |
| If relevant, access to information procedure rule number:                       |       |      |
| Appendix number:  |       |      |

# **Summary of main issues**

- 1. Although clinical commissioning groups were abolished and replaced by integrated care boards on 1 July 2022, NHS England requires all former CCGs to produce a final annual report and accounts for their last quarter of operation (1 April 30 June 2022). The reports must follow a prescribed format to a specific timescale.
- 2. One of the statutory requirements for these annual reports is that CCGs review to what extent they have contributed to the local joint health and wellbeing strategy, to include this review in our annual reports and to consult with the Health and Wellbeing Board in preparing them.
- 3. This report outlines the process that has been followed (para 2.5), in line with what has been agreed in previous years, to ensure that this requirement has been met and that board members have been appropriately consulted.

#### Recommendations

The Health and Wellbeing Board is asked to:

- 1 Note the process to develop the NHS Leeds CCG draft annual performance report for Q1 2022-23.
- Note the extent to which NHS Leeds CCG has contributed to the delivery of the Leeds Health and Wellbeing Strategy 2016-2021.
- Note the recording of this acknowledgement in the NHS Leeds CCG's annual report, according to statutory requirement.

# 1 Purpose of this report

1.1 The purpose of this report is for the Health and Wellbeing Board to note the process of developing the NHS Leeds CCG Annual Report 2022-23 (Q1).

# 2 Background information

- 2.1 Although clinical commissioning groups were abolished and replaced by integrated care boards on 1 July 2022, NHS England requires all former CCGs to produce a final annual report and accounts for their last quarter of operation (1 April 30 June 2022). The reports must follow a prescribed format to a specific timescale.
- 2.2 The annual report has three sections:
  - Performance Report, including an overview and detailed analysis
  - Accountability Report, including a corporate governance report, CCG members' report, statement of the Accountable Officer's responsibilities, governance statement and remuneration and staff report
  - Annual Accounts
- 2.3 One of the statutory requirements is for CCGs to review to what extent they have contributed to the local joint health and wellbeing strategy, to include this review in our annual reports and to consult with the Health and Wellbeing Board in preparing them.
- 2.4 To fulfil this requirement, the draft annual report for 2022-23 (Q1) includes a section on 'Delivering the Leeds Health and Wellbeing Strategy 2016-2021' which the Board members have been consulted on.
- 2.5 To ensure we meet NHSE timescales, we have followed this process, in line with what has been agreed for previous years, to ensure that HWB members have been appropriately consulted:
  - 8 September 2022 Executive Member to be briefed on the draft performance report
  - 12-14 September 2022 Health and Wellbeing Board members to receive the draft performance report via email to provide comments/feedback.
  - 27 September 2022 Draft annual performance report to be noted at HWB meeting.
  - 5 October 2022 NHS Leeds CCG's draft annual report to be submitted to NHS England

#### 3 Main issues

- 3.1 NHS Leeds CCG (now the ICB in Leeds) considers effective partnership working to be fundamental to the way we do our business and this is reflected throughout our annual report.
- 3.2 The ICB in Leeds is represented on the Leeds Health and Wellbeing Board. We actively supported the Joint Strategic Assessment (JSA) to identify the current

- health and wellbeing needs of local communities and highlight health inequalities to improve the health of the poorest the fastest.
- 3.3 We consider ourselves to be full partners in commissioning health and care services for the benefit of local people, actively supporting the 12 priority areas of the Leeds Health and Wellbeing Strategy 2016-21.
- 3.4 Members have had the opportunity to contribute to this year's annual report. as outlined in the process for para 2.5.

#### 4. Health and Wellbeing Board governance

# 4.1 Consultation, engagement and hearing citizen voice

4.1.1 All CCG annual reports must demonstrate how they have met their statutory duty to involve the public in our commissioning activity. The guidance, for reference purposes, is as below.

"Please explain how the CCG has discharged its duty under <u>Section 14Z2 of the NHS Act 2006 (as amended 2012)</u> to involve the public (<u>individuals and communities you serve</u>) in commissioning activities and the impact that engagement activity has had. This includes designing and planning, decision-making and proposals for change that will impact on individuals or groups and how health services are provided to them. It is a statutory requirement to demonstrate how this duty has been met in your annual report."

# 4.2 Equality and diversity / cohesion and integration

4.2.1 The annual report includes a contribution from our equality lead demonstrating how the CCG met its duty to the equality, diversity and inclusion agenda. The CCG annual report also demonstrates how the CCG contributed to reducing health inequalities either through the work of the Health and Wellbeing Board or through local schemes, often at neighbourhood level, through its member GP practices.

#### 4.3 Resources and value for money

4.3.1 The CCG annual report will be a published document that provides an open and transparent reflection on our performance over the year. It also offers taxpayers the opportunity to see how we have made use of our publicly-funded resources.

#### 4.4 Legal Implications, access to information and call In

4.4.1 There are no access to information and call-in implications arising from this report.

#### 4.5 Risk management

4.5.1 A risk register is held and regularly monitored by NHS Leeds CCG (now the ICB in Leeds).

#### 5. Conclusions

5.1 The process in developing the NHS Leeds CCG draft annual report for 2022-23 (Q1) aims to ensure that the Leeds Health and Wellbeing Board is engaged in a timely manner and have the opportunity to contribute to this particular statutory requirement as part of the wider prescribed set of guidelines that govern the preparation and presentation of the CCG annual report.

#### 6. Recommendations

- 6.1 The Health and Wellbeing Board is asked to:
  - Note the process to develop the NHS Leeds CCG draft annual report for Q1 2022-23.
  - Note the extent to which NHS Leeds CCG contributed to the delivery of the Leeds Health and Wellbeing Strategy 2016-2021.
  - Note the recording of this acknowledgement in the NHS Leeds CCG's annual reports according to statutory requirement.

# 7. Background documents

7.1 NHS Leeds CCG draft annual performance report 2022-23 (Q1). The CCG's contribution to the Leeds Health and Wellbeing Strategy is described in section 1.2.7

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# Implementing the Leeds Health and Wellbeing Strategy 2016-21

# How does this help reduce health inequalities in Leeds?

The annual report of NHS Leeds CCG will highlight joined up working to reduce health inequalities, outlining plans, targets and achievements.

# How does this help create a high quality health and care system?

The annual report provides a narrative on how NHS Leeds CCG has worked in partnership to help create and sustain a high-quality health and care system.

# How does this help to have a financially sustainable health and care system?

The annual reports outlines how the CCG is working in partnership across the Leeds health and social care economy as part of the wider ICS and Leeds Plan process.

# **Future challenges or opportunities**

N.A

| Priorities of the Leeds Health and Wellbeing Strategy 2016-21 (please tick all that apply to this report) |   |
|---|---|
| A Child Friendly City and the best start in life  | х |
| An Age Friendly City where people age well  | х |
| Strong, engaged and well-connected communities  | х |
| Housing and the environment enable all people of Leeds to be healthy                                      | х |
| A strong economy with quality, local jobs   | х |
| Get more people, more physically active, more often   | х |
| Maximise the benefits of information and technology   | х |
| A stronger focus on prevention  | х |
| Support self-care, with more people managing their own conditions   | х |
| Promote mental and physical health equally  | х |
| A valued, well trained and supported workforce  | х |
| The best care, in the right place, at the right time  | х |