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Kent and Medway
Clinical Commissioning Group

NHS Kent and Medway CCG

Operational business model – developing a system approach

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Introduction– a system focused organisation

As Kent and Medway starts to re-focus on the establishment of an integrated care system (ICS) in a rapidly changing, Covid-impacted environment, this documents lays out the CCG operating business model for the future. A critical focus for the organisation and wider system is the development and strengthening of integrated care partnerships (ICPs) and primary care networks (PCNs) aligned to restarting and transforming clinical and well-being services.

The CCG operating model and staffing structures have been developed based on this fundamental goal, with significant resource being aligned across multiple directorates towards the ICP geographies, while also building the system-wide critical mass we need to act as an effective strategic body.

The CCG will work in a networked and integrated way with system partners as the sharp edges of competition are replaced by constructive partnership.

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Our Ambition and Case for Change

Our ambition: quality of life, quality of care

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For everyone in Kent and Medway to have a great quality of life through high quality care

System Leadership: developing commissioner and provider relationships and working arrangements which will deliver the greatest impact

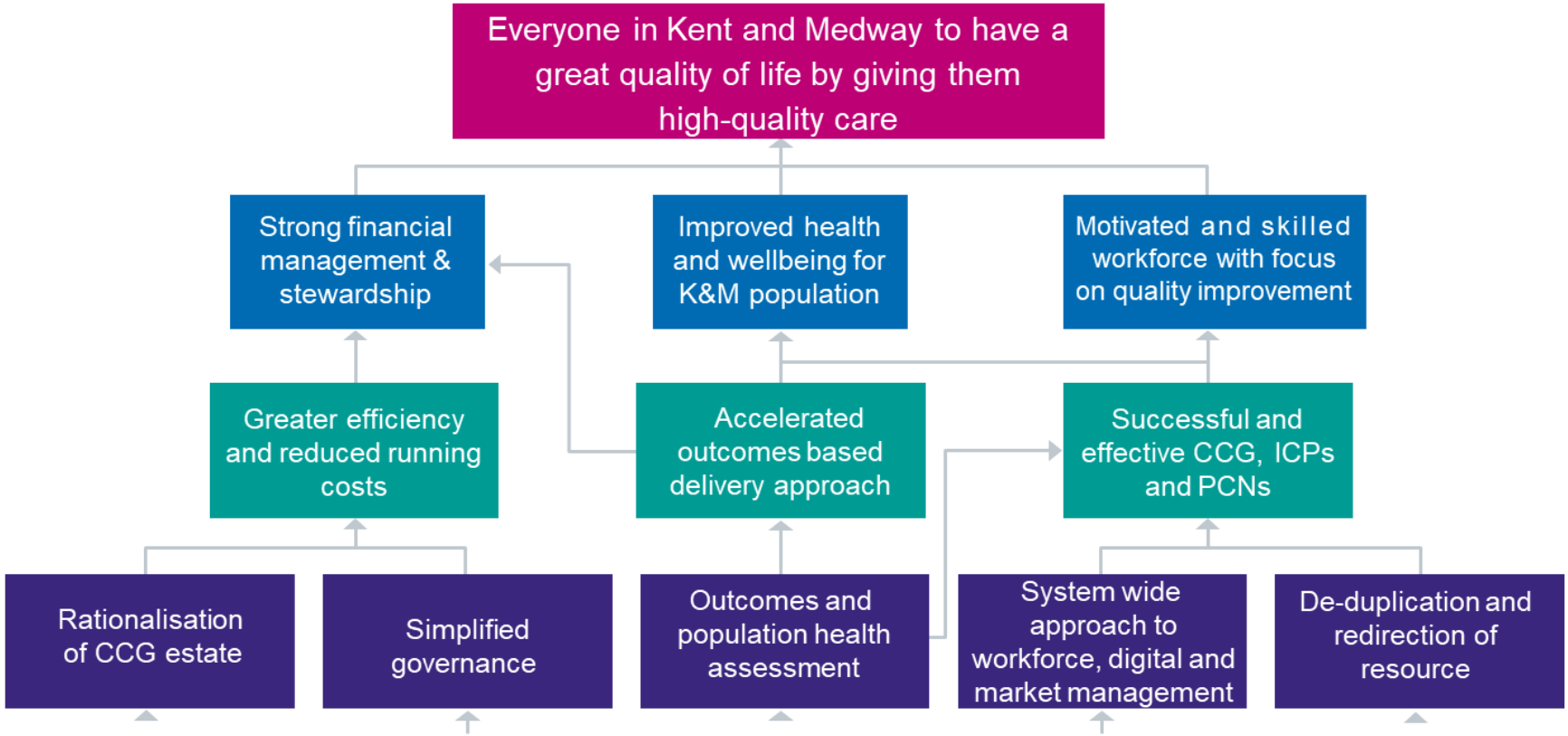
Care transformation: **preventing ill health, intervening earlier and bringing excellent care closer to home.**

Maximising productivity and efficiencies in shared services, digital transformation and medicines optimisation

Enablers: investing in workforce, clinical leadership, digital infrastructure and estate

Robust and agile structures, able to deliver immediate priorities alongside responding to unplanned pressures (incl. Covid)

What will be different?



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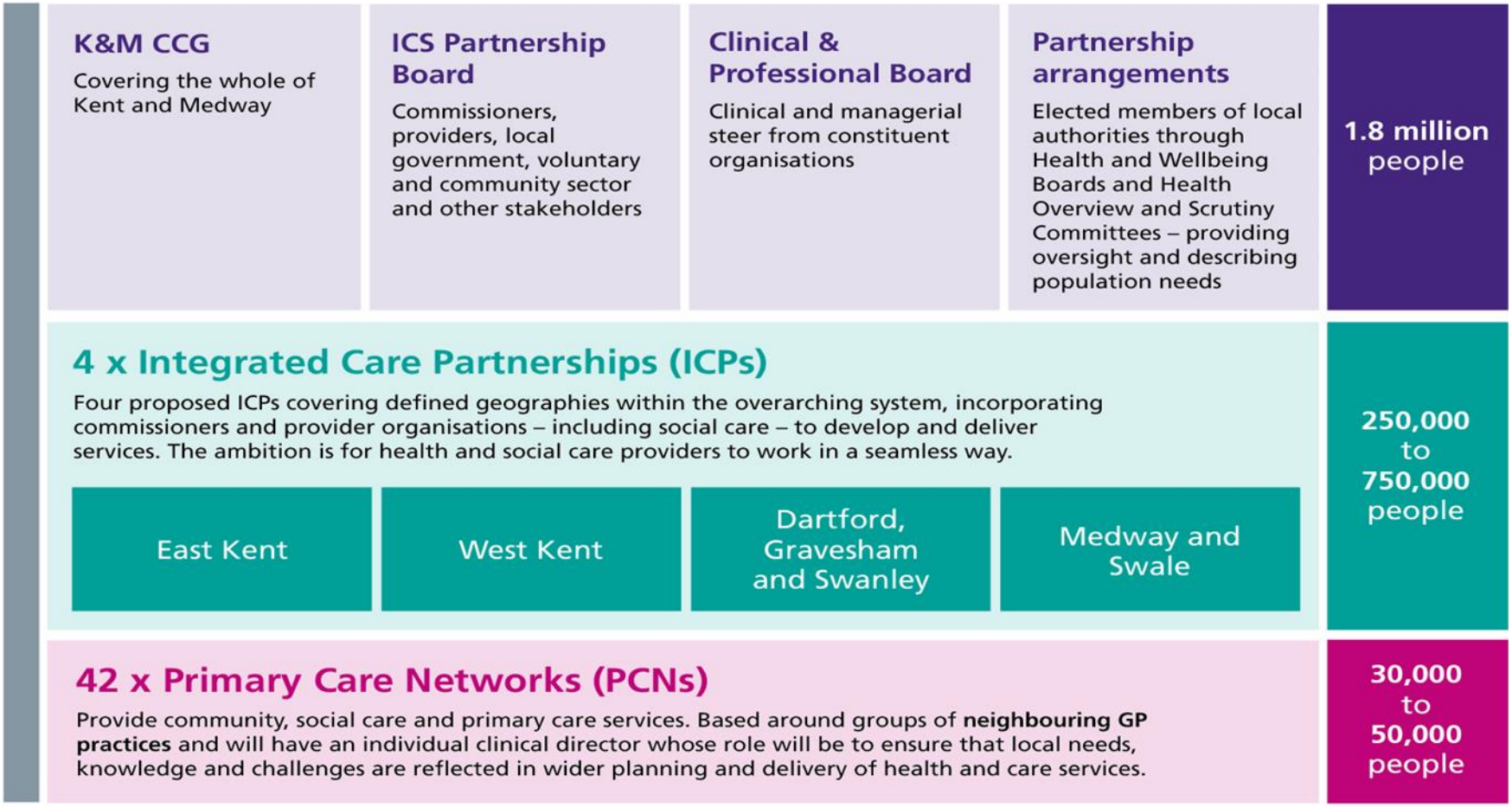
CCG Operating Model – serving the emerging ICS

Kent and Medway CCG: a new organisation in a changing context



CCG Operating Model

To inform development of the CCG and support development of the wider ICS we have identified a framework of **common design principles** to underpin our approach

Systematic approach to addressing inequalities and inequity, driving decision making down to most appropriate level

Collaboration and working as one integrated team where it is right to do so

We're all on the same side!

Ensure system is agile and robust enough to deliver agreed priorities and respond to unplanned events (e.g. Covid)

Information will be consistent and of high quality to support us in making better decisions "one version of the truth"

NHS Kent and Medway CCG and emerging ICS

Reduce transactional and institutional contract management; promote collaborative partnerships and accountability

Standardised & scalable reporting framework allowing us to support all levels of the system in a consistent way

Embed a culture of 'quality improvement and patient safety first'

Ensure the operating design and governance structures support the delivery of system priorities

A strategic organisation, able to operate at scale while aligning 'at place' level to drive improvement and supporting critical development of care networks at neighbourhood level to underpin bottom-up system transformation

A system-focused team

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- **System development – a core priority.** The development of ICPs and greater support for PCNs to become mature partnerships are central to the CCG's purpose. The CCG operating model is predicated on this alongside supporting the wider ICS to develop the critical mass for an effective whole system approach – the CCG is investing heavily in system-facing roles and functions.
- **Subsidiarity supported by effectively aligned resources.** The previous CCGs aligned commissioning resource to their emerging ICP areas. As a single CCG we are able to balance and refocus our combined resource in order to take both a systematic and local approach to system development and delivery: doing it once where it is appropriate but where local freedom is better, supporting ICPs and PCNs to act locally in other circumstances.
- **Supporting the development of ICPs and the wider ICS.** Many CCG directorates will have dedicated, named resource specifically facing individual ICPs. Some will have relationship managers and staff providing advice and leadership at an ICP and system level (for example developing governance and contracting frameworks). Other directorates will have a system-based team, but providing local targeted support to ICPs and PCNs where required.
- **GP Clinical Leads – supporting service change at place and system level.** The leads will continue to be primarily locally focused, whilst also working in pathway specific teams across the system. 240 sessions per month will be dedicated to (more than 150 sessions per month will be allocated to support ICPs drive their agendas).
- **Relationship management** - Four CCG executive directors will act as relationship managers with individual ICP SROs and Chairs.

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CCG leaders

Summary roles and responsibilities of the CCG Executive Management Team – a system-focused team within a CCG organisational structure

Developing clear relationships and points of contact

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- **New roles, new relationships**. With a new organisational structure it is necessary to establish a new set of relationships – old faces have new roles, there are roles that didn't exist before; we need to clarify and build relationships rather make assumptions.
- **Clear responsibilities.** It is essential for system partners to understand the roles and responsibilities of key CCG staff and their teams – to that end, this section of the document describes the roles of the key executives within the CCG highlighting both their CCG and ICS roles. This will be taken forward by direct interaction with partner colleagues.
- **Streamlined and clear communication.** It will be necessary to agree points of contact with key staff in partner organisations. In some instances the point of contact is clear, e.g. CFO to CFO; in others less so. Developing a simple communication and contact matrix will support this clarification – this will be a mutually agreed exercise.
- **Delegation styles.** Organisations have different approaches and preferences on who contacts who and who holds what relationships – CCG Executive Directors will work with their key contacts in partner organisations to understand and work with their mutual preferences.

Executive structure

STP Chair
John Goulston

Accountable Officer
Wilf Williams

CCG Clinical Chair
Navin Kumta

Chief Finance Officer

Ivor Duffy

Chief Nurse

Paula Wilkins

Director of System Development & Assurance

Lisa Keslake

Director of Corporate Affairs

Mike Gilbert

Director of Health Improvement

Caroline Selkirk

Director of Strategy and Population Health

Rachel Jones

Director of People and OD

Becca Bradd

Director of Digital Transformation

(TBC)

Executive team portfolios - ICS responsibilities

Director	Initial responsibilities
Chief Nurse **Paula Wilkins**	Leading on development of an ICS quality and safety framework Lead with Clinical Chair from the CCG on the Clinical & Professional Board
Director of Health Improvement **Caroline Selkirk**	Lead for the Restart programme Leading on the refresh of the primary care and local care strategies Lead from the CCG on health improvement Lead from the CCG for the Joint Health and Wellbeing Board/HOSC/HASC
Executive Director of Strategy and Population Health **Rachel Jones**	Leading on the development of the ICS strategy, vision and priorities Lead for the transformational change programmes Lead from the CCG for the Partnership Board
Executive Director of System Development and Assurance **Lisa Keslake**	Lead for ICS, ICP and PCN development and assurance framework Lead for the system performance framework Lead from the CCG for the STEB
Chief Finance Officer **Ivor Duffy**	ICS financial strategy and ICS budget CCG lead for ICP contracting arrangements Lead for the ICS Finance Group
Executive Director of Corporate Affairs **Mike Gilbert**	ICS governance arrangements and review Lead from the CCG for the Non-Executive Group
Executive Director of People and Organisational Development **Becca Bradd**	Lead for ICS organisational development, workforce and communications & engagement Lead from the CCG on the ICS OD, comms & engagement and workforce strategies Lead for the ICS Workforce Group
Executive Director of Digital Transformation Appointment to follow	Lead for ICS digital strategy and transformation and development of integrated analytics

Executive team portfolios – CCG responsibilities

Director	Responsible for
Chief Nurse **Paula Wilkins**	Quality assurance; patient safety; safeguarding; Looked After Children and SEND; primary care quality; special assessment placement team; infection and prevention control; personalised care; medicines optimisation
Executive Director of Health Improvement **Caroline Selkirk**	Restart programme; commissioning functions including: cancer; children; mental health; LD and autism; stroke; primary care; ICP facing teams; 3rd sector; joint commissioning with local authorities; annual operating plan; health improvement
Executive Director of Strategy and Population Health **Rachel Jones**	Transform programme; East Kent, Long Term Plan, population health management development (primarily a system role)
Executive Director of System Development and Assurance **Lisa Keslake**	Internal reporting (primarily a system role)
Chief Finance Officer **Ivor Duffy**	CCG strategic financial planning; financial governance of the CCG transformation programme; contracting; audit; ICP facing financial business partnering; estates
Executive Director of Corporate Affairs **Mike Gilbert**	Corporate governance; Information governance; Emergency Preparedness, Resilience and Response (EPRR); complaints and Freedom of Information; SIRO, CCG governance and constitutional matters, risk management and legal services
Executive Director of People and Organisational Development **Becca Bradd**	CCG HR; CCG organisational development; CCG and system communications and engagement; freedom to speak up; equality and diversity
Executive Director of Digital Transformation Appointment to follow	CCG information management; data analytics and information systems (primarily a system role)