



Coventry and Rugby
Clinical Commissioning Group

NHS Coventry and Rugby CCG Organisational Development Plan 2014 - 2016



Contents

	Page
Foreword	2
Purpose and Context	3
Vision, Values and Business Objectives	4
Key Work Streams	5
- Leadership and Management Development	5
- Workforce Development	7
- Culture and Behaviours	9
- Involvement, Engagement and Communication	11
Resources and Delivery	12
Summary and Next Steps	13
Appendices	
- Corporate Objectives 2014/15	14
- OD Plan implementation update	17

Foreword

I am pleased to present the Coventry and Rugby CCG Organisational Development Plan which sets out our culture and our values, and how we intend to move forward to promote innovation, excellence, equality, and involvement, and effectively meet the difficult challenges which lie ahead.

The Health and Social Care Act 2012 has led to a significant change in the way that health care is commissioned and delivered, with a greater emphasis on local focus and engagement in determining the way forward, and thus starting to change the whole culture within the NHS.

We have involved key stakeholders to help us develop this strategy particularly in relation to our commissioning intentions, our vision and values and priorities and communications and engagement. We intend to review and refresh it periodically with our partners both in the light of feedback and guidance received and in response to the rapidly changing public sector environment.

It offers a tremendous opportunity for us all to be involved in the shaping of our local health services, and to feel that we can make a difference, so that, by listening to our public and patients, we can ensure that we will not only keep doing the things we do well, but also really improve those things we are not doing so well. And we intend to work in an open, honest, and transparent way, keeping our patients and public informed and involved at every step.

It will not be easy, there is no ready-made path to follow, and we will have to learn along the way, but we have a dedicated and committed team, and I am convinced that if we are all prepared to take ownership of our journey, to work collectively to make things better, we can develop our organisation into one we can feel truly proud of, which will serve the people of Coventry and Rugby to provide the best possible health care.

Dr Adrian Canale-Parola.
Chair, NHS Coventry and Rugby CCG

Purpose and Context

Organisational Development (OD) is a vital component to ensure that organisations run smoothly and make the best use of all their resources. The nature of OD inevitably changes over time but it is especially important in new and developing organisations. OD describes the journey and the actions needed for this CCG as we strive to commission the best possible health and well being services for the people in our area. It is recognised that OD is crucial to ensure we are a fit organisation to take responsibility for spending a significant amount of public money for the benefit of local citizens.

The Plan sets out a clear mechanism for engaging and developing leaders and staff to enable the cultural changes required to support clinical commissioning activities, performance improvements and service changes necessary in the changing NHS environment. Our focus is on developing our internal capacity and capability to balance the challenges of providing high quality, safe services with the efficiencies necessary for re-investment in order to achieve our financial plans.

We will be held to account by our local population, patients, key partners, stakeholders and the NHS Commissioning Board for delivery. We have identified the overarching vision for our organisation and this plan sets out what we need to do internally to optimise our ability to achieve this vision. Part of our plan going forward will be to review this Vision to ensure that it continues to resonate with those who represent the CCG. This Plan identifies the support, training and learning required by the CCG leadership, member practices and employees to equip them to deliver our priorities and aims and will identify how those development needs will be met.

The Plan reflects that the key to our success will be our teams and individuals and sets out the steps that we will take as an organisation to ensure that they:

- Have the skills and knowledge to do their jobs well
- Have the right tools and information to do their jobs well
- Are doing things that are right for our population
- Are working in a positive and supportive working environment
- Are working in partnership with our stakeholders

This Organisational Development Plan sits alongside, and should be read in conjunction with,

- The CCG Communications and Engagement Strategy
- The CCG's Commissioning Intentions
- The CCG Constitution

Our Vision, Values and Business Objectives

"Working together to improve the local NHS"

Vision

- To improve the health and wellbeing of our community
- To provide the best possible patient experience
- To ensure choice, value for money and high quality care

Values

Our values guide the way we behave and interact with those we work for and with.

- We will ensure our population receives fair and timely access to a choice of services which are safe, clinically effective and patient centred
- We will focus on health and wellbeing, preventing ill health and reducing health inequalities
- Services should be as local as possible
- Our resources should be used effectively and efficiently by investing in services that deliver quality and best value for money
- We will be responsive and listen and work with the community, practices and partner organisations
- We will enable and empower our workforce and members to be the best they can

The vision and values were created through workshops attended by CCG staff and Governing Body members, staff from member practices and wider partners including representatives from the voluntary sector. As part of the CCG's organisational development, the vision and values will be revisited periodically and circulated more widely both internally and with external partners. The CCG has adopted the ambitions set out in 'Everyone Counts: Planning for Patients 2014/15 -2018/19' and has structured its clinical objectives and major health care transformation programmes for the 5 year period around these. Account had also been taken of the recent draft Framework of Excellence in Clinical Commissioning.

The corporate objectives are determined on an annual basis and those for 2014/15 are detailed in Appendix 1. A number of these objectives are directly linked to this Plan whilst others will rely on staff being equipped to take on new challenges. These objectives will be updated annually.

Key Work Streams

This section describes the key work streams that will enable the CCG to support and develop its workforce to achieve the culture and deliver the vision, values and objectives described previously. These are Leadership and Management Development, Workforce Development, Culture and Behaviours and Involvement, Engagement and Communication.

Work Stream 1: Leadership and Management Development

Leadership Development

We aim to develop effective clinical leaders partnered with expert managerial support

The GP members voted that the CCG should be led by clinicians in the most senior roles. Together with the senior management team, the clinical leaders are responsible for developing the organisation and achieving the strategic priorities. Clinical leadership is important in ensuring that the CCG delivers transformational change and gives assurance and confidence to the local population about continuing NHS services. The CCG's leaders helped to develop and promote the vision and values set out earlier.

An assessment of leadership potential was undertaken before appointments were made to the CCG Governing Body and the members, together with the Senior Management Team, undertook personal development self-assessment and diagnostic exercises to identify strengths, weaknesses and preferred leadership style. The MIRO psychological assessment also looked at both individual and team working to determine how members can most effectively work within a team. All senior posts have specific competency requirements and the development of leadership competencies is integrated with career development, appraisal and on-going learning.

Recently the CCG took part in a national 360 degree stakeholder survey which indicated that more effort needed to be concentrated on working externally, in particular, ensuring that the clinical leaders are more visible to member practices and partner organisations and that the CCG's achievements are more widely publicised.

The clinical leadership indicators included in the recent Draft Framework of Excellence in Clinical Commissioning for CCGs have also been taken in to account in this Plan.

Governing Body and Sub Committee Working

The CCG's governance structure will be supported to develop as the commissioning environment changes

The CCG's Governing Body ensures that the organisation is delivering its objectives and adhering to its statutory responsibilities and has overall responsibility for assurance and governance throughout the organisation. The Governing Body is supported by eight sub committees which have defined responsibilities such as Audit, Clinical Quality and Performance. As part of the initial member assessment process some areas were identified where two or more Governing Body members were reported to have limited competence and a significant knowledge or skills gap, as well as a lack of confidence.

In order to rectify these and to enhance the skills and confidence of those members, a mixture of skills workshops and Governing Body development sessions has been organised. The areas covered included:

- Presentation and media skills and experience and representing the CCG in public
- The concept of Ethical Decision Making
- Skills and knowledge to secure or support improvements for patients or public
- Understanding the commissioning cycle
- The metrics of balancing continuously improving outcomes and delivering value for money

These development sessions will continue throughout the Plan period.

Personal Development Planning

We will ensure that all those in leadership roles are encouraged to achieve their goals

Today's GP Clinical Leads are likely to produce the Governing Body Members of tomorrow. As a result it is important that GP Clinical Leads have personal development plans and access to development programmes which will enable them to contribute to the overall objectives of the CCG and to undertake the specific roles they have been recruited to.

Succession Planning

We will develop and implement a succession plan to ensure that clinical leadership is supported and developed at all levels.

We will ensure we have succession plans in place for our senior clinical leaders both medical and nursing. We will create opportunities for any members to be involved in Clinical Reference Groups and Clinical Leadership Teams and work with their locality lead to draw on a wide range of clinical expertise. However, we recognise and understand that not all Member Practice GPs are interested in active leadership roles within the CCG.

Succession planning has started with Member Practices and will include all practice staff, not only GPs. We must therefore ensure effective engagement with practices

through the three localities to encourage practice staff to play an active role in clinical commissioning. The CCG wants practices involved and proud to make a difference, not just GPs but nurses, practice managers and practice staff. We want to make a difference, with clear clinical leadership whereby we can redesign services and engage clinical people involved to make a difference to the QIPP (Quality, Improvement, Productivity and Prevention) programmes.

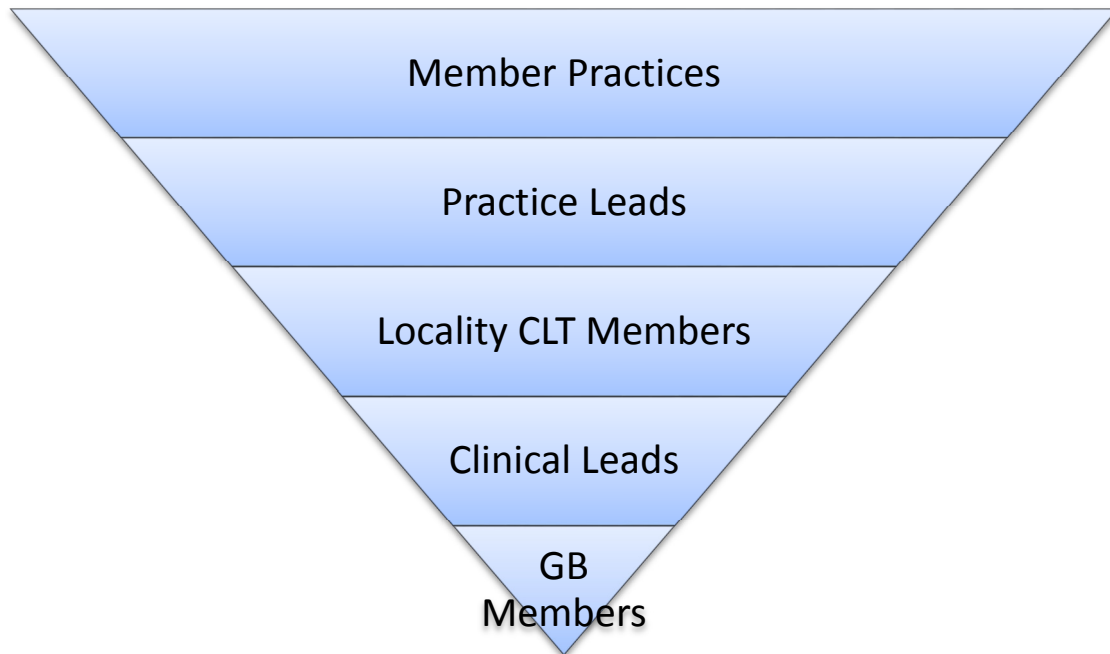


Figure 1 Succession planning by engaging with staff at all levels.

Work Stream 2: Workforce Development

Capability and Capacity Building

We aim to build a strong organisational culture ensuring that we have the capacity and capability to deliver our business

As the CCG was being established a review was undertaken to determine whether or not to make, share or buy the functions required to operate as a commissioning organisation and potential providers and partners were involved in this process. The decision was made to directly employ a large number of staff rather than outsourcing some critical business functions.

Following a review at 6 months of the services provided through the Arden Commissioning Support Service (ACS) the CCG decided to employ additional staff to cover a wider range of roles within the organisation. We believe this will make the organisation as a whole more robust and enable the organisation to develop as an entity in its own right.

There are also potentially vulnerable positions within the organisation where specific knowledge or skills are held by an individual. The CCG will be identifying these and developing resilience and capacity within the organisation, linking to the work on succession planning.

Appraisal and Objective Setting

We aim to develop a system which is meaningful and moves the CCG forward

We will ensure that all staff are clear about their purpose and objectives, through effective job design and description and robust appraisal processes which have a clear chain of objective setting.

As a new CCG we have employed Capita to work with us to develop a robust and bespoke appraisal system for staff. All appraisers and appraisees have had training sessions and the planned roll out of the system took place during May and June 2014 to focus the whole organisation on working toward the Corporate Objectives which are detailed in Appendix 1. The appraisal system will be reviewed during the Plan period.

Personal Development Planning

We aim to ensure that all staff have a personal development plan

The decision was taken to run the MiRo psychological assessment tool across all directorates and teams within the CCG during the year to engage individual staff in the development process and to help teams see how the individual skills and styles influenced behaviours.

The results have been fed back through individual and group feedback sessions which inform personal and organisation development plans as the organisation moves forward in its second year.

Statutory and Mandatory Training

We are committed to the education and training of our staff

All new starters have access to an e-learning induction programme and all staff are expected to undertake safeguarding training and the DOH e-learning Governance Module. In order to facilitate the statutory and mandatory training requirements staff will have the option to have some of the training face to face rather than via e-learning. This will ensure that staff are both able to plan their time in with the sessions provided and those who feel they learn more easily via the face to face process will be accommodated.

On-going Learning Opportunities

We will support staff to maximise their potential

A learning organisation is one where excellence in personal and professional development is encouraged and supported. This may mean that some staff have the

opportunity to progress within the organisation whilst others may seek development opportunities elsewhere. The CCG will try to support those staff who wish to continue formal study or professional training as part of their development.

Talent Management, Recruitment and Retention

We will strive to be one of the best organisations to work for locally

Talent management is necessary to ensure that the CCG is able to attract, develop and retain staff with the skills and attitude to deliver the organisation's objectives. All staff need to be able to fully use their skills and abilities and the CCG needs to be able to identify those with high potential and aspirations to progress.

The CCG also wants to be recognised locally as a 'good place to work' where culture, management practices and performance are acknowledged as best practice and job opportunities attract the best candidates.

Supporting Innovation

Creativity and innovation will be embedded in our work

The CCG's Medicines Management Team has already been recognised for developing a GP Registrar training package which includes prescribing objectives, the role of the team and the work of the CCG more generally. GP practices are also using this package for newly appointed salaried GPs and locums. More recently a hot-house event focussing on designing a model for a high quality emergency and urgent care service for the people of Coventry and Rugby was held. The event involved over 40 staff from the CCG and other local health and care organisations.

The CCG fully supports staff to achieve wider recognition and to share their work nationally. We aim to continue this way of working for the future.

Work Stream 3: Culture and Behaviours

High Performing Organisation

We will strive for excellence in all areas of our work

As an organisation which is just over a year old, the CCG acknowledges that it has a rare opportunity to create a working environment that is unique to NHS Coventry and Rugby CCG. In developing the 'way things are done around here' – or 'organisational culture' – the CCG is aware that it is a statutory NHS body, but is working on shaping the organisation in a way that is rare in the NHS.

In order to deliver the priorities, the CCG will create a climate and culture that supports staff and members and empowers them to contribute at all levels of the organisation. We need to listen, we need to lead, we need to do what we say we will do and most importantly, we want our patients and partners to see this reflected back in our behaviour.

The CCG is developing an organisational culture whereby everyone counts and people understand their contribution. We have worked with our staff from day one to ensure that they have clear objectives, understand their roles and responsibilities but have autonomy to make decision and take responsibility. We want to be an innovative organisation which allows our staff to contribute and develop their ideas with a no blame culture so that staff can learn and share their knowledge, skills and expertise. The CCG is ambitious in its plans to develop with a focus on excellence and continuous improvement and with the interests of local people at the heart of our work.

Equality & Human Rights

We will ensure that all of our decisions take into consideration the diversity of the population that we serve

The CCG recognises that the needs of diverse communities must be addressed and this will not be achieved through a 'one size fits all' approach to service delivery. We must therefore consider how people are affected differently in order that we can commission services that offer equality of access, equality of treatment and equality of outcome to all.

The CCG will work closely with the Equalities and Human Rights Officer to ensure that discrimination and other conduct which is legally prohibited is eliminated. As part of the Equality, Diversity and Human Rights Strategy, we have developed an Equality Delivery System action plan which sets out clear and measureable objectives which aims to improve the health of people who are disproportionately affected by particular conditions or consequences of lifestyle choices.

Safeguarding Adults and Children

All staff will understand and where necessary, act on their safeguarding responsibilities

The CCG understands its responsibility to ensure that the statutory functions for safeguarding and protecting children, young people, looked after children and vulnerable adults are carried out; including its duty to ensure that employed staff are trained to the required level in accordance with national and local policies and procedures.

Working Together to Safeguard Children (2010) identifies what is expected of organisations, individually and jointly, to safeguard and promote the welfare of children. The Francis Report (2013) and the on-going ramifications from the Daniel Pelka case within Coventry have provided clear direction with regard to safeguarding practices. The Department of Health's 'No Secrets' (2000) outlines the multi-agency statutory roles to produce policy, guidance and training about working with adults in need of safeguarding.

The safeguarding team will be responsible for ensuring appropriate provision of safeguarding responsibilities working in collaboration with Social Care and the

Executive Nurse is a member of both the Local Safeguarding Children Board's and Safeguarding Adult Board's in Coventry and Warwickshire

In line with the National Commissioning Boards guidance for Safeguarding arrangements, the CCG will be responsible for ensuring that commissioned services provide assurance that service users are appropriately safeguarded and that staff are suitably skilled and experienced.

Work Stream 4: Involvement, Engagement and Communication

Involvement and Engagement

We will engage effectively with local people and members to improve the quality of health of our population

The CCG has been established as a communicating and listening organisation and will continue to build on this through an on going conversation with the population of Coventry and Rugby and partners, which will underpin all commissioning activities. We will work actively with the local population and providers of health care to improve patient experience, using our understanding of current local patient experience to help us do this.

The CCG will use different ways of gathering a broad range of views, analyse these views and act upon them. We will make it clear to our population how their input influences commissioning decisions. The CCG will seek out the experiences of the patients registered at each GP practice and act on these to help to improve local services. Through the Communications and Engagement Strategy, shared decision-making will be promoted with all patients about their care, including seldom heard audiences.

Staff Engagement

We will engage effectively with our staff

Corporate communication succeeds when the organisation has clear objectives and creates a shared understanding with the staff who influence these outcomes. To achieve this, we will deliver messages clearly, credibly and consistently. We will work with our communications experts to ensure that we seek feedback to let us know that we are getting our communication messages right.

We will also ensure that learning is shared across the CCG, especially in key areas such as performance management and the delivery of QIPP schemes so that we better understand the barriers to progress and how these might be overcome. A staff forum has been established and will review relevant policies and help to gain a better understanding of issues which the CCG needs to address.

Working in Partnership

We will create opportunities for whole system working

In order to bring about the greatest improvement to the health of our population we must work in partnership with local organisations including:

- Our local trusts (UHCW, CWPT, SWFT and GEH)
- Other local commissioning organisations (NWCCG, SWCCG)
- NHS England and the Area Team
- Arden Commissioning Support Unit
- Coventry City Council, Rugby Borough Council, Warwickshire County Council and the Coventry and Warwickshire Health and Wellbeing Boards
- Voluntary sector organisations through VAC and Warwickshire CAVA.

The CCG will build on existing relationships with our partner and provider organisations to ensure we work together to achieve the joint aim of improving local healthcare and, where appropriate, will take the lead in addressing health challenges.

Resources and Delivery

The OD Plan will be overseen by the CCG's Clinical Quality and Governance sub-committee and success will be measured by progress towards the achievement of the organisation's objectives and the delivery plan attached at Appendix 2.

The CCG recognises that some of the elements of the Plan will require additional resources and these will be costed on an individual basis and services procured as necessary, for example, for Governing Body development work, individual coaching and external facilitation .

Summary and Next Steps

This section shows the short-term timeline for the above key work -streams. More details of these plans can be found in Appendix 2 and a summary 'Plan on a Page' is at Appendix 3.

June 2014

Leadership

- Ensure and agree content of Governing Body development programme for period June 2014 – December 2014

Engagement

- Chair to review Lay Member work plans
- Staff to have undergone training in the appraisal process
- Continue '3 message' practice for both Senior Team and Governing Body

July 2014

Engagement

- Review Communications and Engagement Strategy

Culture

- Ensure decision making process of Governing Body and sub-committees consistently reflects organisational vision and values

September 2014

Leadership

- Development of coaching programme
- Develop staff reward and recognition scheme

October 2014

Leadership

- Establish development and succession planning process
- Work with Locality teams to develop Clinical Leadership Teams

November 2014

Leadership

- Review Governing Body development programme for January-June 2015

Appendix 1: Coventry and Rugby CCG Corporate Objectives 2014/15

Our vision (ie. What we are here for)

- To improve the health and wellbeing of our community
- To provide the best possible patient experience
- To ensure choice, value for money and high quality care

Our values (ie. How we want to work)

- We will ensure our population receives fair and timely access to a choice of services which are safe, clinically effective and patient centred
- We will focus on health and wellbeing, preventing ill health and reducing health inequalities
- Services should be as local as possible
- Our resources should be used effectively and efficiently by investing in services that deliver quality and best value for money
- We will be responsive and listen and work with the community, practices and partner organisations
- We will enable and empower our workforce and members to be the best they can.

Embracing the above, over the next twelve months, we will accept a corporate responsibility for achieving the following objectives:

BAF Domain	BAF Risk ref:	Objective	Lead	Measurement
CCG Development	A,B,C,D	Develop the CCG, its cultures, its Members and its staff to ensure that the benefits of clinically-led commissioning are fully realised.	SA	Improvements in: <ul style="list-style-type: none"> • 360 degree feedback • Members survey results • Staff survey results • NHSE quarterly ratings

CCG Development	E	Review commissioning support arrangements to ensure fit for the future and have plans developed by 31 st December to implement any agreed changes during 2015/16.	JH	Business case approved by NHSE. Q4 milestones within business case achieved.
System Leadership	F,G	Work with partners to agree a 5 year health and social care Strategic Plan for Coventry & Warwickshire that is acceptable to the general public and which demonstrates clinical and financial sustainability.	SA	UoP Strategic Plan that is signed by all local partners and that is assessed as green by NHSE. Delivery of the 2014/15 milestones with the Strategic Plan.
Quality, Safety & Performance	J,K,L	Secure on-going demonstrable improvement in the quality and safety of commissioned services.	JB	Reduction in harm to patients evidenced through safety thermometer, never events and clinical incidents. Monitoring of monthly quality dashboard. Delivery of CQUINs that support strategic objectives and QIPP.
Quality, Safety & Performance	J, O	Secure on-going demonstrable improvement in the patient experience of commissioned services.	JB	Improvement in Family & Friends test participation and in the scores achieved. Quarterly complaints reports CQC patient surveys Healthwatch and PPI feedback.
Quality, Safety & Performance	M	Achievement of NHS Constitution and national performance measures (including Quality Premium targets) and other statutory requirements	JH	NHSE quarterly dashboard performance Quality premium achievement Information Governance Toolkit Safeguarding Section 11 audit

				outcomes
Quality, Safety & Performance	N, O	Achievement of statutory financial duties and delivery of 1.0% planned surplus.	CH	NHSE quarterly rating 2014/15 statutory accounts
Transformation & QIPP	P,Q,R	Deliver key milestones and performance indicators as per 2014/15 Transformation and QIPP project plans.	SA	Key milestones achieved Improvement in reported KPIs 2014/15 QIPP savings target achieved
Transformation & QIPP	P, N	2015/16 Transformation & QIPP Programme identified by 30 th November 2014.	CH	Plans approved by Governing Body 1 st cut of 2015/16 Financial Plan assessed by NHSE as Green
System Leadership	I	Support Primary Care to develop plans, by 30 th November, to secure the capacity and capability needed to deliver high quality, sustainable services.	JH	Plans approved by Governing Body and support by member practices demonstrated
System Leadership	H	Undertake the necessary preparations to have functional plans in place by 31 st March 2015 to support delivery of the Better Care integration agenda.	JH	Detailed 2015/16 BCF project plans agreed 2015/16 Pooled Budget agreement in place Joint commissioning arrangements agreed for residential and domiciliary care

Appendix 2: Organisational Development Plan

Areas for Action	Issue identified	Development Need	Progress as of August 2014	Actions and Project Lead
Leadership and Management Development - Leadership development	<ul style="list-style-type: none"> • Visibility of clinical leaders to member practices and partner organisations 	<ul style="list-style-type: none"> • Exposure of additional clinical members at key locality and partnership meetings • Skills in negotiating and managing conflict and differing opinions 	<ul style="list-style-type: none"> • Locality Clinical Leaders identified • New Leader appointed for Godiva Locality 	<ul style="list-style-type: none"> • A programme of management and leadership development including specific skills training should be embedded across the organisation to ensure that clinical leaders/representatives demonstrate consistent values <p>Lead: Adrian Canale-Parola/Steve Allen/Juliet Hancox</p>
Leadership and Management Development - Governing Body and sub-committee working	<ul style="list-style-type: none"> • Gaps exist in the leadership knowledge and skills in the CCG (including Governing Body) • Gaps in knowledge, experience and 	<ul style="list-style-type: none"> • Build on knowledge which has been gained in 2013/14 • Run further development workshops to ensure Members are prepared 	<ul style="list-style-type: none"> • Development sessions have taken place covering Chairing skills, Strategic planning and strategy personal health budgets and the role of the CCG 	<ul style="list-style-type: none"> • Continue to run proactive and informative sessions with external providers as necessary to continue to enhance skills • Ensure internal

Areas for Action	Issue identified	Development Need	Progress as of August 2014	Actions and Project Lead
	<p>approaches exist between clinicians and non clinicians</p> <ul style="list-style-type: none"> Limited expertise in a range of change management techniques 	and understanding of new issues which arise	following the Francis Report	<p>workshops are run to increase understanding of key issues within the CCG for which there are in house experts</p> <ul style="list-style-type: none"> Ensure Governing Body and sub-committee decisions are aligned with organisational vision and values <p>Lead: Adrian Canale-Parola/Rebecca Blyth</p>
<p>Leadership and Management Development</p> <ul style="list-style-type: none"> Succession planning 	<ul style="list-style-type: none"> No formal mechanism to identify new talent/for succession planning 	<ul style="list-style-type: none"> Develop additional clinical leadership capacity across the CCG – not only GPs. 	<ul style="list-style-type: none"> Localities are working with member practices to engage them in commissioning. Clinicians can get involved in specific projects without having to take on the full responsibilities of a CLT member. 	<ul style="list-style-type: none"> Establish a formal process for succession planning/talent spotting <p>Lead: Steve Allen/Juliet Hancox</p>
<p>Workforce Development</p> <ul style="list-style-type: none"> Appraisal and objective setting 	<ul style="list-style-type: none"> New appraisal/PDP process to be implemented across the organisation 	<ul style="list-style-type: none"> Access to best practice techniques in decision making, influence and negotiation to encourage 	<ul style="list-style-type: none"> All staff have undertaken the appraisal or appraisee training offered by Capita 	<ul style="list-style-type: none"> Review appraisal process during 2015/16

Areas for Action	Issue identified	Development Need	Progress as of August 2014	Actions and Project Lead
		<p>consistency of approach</p> <ul style="list-style-type: none"> • Ensure staff have adequate training to run and/or participate in the appraisal process 	<ul style="list-style-type: none"> • New paperwork available on the intranet • Corporate objectives revised to reflect the developing organisation • Managers and staff aware of time limits for appraisals 	<p>Lead: Steve Allen/Juliet Hancox</p>
<p>Workforce Development</p> <ul style="list-style-type: none"> - Capability and capacity building 	<ul style="list-style-type: none"> • CCG may be exposed when specific knowledge or skills are held by an individual 	<ul style="list-style-type: none"> • Identify individuals and ensure wider spread of knowledge and skills 	<ul style="list-style-type: none"> • Additional staff recruited in one area 	<ul style="list-style-type: none"> • Continue to identify vulnerable posts to increase resilience <p>Lead: Juliet Hancox/Rebecca Blyth</p>
<p>Workforce Development</p> <ul style="list-style-type: none"> - On-going learning opportunities 	<ul style="list-style-type: none"> • Training and development opportunities needed for clinical and non-clinical staff 	<ul style="list-style-type: none"> • Provide access to the principles of project management training for clinicians 	<ul style="list-style-type: none"> • Individual coaching arranged • Access to Aspiring Directors programme 	<ul style="list-style-type: none"> • Provide access to a range of different learning opportunities such as formal leadership programmes, e-learning, coaching, shadowing <p>Lead: Steve Allen/Juliet Hancox</p>
<p>Workforce Development</p> <ul style="list-style-type: none"> - Supporting innovation 	<ul style="list-style-type: none"> • The CCG's achievements are not widely known • No formal process to 	<ul style="list-style-type: none"> • Identify possible projects for submission for local or national recognition or 	<ul style="list-style-type: none"> • CCG's Medicines Management Team shortlisted for HSJ Award 	<ul style="list-style-type: none"> • Raise level of awareness with staff • Review potential

Areas for Action	Issue identified	Development Need	Progress as of August 2014	Actions and Project Lead
	<ul style="list-style-type: none"> • Ensure relevance and alignment to staff value • Need to be able to defend/support evidence decision making 	<p>forefront of decision-making</p> <ul style="list-style-type: none"> • Employed staff to feel energised, motivated and committed and are accountable for values and decisions of CCG 	<p>Governing Body and also via the monthly Coffee with Director mechanism</p> <ul style="list-style-type: none"> • Staff are encouraged to raise issues either informally or formally via the Coffee with Directors or with their Head of Department 	<p>CCG where required</p> <p>Lead: Rebecca Blyth/Nigel Hart/Kate Montgomery</p>
<p>Involvement, Engagement and Communication</p> <ul style="list-style-type: none"> - Engagement with members 	<ul style="list-style-type: none"> • Need more GP Leads to share responsibility • Variation in motivation/engagement of practices • Membership organisation needs to operate more collaboratively and Localities become teams 	<ul style="list-style-type: none"> • Develop CCG relationships with partners, clinicians and providers to leverage capacity and capability from across the system • Broaden existing relationships, for example, building clinical engagement beyond GPs out to all clinical groups, moving C&RCCG relationships to wider joint delivery with more extended stakeholder groups such as District 	<ul style="list-style-type: none"> • Locality structures in place to continue effective engagement with practices. • Commissioning intentions workshops in early 2014 involved practice and patient representatives 	<ul style="list-style-type: none"> • Identify objectives for partnership working and clinical engagement • Develop internal and external Communication and Engagement Strategy • GP review to understand what is needed from CCG in order to engage more • Use forthcoming Clinical Strategy development to engage clinicians in making and leading change <p>Lead: Steve</p>

Areas for Action	Issue identified	Development Need	Progress as of August 2014	Actions and Project Lead
		<p>Councils, the Police and the voluntary sector</p> <ul style="list-style-type: none"> • Provide education and training for GPs where required (identify skills and knowledge training) 		<p>Allen/Jacqueline Barnes/Kate Montgomery/Nigel Hart/Nikkie Taylor</p>
<p>Involvement, Engagement and Communication</p> <ul style="list-style-type: none"> - Engagement with local people 	<ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • Create innovative range of engagement opportunities for patients and public • Reinforce and embed clinical and patient experience engagement 	<ul style="list-style-type: none"> • Patient stories are an integral part of all Governing Body meetings • Website continues to be developed and refined • 61 Patient Reference Groups established throughout the CCG used to feed in information • Quarterly Patient Forum meetings • Two active Lay Members working across Coventry and Rugby 	<ul style="list-style-type: none"> • Build on the success of the PPI work • Develop internal and external Communication and Engagement Strategy refresh <p>Lead: Kate Montgomery/Nigel Hart/Carla Elkins</p>
<p>Involvement, Engagement and Communication</p> <ul style="list-style-type: none"> - Working with partners 	<ul style="list-style-type: none"> • Internal and external presence • Communicate that this CCG is clinically driven...what's the 	<ul style="list-style-type: none"> • Vision and Values will provide 'hooks' to hang all CCG communication from • Clinical strategy development will 	<ul style="list-style-type: none"> • Strap line and branding agreed and widely used in publicity • Links with voluntary sector developing 	<ul style="list-style-type: none"> • Develop internal and external Communication and Engagement Strategy • Develop Clinical Strategy and promotion plan e.g.

Areas for Action	Issue identified	Development Need	Progress as of August 2014	Actions and Project Lead
	difference?	reinforce and apply Vision and Values and CCG purpose/objectives		Stakeholder events, programme working groups, partners and wider stakeholders and informing public Lead: Jacqueline Barnes/Nigel Hart/Kate Montgomery

Appendix 3: Organisational Development 'Plan on a Page'

Vision	Core Values	Framework for Excellence	OD Goals	Key Initiatives
Improve the health and wellbeing of the community	<p>Enable and empower workforce and members</p> <p>Focus on health and wellbeing, preventing ill health and reducing health inequalities</p>	<p>Clinical focus and member engagement</p> <p>Collaborative commissioning</p>	<p>Encourage involvement from member practices and development of Localities</p> <p>Develop commissioning relationships with partners (Las, CCGs, NHSE)</p>	<p>Identify objectives for clinical engagement. Establish mechanism for succession planning/talent spotting</p> <p>Identify objectives for partnership working</p>
Provide the best possible patient experience	<p>Responsive, listen and work with the community, practices and partners</p> <p>Services should be as local as possible</p>	<p>Clinical leadership</p> <p>Meaningful involvement of patients, carers and the public</p>	<p>Develop additional clinical leadership capacity</p> <p>Ensure patient and public engagement is embedded in the organisation and the commissioning process</p>	<p>Management and leadership development programme</p> <p>Develop internal and external communication and engagement strategy</p>
Ensure choice, value for money and high quality care	<p>Resources used effectively and efficiently delivering quality and best value for money</p> <p>Population has fair and timely access to a choice of services</p>	<p>Robust governance arrangements</p> <p>Clear and credible plans</p>	<p>Reduce gaps in knowledge, experience and skills and ensure Governing Body adds value</p> <p>Review core commissioning skills and processes</p>	<p>Development workshops for Governing Body members</p> <p>Clinical Strategy. Strategic and operational plans</p>