Heywood, Middleton and Rochdale CCG

CCG 360° Stakeholder Survey 2018/19

Findings



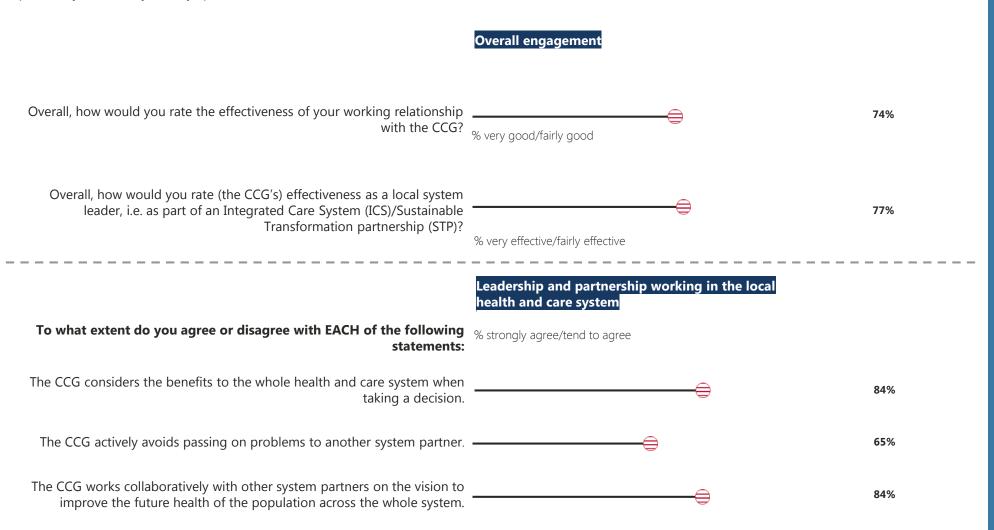
Ipsos MORISocial Research Institute

Table of contents

Slide 3	Summary: headline findings
Slide 5	Background and objectives
Slide 6	<u>Interpreting the results</u>
Slide 7	<u>Using the results</u>
Slide 8	<u>Detailed findings</u>
Slide 21	Appendix: methodology and technical details
Slide 23	Appendix: CCG Clusters

Summary: headline findings

The following charts show the summary findings for Heywood, Middleton and Rochdale CCG indicating the percentage of stakeholders responding positively to the key survey questions.



Heywood, Middleton and Rochdale CCG

*Base = all stakeholders (31)

Core functions

How would you rate the effectiveness of the CCG at doing EACH of the following:

% very effective/fairly effective

Improving health outcomes for its population —

84%

Reducing health inequalities _____

71%

Improving the quality of local health services

77%

Delivering value for money

71%

Commissioning/decommissioning services

To what extent do you agree or disagree with EACH of the following statements about the way in which the CCG commissions/decommissions services?

% strongly agree/tend to agree

The CCG involves the right individuals and organisations when commissioning/decommissioning services

61%

The CCG asks the right questions at the right time when commissioning/decommissioning services

65%

The CCG engages effectively with patients and the public, including those groups within the local population who are at risk of experiencing poorer health outcomes when commissioning/decommissioning services

58%

The CCG demonstrates that it has considered the views of patients and the public, including those groups which experience poorer health outcomes and/or barriers to accessing health and care, when it is commissioning/decommissioning services

48%

Heywood, Middleton and Rochdale CCG

*Base = all stakeholders (31)

Background and objectives

Clinical Commissioning Groups (CCGs) need to have strong relationships with a range of stakeholders in order to be successful commissioners within their local health and care systems. These relationships provide CCGs with valuable intelligence to help them make the effective commissioning decisions for their local populations.

The CCG 360° Stakeholder Survey, which has been conducted since 2013/14, enables stakeholders to provide feedback about their CCGs. The results of the survey serve two purposes:

- 1. Provide CCGs with insight into key areas for improvements in their relationships with stakeholders and provide information on how stakeholders' views have changed over time.
- 2. Contribute towards NHS England's statutory responsibility to conduct an annual assessment of each CCG, through the CCG Improvement and Assessment Framework.

Interpreting the results

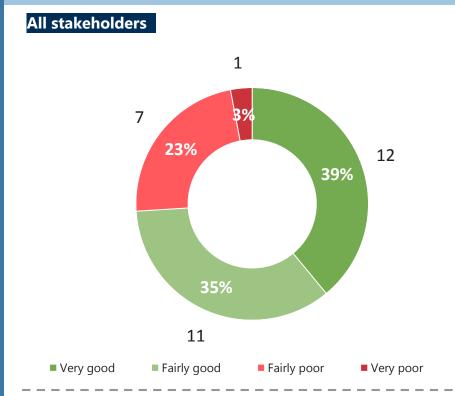
- For each question, the response to each answer is presented as both a percentage (%) and as a number (n). The total number of stakeholders who answered each question (the base size) is also stated at the bottom of each chart and in every table. For questions with fewer than 30 stakeholders answering, we strongly recommend that you look at the number of stakeholders giving each response rather than the percentage, as the percentage can be misleading when based on so few stakeholders.
- Throughout the report, 'the CCG' refers to Heywood, Middleton and Rochdale CCG.
- Where results do not sum to 100%, or where individual responses (e.g. tend to agree; strongly agree) do not sum to combined responses (e.g. strongly/tend to agree) this is due to rounding.
- There have been significant changes to the survey this year, such as the removal, rewording and reordering of several questions (including the answer codes). Additionally, the online format of the survey has changed this year and the ability for stakeholders to answer the questionnaire on behalf of multiple CCGs at the same time is a new feature, introduced to make participation easier and less time-consuming. These changes mean that we are unable to report on trend data. Please see slides 21 and 22 for more information on the methodology.

Using the results

- The following slides show the results for each question, with a breakdown also shown for each of the core stakeholder groups where relevant, as well as regional and cluster* comparisons.
- The comparisons are included to provide an indication of differences only and should be treated with caution due to the low numbers of respondents and differences in CCGs' stakeholder lists.
- Any differences are not necessarily statistically significant differences; a higher score than the cluster average does not always equate to 'better' performance.
- The comparisons offer a starting point to inform wider discussions about the CCG's ongoing organisational development and its relationships with stakeholders. For example, they may indicate areas in which stakeholders think the CCG is performing relatively less well, for the CCG to discuss internally and externally to identify what improvements can be made in this area, if any.

^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

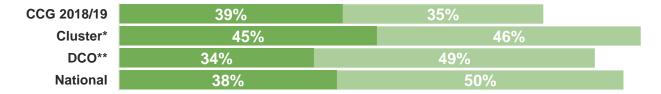
Q1. Overall, how would you rate the effectiveness of your working relationship with the CCG?



By stakeholder group			I
Stakeholder group	No. of participants	Very good/ Fairly good	Fairly poor/ Very poor
GP member practices	17	71% (12)	29% (5)
Health & wellbeing boards	1	100% (1)	-
Healthwatch and voluntary/patient groups	5	60% (3)	40% (2)
NHS providers	1	100% (1)	-
Other CCGs	4	75% (3)	25% (1)
Upper tier/unitary LA	3	100% (3)	-
Wider stakeholders	0	-	-

Regional and cluster comparisons

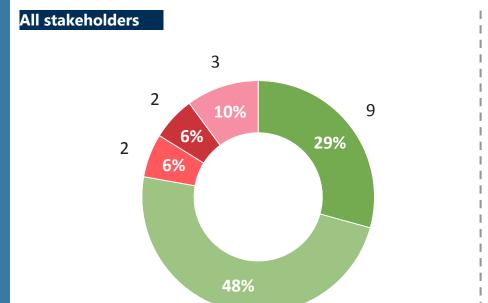
Percentage of stakeholders saying very good/fairly good



^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

Q3. Overall, how would you rate the CCG's effectiveness as a local system leader, i.e. as part of an Integrated Care System (ICS)/Sustainable Transformation Partnership (STP)?

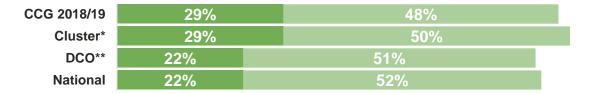


By stakeholder group

Stakeholder group	No. of participants	Very effective/ Fairly effective	Not very effective/Not at all effective
GP member practices	17	71% (12)	18% (3)
Health & wellbeing boards	1	100% (1)	-
Healthwatch and voluntary/patient groups	5	80% (4)	-
NHS providers	1	100% (1)	-
Other CCGs	4	75% (3)	25% (1)
Upper tier/unitary LA	3	100% (3)	-
Wider stakeholders	0	-	-

Regional and cluster comparisons

Percentage of stakeholders saying very effective/fairly effective



Number of participants: CCG 2018/19 (31), Cluster (745), DCO (421), National (7677).

15

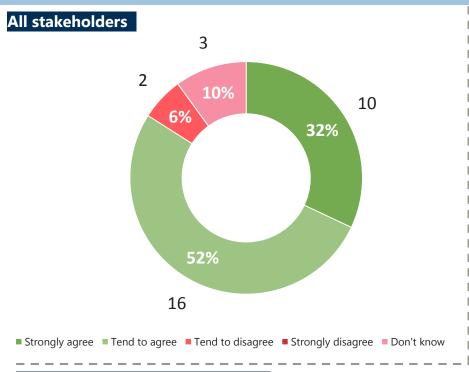
■ Very effective ■ Fairly effective ■ Not very effective ■ Not at all effective ■ Don't know

^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

To what extent do you agree or disagree with EACH of the following statements?

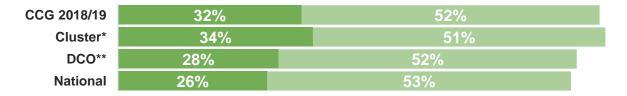
Q5a. "The CCG considers the benefits to the whole health and care system when taking a decision."



By stakeholder group			
Stakeholder group	No. of participants	Strongly agree/Tend to agree	Strongly disagree/Tend to disagree
GP member practices	17	76% (13)	6% (1)
Health & wellbeing boards	1	100% (1)	-
Healthwatch and voluntary/patient groups	5	80% (4)	20% (1)
NHS providers	1	100% (1)	-
Other CCGs	4	100% (4)	-
Upper tier/unitary LA	3	100% (3)	-
Wider stakeholders	0	-	-

Regional and cluster comparisons

Percentage of stakeholders saying strongly agree/tend to agree

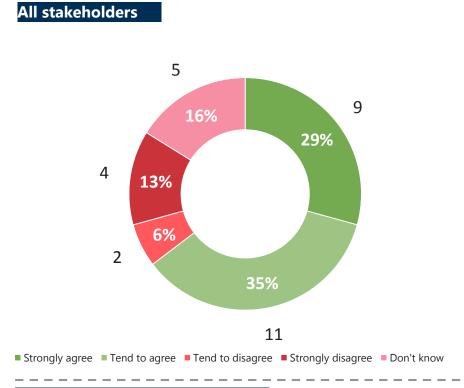


^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

To what extent do you agree or disagree with EACH of the following statements?

Q5b. "The CCG actively avoids passing on problems to another system partner."



By stakeholder group

Stakeholder group	No. of participants	Strongly agree/Tend to agree	Strongly disagree/Tend to disagree
GP member practices	17	59% (10)	18% (3)
Health & wellbeing boards	1	100% (1)	-
Healthwatch and voluntary/patient groups	5	40% (2)	40% (2)
NHS providers	1	100% (1)	-
Other CCGs	4	75% (3)	25% (1)
Upper tier/unitary LA	3	100% (3)	-
Wider stakeholders	0	-	-

Regional and cluster comparisons

Percentage of stakeholders saying strongly agree/tend to agree

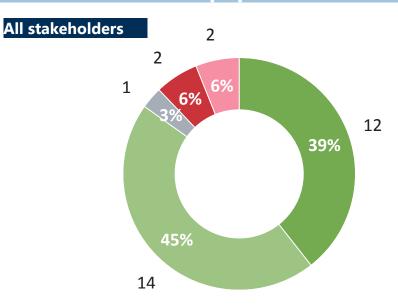
CCG 2018/19	29%	35%
Cluster*	27%	44%
DCO**	20%	44%
National	22%	42%

^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

To what extent do you agree or disagree with EACH of the following statements?

Q5c. "The CCG works collaboratively with other system partners on the vision to improve the future health of the population across the whole system."



By stakeholder group Stakeholder group	No. of participants	Strongly agree/Tend to agree	Strongly disagree/Tend to disagree
GP member practices	17	76% (13)	12% (2)
Health & wellbeing boards	1	100% (1)	-
Healthwatch and voluntary/patient groups	5	80% (4)	20% (1)
NHS providers	1	100% (1)	-
Other CCGs	4	100% (4)	-
Upper tier/unitary LA	3	100% (3)	-
Wider stakeholders	0	-	-

Regional and cluster comparisons

Percentage of stakeholders saying strongly agree/tend to agree

CCG 2018/19	39%	45%
Cluster*	44%	42%
DCO**	36%	46%
National	34%	48%

Number of participants: CCG 2018/19 (31), Cluster (745), DCO (421), National (7677).

■ Strongly agree ■ Tend to agree ■ Tend to disagree ■ Strongly disagree ■ Don't know

^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

Q6a. "Improving health outcomes for its population."



By stakeholder group

Stakeholder group	No. of participants	Very effective/ Fairly effective	Not very effective/Not at all effective
GP member practices	17	76% (13)	18% (3)
Health & wellbeing boards	1	100% (1)	-
Healthwatch and voluntary/patient groups	5	100% (5)	-
NHS providers	1	100% (1)	-
Other CCGs	4	75% (3)	25% (1)
Upper tier/unitary LA	3	100% (3)	-
Wider stakeholders	0	-	-

Regional and cluster comparisons

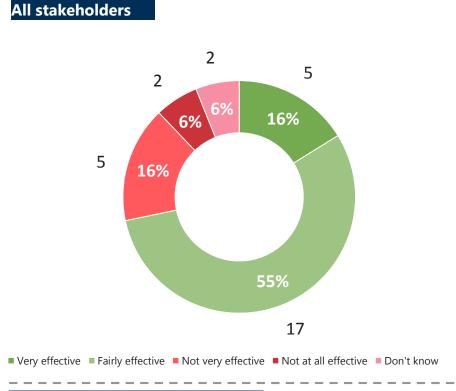
Percentage of stakeholders saying very effective/fairly effective



^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

Q6b. "Reducing health inequalities."



By stakeholder group

Stakeholder group	No. of participants	Very effective/ Fairly effective	Not very effective/Not at all effective
GP member practices	17	59% (10)	29% (5)
Health & wellbeing boards	1	100% (1)	-
Healthwatch and voluntary/patient groups	5	80% (4)	20% (1)
NHS providers	1	100% (1)	-
Other CCGs	4	75% (3)	25% (1)
Upper tier/unitary LA	3	100% (3)	-
Wider stakeholders	0	-	-

Regional and cluster comparisons

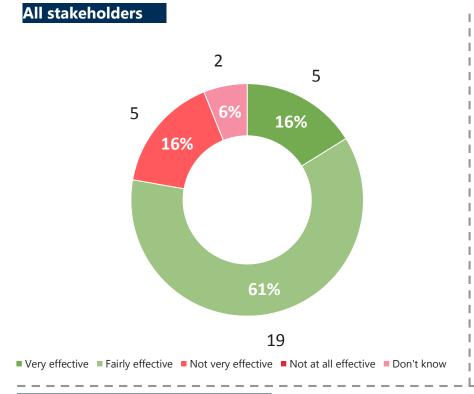
Percentage of stakeholders saying very effective/fairly effective

CCG 2018/19	16%	55%	
Cluster*	15%	56%	
DCO**	12%	53%	
National	12%	51%	

^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

Q6c. "Improving the quality of the local health services."



By stakeholder group

Stakeholder group	No. of participants	Very effective/ Fairly effective	Not very effective/Not at all effective
GP member practices	17	71% (12)	18% (3)
Health & wellbeing boards	1	100% (1)	-
Healthwatch and voluntary/patient groups	5	80% (4)	20% (1)
NHS providers	1	100% (1)	-
Other CCGs	4	75% (3)	25% (1)
Upper tier/unitary LA	3	100% (3)	-
Wider stakeholders	0	-	-

Regional and cluster comparisons

Percentage of stakeholders saying very effective/fairly effective

CCG 2018/19	16%	61%
Cluster*	27%	56%
DCO**	20%	57%
National	19%	55%

^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

Q6d. "Delivering value for money."

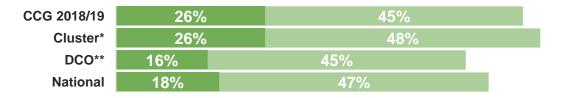


By stakeholder group

l Stakeholder group	No. of participants	Very effective/ Fairly effective	Not very effective/Not at all effective
GP member practices	17	71% (12)	12% (2)
Health & wellbeing boards	1	100% (1)	-
Healthwatch and voluntary/patient groups	5	60% (3)	20% (1)
NHS providers	1	100% (1)	-
Other CCGs	4	50% (2)	25% (1)
Upper tier/unitary LA	3	100% (3)	-
Wider stakeholders	0		-

Regional and cluster comparisons

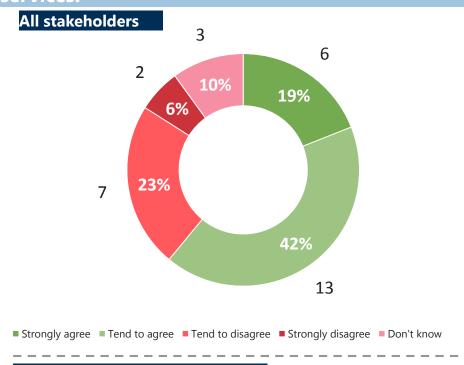
Percentage of stakeholders saying very effective/fairly effective



^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

Q8a. "The CCG involves the right individuals and organisations when commissioning/decommissioning services."



į	By stakeholder group					
1	Stakeholder group	No. of participants	Strongly agree/Tend to agree	Strongly disagree/Tend to disagree		
 	GP member practices	17	53% (9)	29% (5)		
	Health & wellbeing boards	1	100% (1)	-		
 	Healthwatch and voluntary/patient groups	5	60% (3)	40% (2)		
1	NHS providers	1	100% (1)	-		
 	Other CCGs	4	75% (3)	25% (1)		
 	Upper tier/unitary LA	3	67% (2)	33% (1)		
 	Wider stakeholders	0	-	-		
L						

Regional and cluster comparisons

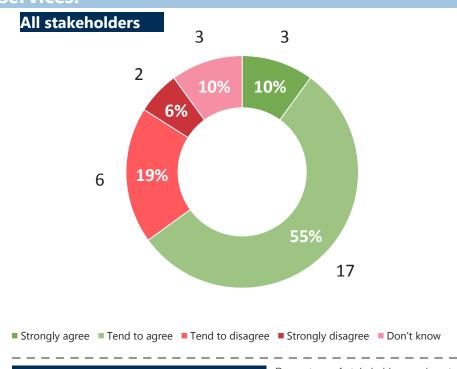
Percentage of stakeholders saying strongly agree/tend to agree

CCG 2018/19	19%	42%		
Cluster*	22%	51%		
DCO**	14%	46%		
National	18%	48%		

^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

Q8b. "The CCG asks the right questions at the right time when commissioning/decommissioning services."



By stakeholder group					
Stakeholder group	No. of participants	Strongly agree/Tend to agree	Strongly disagree/Tend to disagree		
GP member practices	17	53% (9)	29% (5)		
Health & wellbeing boards	1	100% (1)	-		
Healthwatch and voluntary/patient groups	5	80% (4)	20% (1)		
NHS providers	1	100% (1)	-		
Other CCGs	4	75% (3)	25% (1)		
Upper tier/unitary LA	3	67% (2)	33% (1)		
Wider stakeholders	0	-	-		

Regional and cluster comparisons

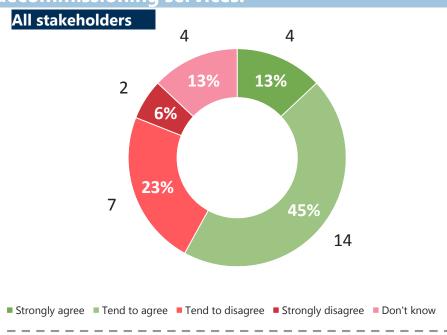
Percentage of stakeholders saying strongly agree/tend to agree

CCG 2018/19	10%	55%		
Cluster*	19%	48%		
DCO**	12%	42%		
National	14%	44%		

^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

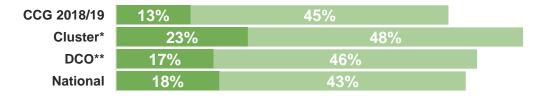
Q8c. "The CCG engages effectively with patients and the public, including those groups within the local population who are at risk of experiencing poorer health outcomes when commissioning/decommissioning services."



By stakeholder group Stakeholder group	No. of Strongly agree/Tend to agree		Strongly disagree/Tend to disagree	
GP member practices	17	59% (10)	18% (3)	
Health & wellbeing boards	1	100% (1)	-	
Healthwatch and voluntary/patient groups	5	20% (1)	80% (4)	
NHS providers	1	100% (1)	-	
Other CCGs	4	75% (3)	25% (1)	
Upper tier/unitary LA	3	67% (2)	33% (1)	
Wider stakeholders	0	-	-	

Regional and cluster comparisons

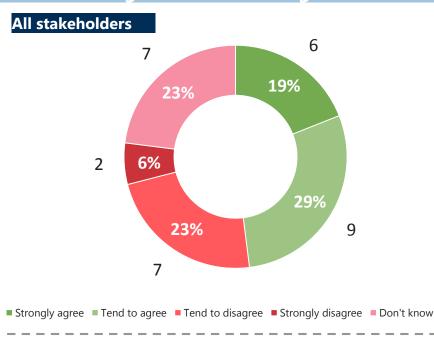
Percentage of stakeholders saying strongly agree/tend to agree



^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

Q8d. "The CCG demonstrates that it has considered the views of patients and the public, including those groups which experience poorer health outcomes and/or barriers to accessing health and care, when it is commissioning/decommissioning services."



By stakeholder group						
Stakeholder group	No. of participants	Strongly agree/Tend to agree	Strongly disagree/Tend to disagree			
GP member practices	17	41% (7)	18% (3)			
Health & wellbeing boards	1	100% (1)	-			
Healthwatch and voluntary/patient groups	5	40% (2)	60% (3)			
NHS providers	1	100% (1)	-			
Other CCGs	4	50% (2)	50% (2)			
Upper tier/unitary LA	3	67% (2)	33% (1)			
Wider stakeholders	0	-	-			

Regional and cluster comparisons

Percentage of stakeholders saying strongly agree/tend to agree

CCG 2018/19	19%	29%
Cluster*	23%	49%
DCO**	18%	46%
National	18%	45%

^{*}A cluster is the group of CCGs that are most similar to the CCG based on several population characteristics.

^{**}The DCO is the group of local CCGs that fall under the same NHS England Director of Commissioning Operations (at sub-regional level) as the CCG

Appendix: methodology and technical details

- It was the responsibility of each CCG to provide the list of stakeholders to invite to take part in the CCG 360° stakeholder survey. CCGs proposing to merge in April 2019 collaborated with each other to produce and submit a single stakeholder list across the merging CCGs.
- CCGs were provided with a specification of core stakeholder organisations to be included in their stakeholder list. Beyond this, however, CCGs had the flexibility to determine which individual within each organisation was the most appropriate to nominate. CCGs were also given the opportunity to add up to ten additional stakeholders they wanted to include locally (they are referred to in this report as 'wider stakeholders').
- Stakeholders who were nominated by more than one CCG or to represent more than one organisation had the opportunity to complete the questionnaire in a 'grid' format. They could choose to give the same responses for each CCG that asked them to take part and the organisations they represent, or to give different answers for each CCG and each organisation.
- Stakeholders were sent an email inviting them to complete the survey online. Stakeholders who did not respond to the email invitation, and stakeholders for whom an email address was not provided, were telephoned by an Ipsos MORI interviewer who encouraged response and offered the opportunity to complete the survey by telephone. Non-responding stakeholders were sent reminder emails and telephone calls to encourage participation.

Appendix: methodology and technical details

- Within the survey, stakeholders were asked a series of questions about their working relationship with the CCG. Stakeholders were asked all the same questions in this year's survey, with no bespoke CCG questions.
- Fieldwork was conducted between 14th January and 28th February.
- 31 of the CCG's stakeholders completed the survey. The overall response rate was 53%, which varied across the stakeholder groups as shown in the table opposite.

Survey response rates for Heywood	l, Middleton and	Rochdale CC	G
Stakeholder group	Invited to take part in survey	Completed survey	Response rate
GP member practices One from every member practice*	34	17	50%
Health & wellbeing boards Up to two per HWB*	1	1	100%
Local Healthwatch Up to three per local Healthwatch*	1	1	100%
Other patient groups and voluntary sector organisations or representatives <i>Up to eight*</i>	9	4	44%
NHS providers <i>Up to two from each acute, mental health and community health providers*</i>	4	1	25%
Other CCGs Up to five*	6	4	67%
Upper tier or unitary local authorities <i>Up to five per local authority*</i>	4	3	75%
Wider stakeholders	0	0	
All stakeholders	59	31	53%
*Specification from the core stakeholder framework	Heyw	ı ood, Middleton a	nd Rochdale Co

Specification from the core stakeholder framework

22

Appendix: CCG Clusters

Each CCG is compared to a cluster of the other CCGs to which they are most similar. The clusters are based on the following variables:

- Index of Multiple Deprivation averages (overall and health domain)
- Age of population
- Ethnicity

- Population registered with practices
- Population density
- Ratio of registered population to overall population

Based on these variables, the following CCGs form the CCG cluster for Heywood, Middleton and Rochdale CCG

Barnsley CCG	Rotherham CCG
Blackburn with Darwen CCG	Salford CCG
Bolton CCG	South Sefton CCG
Bradford Districts CCG	South Tees CCG
Halton CCG	South Tyneside CCG
Hartlepool and Stockton-on-Tees CCG	Stoke on Trent CCG
Hull CCG	Sunderland CCG
North Kirklees CCG	Tameside and Glossop CCG
Oldham CCG	Walsall CCG
Portsmouth CCG	Wolverhampton CCG

Heywood, Middleton and Rochdale CCG

For more information

ccg360stakeholder@ipsos-mori.com



Ipsos MORISocial Research Institute

This work was carried out in accordance with the requirements of the international quality standard for market research, ISO 20252 and with the Ipsos MORI Terms and Conditions which can be found here