Health and Wellbeing Board Monday 19 January 2015

Primary Care Co Commissioning

1. Background and report detail

In May 2014, Simon Stevens, Chief Executive NHS England, invited Clinical Commissioning Groups (CCGs) to express an interest in taking on an increased role in commissioning of primary care services. The intention was to empower and enable CCGs to improve primary care services locally.

The perceived benefits of CCGs being involved are:

- Improved provision of out-of-hospital services for the benefit of patients and local populations
- A more integrated healthcare system that is affordable, high quality and which better meets local needs
- More optimal decisions to be made about how primary care resources are deployed
- Greater consistency between outcome measures and incentives used in primary care services and wider out-of-hospital services
- A more collaborative approach to designing local solutions for workforce, premises and IM&T challenges
- Co-commissioning is the beginning of a longer journey towards 'place' based commissioning.

NHS England published guidance on 10 November 2014: 'The next steps towards primary care co-commissioning' and described three co-commissioning options for CCGs to consider. Information on the options, timeframes and scope were detailed in paper presented and discussed at the HWBB meeting in December 2014. In summary these are Option 1: Greater involvement in primary care decision-making; Option 2: Joint Commissioning and Option 3: Full delegation. The HWBB resolved:

- I. That the Walsall Clinical Commissioning Group Governing Body be advised that the preferred primary care co-commissioning model locally was option 2 joint commissioning arrangements.
- II. That a further report be submitted to the Health and Wellbeing Board at its next meeting which advises of the decision of the Walsall Clinical Commissioning Group Governing Body and the implications thereof.

This paper is in follow up to recommendation II above

2. Report detail

The CCG engaged with local stakeholders including its member practices and elicited views and preferences on the co commissioning options. This process was undertaken in December 2014 and the outcome reported to the CCG Governing Body on 18th December 2014 when a decision of the preferred option was made. At its meeting the CCG Governing Body considered the outcome of the stakeholder engagement exercise and also considered the potential risks and opportunities that each of the options for co Commissiong presented.

Taking account of all the available information before it the Governing Body decided to make an application for Option 2: Joint Commissioning which if approved by NHS England would be in place from 1 April 2015. The CCG Governing Body agreed that this represented the best fit for the CCG for 2015/16 but that during this year the aim would be to progress so that Option 3: Full delegation could be attained from 1 April 2016.

Currently a CCG task and finish group has been established to progress completion and submission of the Co Commissioning Application Form which will include a number of supporting documents including Terms of Reference for the Joint Commissioning Committee and a scheme of delegation. The deadline for submission to NHS England is 26 January 2015. The NHS England moderation process in planned for mid-February 2015 and CCG expects to be notified of the outcome of its application late February/early March 2015.

3. Recommendation

That the report be received for information

4. Relationship to Health and Wellbeing Board

The CCG is a key partner and an active contributor and leader of health care delivery in Walsall Borough.

Authors

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9 January 2015