

Agenda Item 6

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of Richard Childs, Chair of Lincolnshire West Clinical Commissioning Group and the Lincolnshire (Shadow) Joint Commissioning Committee

Report to	Health Scrutiny Committee for Lincolnshire
Date:	11 July 2018
Subject:	Review of Clinical Commissioning Group Arrangements to Support Lincolnshire Sustainability and Transformation Partnership

Summary:

This item will look at the Clinical Commissioning Group arrangements to support the Lincolnshire Sustainability and Transformation Partnership.

Actions Required:

To consider the information presented as part of this item.

1. Background

Strategic Objective

Experience over the past two or three years suggests that the way the four Lincolnshire Clinical Commissioning Groups (CCGs) interact with each other and external stakeholders or the way joint commissioning decisions are made is not as streamlined or as quick as the changing health environment requires. As a result the view has emerged that some significant changes are necessary.

The intention in making the changes is to keep and build further on the positive aspects of local clinical and community engagement and the way the four CCGs

already work together. The vision that was developed to underpin the need for change sets out a clear direction and is to:

'Make better and quicker clinical (and organisational) decisions more efficiently and effectively delivered Lincolnshire wide - which have been informed by local clinical leaders'

The Framework for Change

The Health and Social Care Act 2012 did not permit CCGs to form joint committees. However, the Legislative Reform (Clinical Commissioning Groups) Order 2014 introduced in October 2014 allows CCGs to form joint committees for the purpose of exercising their commissioning functions.

Joint committees are not permitted for the exercise of any non-commissioning functions, e.g. audit, remuneration. These can be progressed as Committees in Common. In addition, joint committees are not permitted for the exercise of NHS England's commissioning functions, e.g. primary care commissioning.

Joint committees are also not permitted with local authorities or Healthwatch, for example, where alternative joint working arrangements must be used.

Current Position

There are currently four Clinical Commissioning Groups in Lincolnshire, namely:

- Lincolnshire East
- Lincolnshire West
- South Lincolnshire
- South West Lincolnshire

Since May 2017 South Lincolnshire and South West Lincolnshire CCGs have shared an Accountable Officer, but are still constituted as two CCGs.

Since their establishment, the Lincolnshire CCGs have worked together to support the commissioning of health care provision for people in Lincolnshire. This has involved arrangements such as lead commissioner for larger contracts, establishment of federated services such as quality and safeguarding and nominated leads for strategic development for example planned care, cancer services, and urgent care provision. These arrangements have worked well but the statutory responsibility of each organisation requires that decisions have to be considered by each organisation. This has resulted in slowing down the process of decision making and has resulted in delays in delivering improvements.

Establishment of Lincolnshire Shadow Joint Committee

In August 2017 the CCGs agreed to establish a Lincolnshire Shadow Joint Committee. This arrangement allows the executive teams and Chairs of the four CCGs to come together to consider issues that impact on the wider Lincolnshire population. At this stage delegated approval arrangements have not been

formalised and as such individual CCG governing bodies are still required to consider and approve recommendations. Despite this the new arrangement has facilitated and supported key issues to be debated and decisions made that enable local managers to progress developments up to the point a final decision is required.

Future Arrangements

The four CCGs have been working closely to develop a framework that will support strategic commissioning for Lincolnshire whilst protecting a retaining local clinical engagement and a focus on the needs of the different localities across the county.

The following points set the framework for these discussions:

- The statutory duties of the CCGs remain with the CCGs – this responsibility cannot be delegated
- NHS England commissioning functions, primary care co-commissioning, remains at an individual CCG level – the CCGs are prohibited from doing this at a joint CCG level.
- Duty to consult the public – a Joint Commissioning Committee will need to be satisfied that public consultation is comprehensive and that the needs of all people living in the different areas of Lincolnshire have been sought.

The current priority is to establish a joint executive function that will lead and manage the strategic commissioning issues across the county. The Governing Bodies of all four CCGs, supported by NHS England, are engaged in the programme of work which will support the ongoing development of commissioning arrangements across the county.

2. Consultation

This is not a direct consultation item.

3. Conclusion

The Health Scrutiny Committee is requested to consider the information on the review of Clinical Commissioning Group arrangements to support the Lincolnshire Sustainability and Transformation Partnership.

4. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Sarah-Jane Mills, Chief Operating Officer, Lincolnshire West Clinical Commissioning Group, who can be contacted via Sarah-Jane.Mills@LincolnshireWestCCG.nhs.uk

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