



Join our Journey

North East and North Cumbria

Review of Joint CCG Committee Remit

7 March 2019

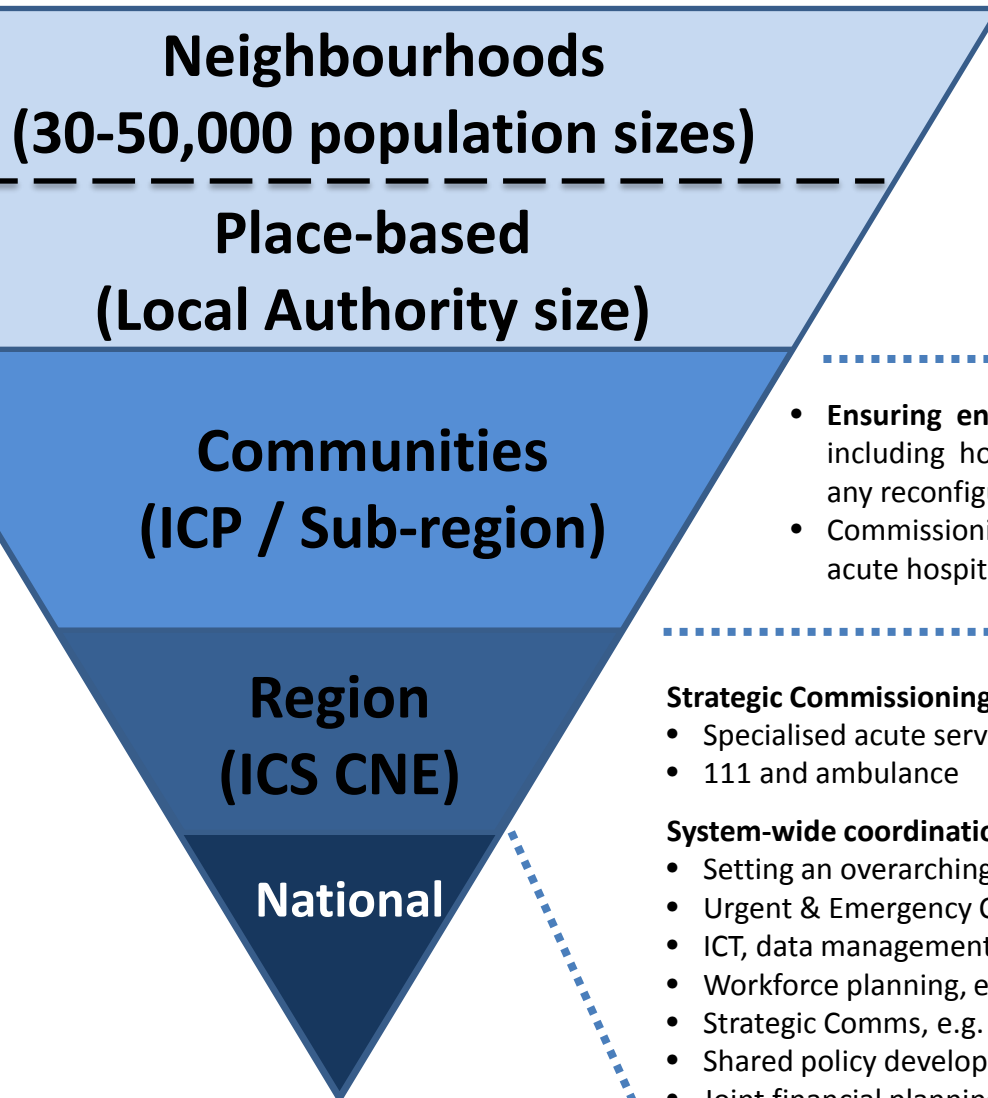


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“Do the right things at the right level with the right partners”

People



- Strengthen place-based clinical leadership
- Accountability and quality of local health services
- Relationships with local public and third sector
- Improved access to primary care
- Development and commissioning of
 - Community Services
 - Health and Social Care integration
 - Local pharmacy services
- Effective engagement with local communities
- Public & political engagement and consultation
 - Health and Wellbeing Boards
 - Overview and Scrutiny committees
 - GP representative bodies

- **Ensuring enough critical mass for vulnerable non-specialist acute services** - including horizontal integration/clinical networking any the management of any reconfiguration as required
- Commissioning, contracting and performance management of non-specialist acute hospital services, in conjunction with place

Strategic Commissioning

- Specialised acute services
- 111 and ambulance

System-wide coordination

- Setting an overarching clinical strategy and clinical standards – arbitrating if required
- Urgent & Emergency Care coordination
- ICT, data management and digital care
- Workforce planning, e.g. recruitment and harmonised training
- Strategic Comms, e.g. key public health messages re prevention
- Shared policy development (VBC/IFRs/Avastin)
- Joint financial planning (TBC as part of the AspirantrProgramme)

Joint CCG Committee remit example from West Yorkshire and Harrogate ICS (2018/19)

Cancer

- Agree new strategic approaches to the commissioning and provision of cancer care, building on the 'Commissioning for Outcomes' work.

Mental health

- Agree a single operating model for the management of acute and psychiatric intensive care unit (PICU) beds across West Yorkshire and Harrogate.
- Agree a standard commissioning approach to acute and PICU services and a commitment to peer review local crisis services to ensure risk and benefit can be clearly understood and managed across West Yorkshire and Harrogate.
- Agree plan for the provision of children and young people inpatient units, integrated with local pathways.

Stroke

Agree configuration of Hyper Acute and Acute stroke services

- Review and approve outline business case. Decide on readiness to consult.
- Review outcomes of consultation.
- Approve full business case
- Consider and approve commissioning approach and approve delivery plan.

Urgent and emergency care

Integrated urgent care services:

- Agree the specification and business case (incorporating future arrangements for NHS 111 and GP out of hours services).
- Agree the commissioning and procurement process to deliver services from 2019 onwards

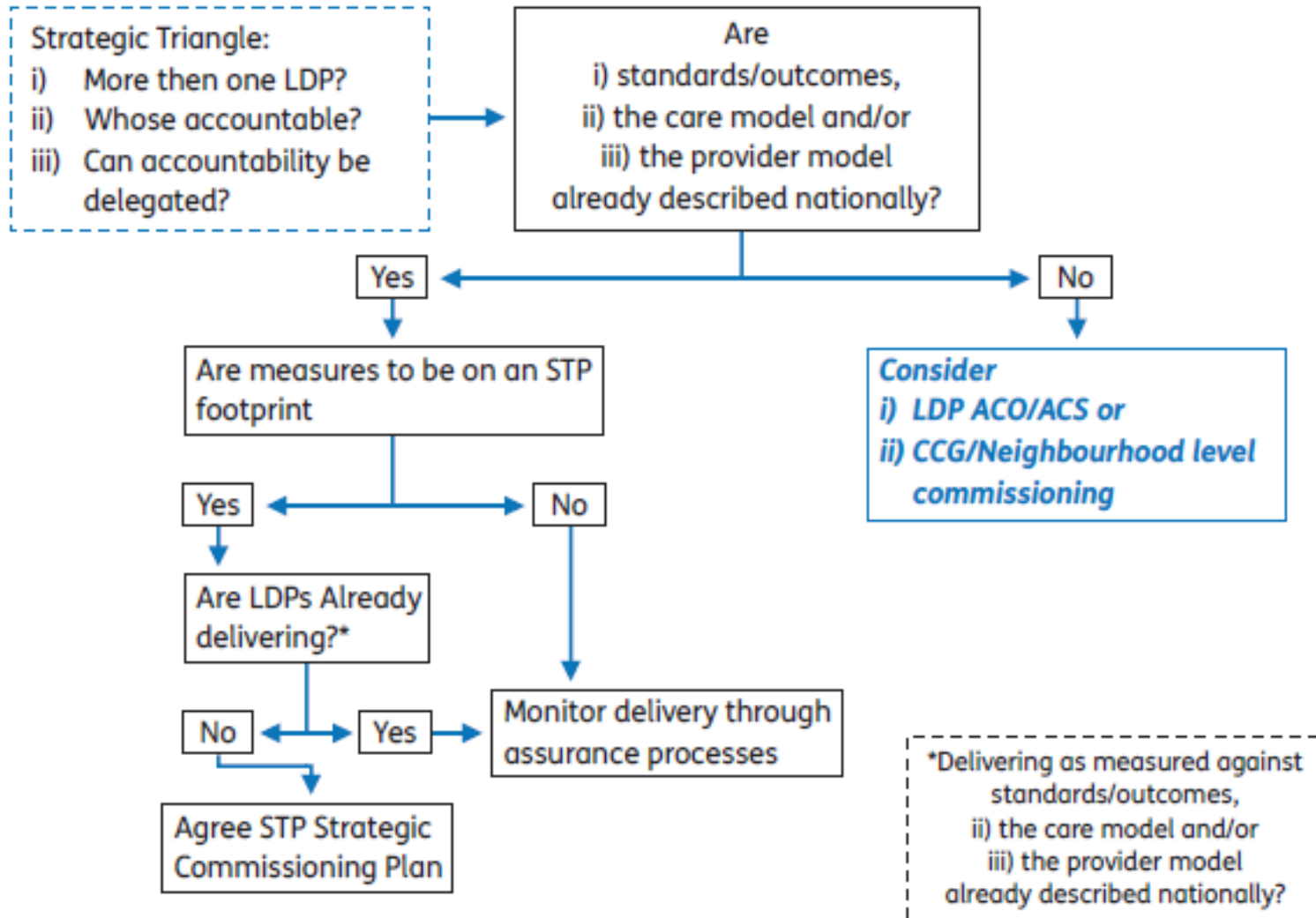
Elective care and standardising commissioning policies

Develop and agree West Yorkshire and Harrogate commissioning policies, including

- Pre-surgery optimisation (supporting healthier choices);
- Clinical thresholds and procedures of low clinical value;
- Eliminating unnecessary follow-ups;
- Efficient prescribing.



Lancashire and South Cumbria decision-making framework



Potential flowchart to identify ICS-level commissioning issues in the North East and North Cumbria

Is this an area of service vulnerability that affects more than one ICP?

Are (i) standards and outcomes and (ii) the service delivery model already described nationally?

No

Yes

Yes

No

Consider place-based/ICP level commissioning.
Escalate any barriers to sustainability to the ICS Mgt Group as required

Following an **assessment exercise** (see overleaf) is there support from the Clinical Leadership Group* for an ICS-level commissioning solution?

No

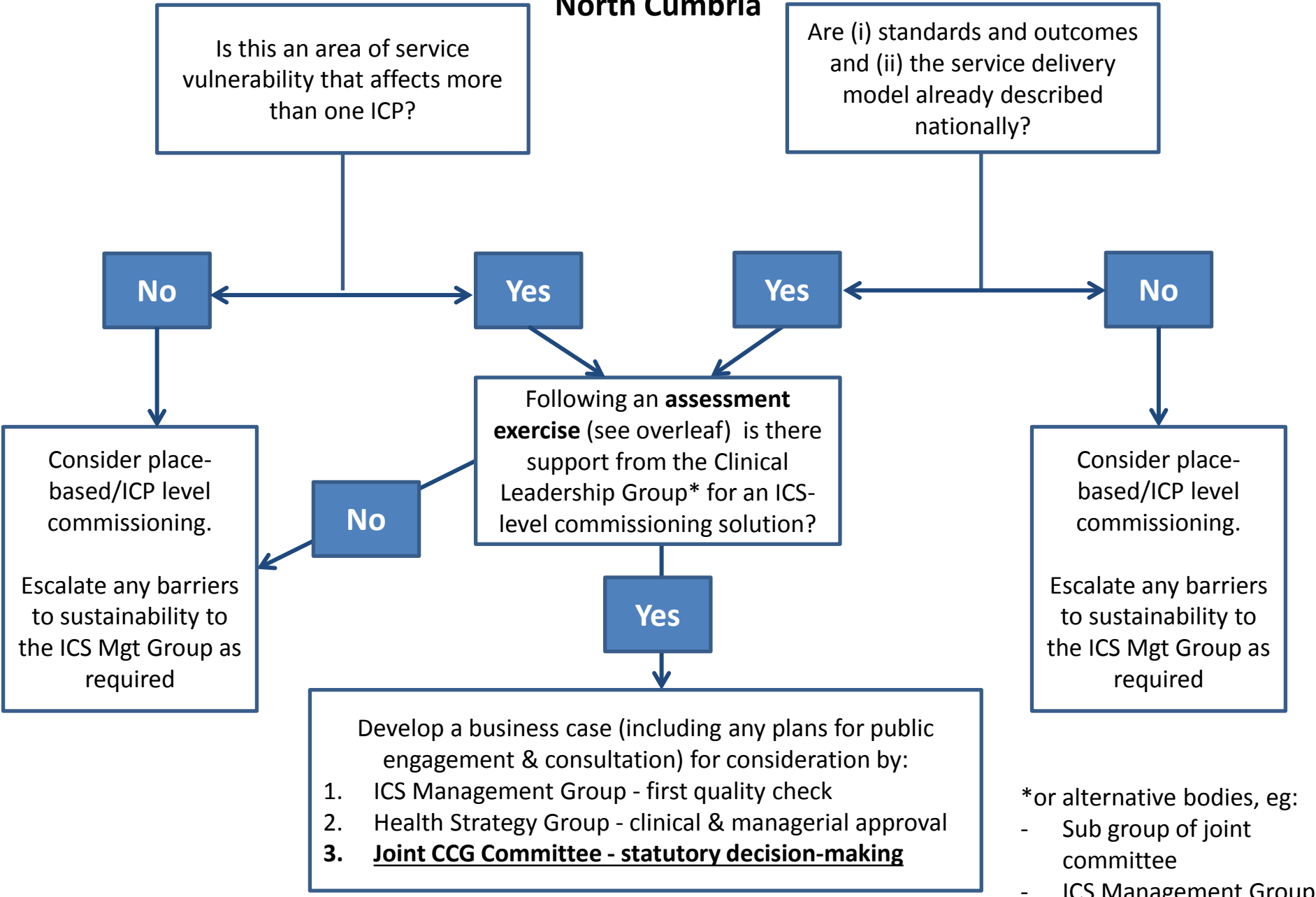
Yes

Consider place-based/ICP level commissioning.
Escalate any barriers to sustainability to the ICS Mgt Group as required

Develop a business case (including any plans for public engagement & consultation) for consideration by:

1. ICS Management Group - first quality check
2. Health Strategy Group - clinical & managerial approval
3. **Joint CCG Committee - statutory decision-making**

*or alternative bodies, eg:
- Sub group of joint committee
- ICS Management Group



Potential scoring criteria (a score between 15-25 would be eligible for consideration by the Committee)

Category (details set out in business case)	Very Low 1	Low 2	Mid-scale 3	High 4	Top 5
Contributes to the achievement of ICS aspirations	Proposal does not demonstrate any links to the achievement of ICS outcome aspirations	Proposal would make a limited contribution to the delivery of some ICS outcome aspirations	Proposal would make a contribution to the achievement of one ICS objective	Proposal demonstrates a clear contribution to the delivery of more than one ICS objective	Proposal strongly demonstrates a significant contribution to the achievement of more than one ICS outcome aspiration
Working at ICS-scale would improve Quality & Safety	Does not provide enough quality evidence.	Weak, but includes some quality evidence.	Reasonable amount of quality evidence.	Adequate amount of quality evidence.	Strong quality evidence base.
Working at ICS scale would deliver significant finance & efficiency gains	Proposal costing does not suggest credible financial savings from commissioning at scale	Proposal calculations and estimated expenditure are weak and do not detail a breakdown and/or forecast of the project expenditure and likely efficiency gains	Proposal outline is viable, achievable and affordable. Includes a breakdown of projected spend and credible forecast savings	Project calculations detailed with breakdown of quarterly expenditure, affordable, viable and achievable, with indication of projected savings.	Proposal would be cost effective with detailed savings expected over project delivery and beyond as a result of expected impact - spreadsheet costing, detailed project expenditure and projected forecast provided attached as appendix.
The risks of working at scale have been considered	Proposal shows no consideration of risk, nor how risk could be managed	Proposal indicates a consideration of risk management and reduction measures	Proposal includes some consideration of risks and includes a strategy, contingency plans for future risk.	Proposal includes a detailed risk register and interdependencies, including the issues that may arise as a result of delivery	Proposal clearly identifies the potential or real risk and proposes mitigating actions (including risks to the health economy)
Contracting & Procurement	Proposal does not clearly identify the implications for contracting, procurement or the implications for existing contractors or decommissioning strategy, nor timelines for procurement process as part of the application and delivery.	Project indicates how services will be impacted, what the current timeline and impact and what services and support would be required as part of the process for delivery.	Project indicates the implication for timelines and how this will be incorporated into the process for delivery.	Project clearly indicates the approach to and options considered as part of the delivery process.	Project clearly identifies the implications for contracting, procurement and the implications for existing contractors and decommissioning strategy, outlining how the contract will achieve real objectives in the appropriate contractual schedules.

Proposed governance flowchart for issues delegated to ICS-level

Stage 4

Formal approval at one or more of these bodies (as required)

CCG Governing Bodies

CCG Joint Committee

FT Boards

FT Committees in
Common

Stage 3

Sign-off from ICS stakeholders

Health Strategy Group
(Clinical and Managerial Leadership)

Stage 2

Quality assurance

ICS Management Group

Clinical Leadership Group

Financial Leadership Group

Stage 1

Development of workstream proposals

PROPOSALS FOR JOINT WORKING



Questions for consideration

- Is a flowchart more helpful than developing an annual work programme
- Who would be best placed to carry out an assessment of commissioning proposals?
 - Sub group of the Joint Committee
 - Clinical Leadership Group
 - ICS Management Group
 - Other?
- How could the proposed scoring criteria be improved?

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