

**Commissioning Executive Team (CET)
and Planning and Delivery Group (P&DG) Update**

Governing Body meeting

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6 June 2013

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Key messages	
<ul style="list-style-type: none"> • CET has worked up proposals for a Capitated and Outcome-Based Incentivised Contract (COBIC) approach to Musculoskeletal (MSK) Services in Sheffield which builds on the agreements reached at Governing Body. • CET will agree the outline and process of the CPA contract for primary care to support the reduction of emergency admissions as part of the system wide RFT programme • Planning and Delivery has agreed to the establishment of an Urgent Care Board, to target A&E performance and develop the proposed urgent care centre within A&E 	
Assurance Framework (AF)	
<p>Risk Reference Number: 941 (2012/13)</p> <p>How does this paper provide assurance to the Governing Body that the risk is being addressed</p> <p>2012/13 3.1.1A - Robust governance structure in place to deliver clinical commissioning.</p> <p>2012/13 3.1.1B - Delivery Board now disbanded and fortnightly Planning and Delivery Group created in its place, which brings together QIPP programme managers and contracting leads, with all CET GPs present and one of the Clinical Directors; this meeting is chaired by a CET GP.</p> <p>2012/13 3.1.1C - Progress on 2012/13 QIPP is monitored internally through Director led moderation sessions and risk assessment made; this feeds CCG Committee reporting and monthly reports to Cluster. Reporting based on achievement of milestones, activity data and finance information. Quality improvement stories shared through newsletter.</p> <p>2012/13 3.1.1D - Financial and Operational performance is a standing item on CET agenda.</p> <p>Is this an existing or additional control Existing (2012/13 as above)</p>	

Equality/Diversity Impact
<p>Has an equality impact assessment been undertaken? No</p> <p>Which of the 9 Protected Characteristics does it have an impact on? There are no specific issues associated with this report.</p>
Public and Patient Engagement
None required.
Recommendations
The Governing Body is asked to note the update.

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1. Introduction

This paper sets out the current key issues being addressed by the CET and the P&DG and provides a forward look to potential commissioning issues that will need to be addressed or will be subject to further work and involvement of the committee.

1.1 Commissioning Executive Team (CET)

- Working up the proposals for a COBIC approach to MSK Services in Sheffield and building on the agreements reached at Governing Body on options for building on the excellent clinical engagement work to date.
- Reviewing the evaluation of the Dykes Hall Multi-Disciplinary Team (MDT) approach and its learning for an approach across primary/community care and in particular the development of the Care Planning Approach (CPA).
- Reviewing the system performance across the urgent care system and actions to improve access, service options and flow.
- Reviewing the Home of Choice service under the Right First Time (RFT) programme and making recommendations on next steps.
- Overseeing the development of new proposals for the Headache and Migraine Service for primary care.
- Agreeing the outline and process of the CPA contract for primary care to support the reduction of emergency admissions as part of the system wide RFT programme.

1.2 Planning and Delivery Group (P&DG)

- Clarity on the statutory Information Governance involving financial and clinical implications.
- Confidential briefing to be circulated around contracts with providers
- Business case templates process – important that the proforma is not prescriptive and that quality is involved throughout.
- Proportionality in the review process for 21 services for the Local Enhanced Service (LES) approach – clinical and managerial leads to be identified with actions to dovetail with Commissioning Intentions process.
- Procurement of fast track domiciliary care proposal was agreed to by P&DG.
- Proposed Continuing Health Care (CHC) guidance was approved with agreement that comment from the Local Authority (LA) around refunds and backdated decisions be followed up with deadline for response.
- A clear summary of the CCG assurance framework was noted, and how it may affect reporting.

- An Urgent Care Board is to be established to target A&E performance and pushing forward the new proposed urgent care centre within A&E.

2. Recommendation

The Governing Body is asked to note the report.

Ian Atkinson
Accountable Officer

May 2013