

Specialised and Collaborative Commissioning Summary Report

Governing Body Meeting

2 May 2013

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1. Introduction

This report summarises the latest key issues in relation to South Yorkshire, Bassetlaw, North Derbyshire and Hardwick CCG collaborative, CCGCOM, the Yorkshire and the Humber Specialised Commissioning Operational Group (SCOG) and South Yorkshire and Bassetlaw Commissioning Consortium (SYCOM) collaborative commissioning commitments. The report focuses on those areas that will contribute towards Sheffield CCG priorities and aims to enable effective end-to-end commissioning of pathways of care.

The key strategic Board meetings that have taken place in the current period are detailed below, including a summary of the issues raised that are likely to impact upon the Sheffield health economy. It should be noted that due to timings of meetings and publication of formal minutes there will be a time lag between this report and the relevant Board meetings.

2. Summary

This report provides a summary of key issues covered by CCGCOM Board.

3. Recommendation

The Governing Body is asked to note the summary report.

Paper prepared by Will Cleary-Gray, Senior Commissioning Manager Specialised, Collaborative and Cancer Commissioning

On behalf of Tim Furness, Director of Business Planning and Partnerships

23 April 2013

Enclosure: A

NHS South Yorkshire and Bassetlaw

CCGCOM Meeting

Friday 5 April 2013

1.00 – 3.00 pm – Langsett Room, Don Valley House

1.	Attendees:		
	Tim Moorhead - Chair, Ian Atkinson, , Chris Edwards, Phil Mettam, Nick Tupper, Steve Kell, Chris Stainforth, Tim Furness, Matt Powls.		
	Apologies: Richard Cullen, Mark Wilkinson, Jackie Pendleton		
2.	Declarations of Interest		
	None.		
3.	Minutes and Matters arising from 1 March 2013		
	CS and NT were not present at the meeting otherwise minutes were agreed as accurate.	Agenda	
	Matters Arising Collaborative commissioning – it was agreed need more CCG clinical input to be reflected in SYCOM Terms of Reference. TM to attend	IAA	
	999 – Memorandum of Understanding has been circulated.		
	LAC tariff - It was confirmed will use national tariff for recharging cross border assessments.		
	PTS – Sheffield will lead.		
	The group noted the need to discuss future arrangements for chairing CCGCOM and would discuss at the meeting in May.		
4.	Contract Negotiations		
	Sheffield SHSC – signed, YAS agreed, STH and SCH outstanding. CCG reported as nearly there, but specialised services contract not yet near and providers unwilling to sign until spec commissioning also agreed. Happy with progress on provider CIP assurance.		

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	Doncaster As SYCOM report.	
	Bassetlaw As SYCOM report.	
	Rotherham In dispute with Area Team on spec commissioning baseline. RFT given extension on deadline for submitting provider CIP to monitor.	
	N. Derbyshire CNDRH agreed.	
5.	Divert plan for acute providers	
	As SYCOM.	
6.	Revised CCG Workplan	
	SCNs – CO lead noted, managerial input should draw on existing. Local arrangements to be considered when SCN arrangements are known. ODNs – TF agreed to write to Eleri to confirm leads. Other revisions – see April draft. Policy issues to be on agenda as it comes up.	TF
7.	CSU Customer Delivery Board	
	NT updated CCGCOM on outcome at last meeting of Customer Delivery Board, now called leadership Forum. Issues discussed included THE need for clinical involvement integration at West and South Yorkshire (which is managerial, not operational, integration). Noted need to determine requirements for 14/15 and beyond by September. Will need CSU to provide prices by then. Meetings will be held monthly for next few months.	
	It was agreed need to consider future requirements across SYB CCGs — might be scope for collective procurement of alternatives. Item to be on future agendas to share experience of support from CSU and consider alternatives if necessary.	TF / agenda
8.	Primary Care Quality	
	A workshop has been arranged for 30 April 2013. NT described the proposed agenda with presentations from CCGs, Area Team and national perspective, then discussion on scenarios to explore what quality is and who does what. Just Eleri, Karen, David and Margaret from Area Team. CCG representation, senior manager and clinician. Sheffield want locality representation too. Aim is to determine respective responsibilities with a paper from CCGCOM, then discussion with Area Team at SYCOM, and also needs discussion with LMCs. Need to conclude urgently.	

9.	Survivorship (Macmillan and Primary Care Projects in Cancer) TF presented an update of the CCGCOM proposal for Macmillan funding for a South Yorkshire and Bassetlaw-wide survivorship transformational project. The proposal will provide leadership and coordination for the existing pilots across CCGCOM and would take forward phase 2 of the Routes from Diagnosis Work. It was also agreed that NHS Sheffield CCG would host and take forward the proposal on behalf of CCGCOM. Approved.	
10.	NHS 111	
	It was confirmed that the launch of 111 has not yet happened. Roll out subject to NHS England approval at implementation. CCGs advised by NHSE not to enforce contractual penalties. Meeting with Area Team on Monday. Roll out may not be for several weeks.	
	Contract management costs lower than previous 999 only cost, so good value. YAS committed to CBUs – IAA urged CCGs to also commit to going.	
	DoS post needs extending as per paper. Approved.	
11.	Any Other Business	
	No further business	
12.	Date of Next meeting Friday 3 May 2013, 1.00pm	