

**Commissioning Executive Team (CET)
and Commissioning Executive Approvals Group Update**

Item 17c

Governing Body meeting

4 December 2014

Author(s)	Ian Atkinson, Accountable Officer
Is your report for Approval / Consideration / Noting	
Noting	
Are there any Resource Implications?	
No	
Audit Requirement	
<u>CCG Objectives</u>	
<i>Which of the CCG's objectives does this paper support?</i>	
This paper provides assurance that risks will be identified and managed to help ensure the achievement of the CCG's objectives.	
<u>Equality impact assessment</u>	
<i>Have you carried out an Equality Impact Assessment and is it attached?</i> No.	
There are no specific issues associated with this report.	
<u>PPE Activity</u>	
<i>How does your paper support involving patients, carers and the public?</i>	
None required	
<u>Recommendations</u>	
The Governing Body is asked to note the report.	

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1. Introduction

This paper sets out the current key issues being addressed by the CET and the CET Approvals Group 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)

- **Proposed Commissioning of Pharmacy Extended Hours Service** – agreed to commission, via formal procurement, a service in one city centre location.
- **Independent Living Solution specification** - CET approved the proposal to proceed to a competitive procurement exercise of an Independent Living Solution based on the new service specification, noting that although the proposed procurement exercise will be undertaken by Sheffield City Council, the CCG will be included in the decision making process as the co-commissioner of the service (via a refreshed Section 75 agreement. An Invitation to Tender (ITT) will be issued nationally in mid November and the contract process will be completed by the end of February 2015.
- **Personal Health Budgets – Implementation Plan for patients eligible for Continuing Health Care** - CET agreed to proceed with the proposed plan for implementing Personal Health Budgets (PHB) for patients eligible for CHC in accordance with the CCG's requirement to implement the 'Right to Have' from 1 October 2014.

1.2 CET Approvals Group

The following projects have been considered and the following agreed:-

- **Pulse Oximeter in Care Homes (2014-10-28-1)**
Decision: Approved
Rational for decision: Pre-commitment of £5K of £250K non recurrent funding. Supports CCG intentions for reducing avoiding patient admissions to hospitals.
- **MacMillan Cancer Survivorship: Vocational Rehabilitation Service (2014-10-28-2)**
Decision: Defer
Rational for decision: Funding may or may not be available but should be determined by Sheffield Programme for Integrated Commissioning as part of the Keeping People Well at Home project within this programme.

- **MacMillan Cancer: Survivorship/Age UK – Independent Living Co-ordinator (2014-10-28-3)**
Decision: Defer
Rational for decision: Funding may or may not be available but should be determined by the Sheffield Programme for Integrated Commissioning as part of the Keeping Well at Home project within this programme.

- **Rapid Response Service (2014-11-11-1)**
Decision: Approved
Rational for decision: This is the right time for the proposal – if delivered at a pace will influence winter pressures as a preventative action as intended. Need for upskilling of nursing staff. Potential for outcomes of projects to help inform joint commissioning work on Keeping people Well at Home.

- **CAMHS Tier 3.5 (Outreach) (2014-11-11-2)**
Decision: Approved with the following conditions:
 1. Agreement reached with NHS England to enter into a 'gain/risk share' for related reductions in expenditure in Tier 4 services and so potentially allowing investment to continue into 2015/16.
 2. Assurance that the service can be implemented this financial year eg staff recruited
Rational for decision: Appropriate time for pilot of CAMHS Tier 3.5 (Outreach) service. Current CAMHS Tier 4 service is not always cost effective. Supports Early Intervention agenda. Learning opportunities for CYP Crisis Care.

- **6/12 Month Stroke Review Service (2014-11-11-3)**
Decision: Approved
Rational for decision: Approved extension until March 2015 only.

- **Electronic Palliative Patient Care Co-ordination System (EPACCS) (2011-11-11-4)**
Decision: Approved
Rational for decision: Further grant approved for current EPACCS at St. Luke's Hospice. Supports 2015/16 plans for wider EPACCS.

- **Improving Patient Self-care Education (2014-11-11-5)**
Decision: Approved
Rationale for decision: Current lack of health awareness training with localities which this will start to address. Connection to joint commissioning work on Keeping Well at Home.

2. Recommendation

The Governing Body is asked to note the report.

Ian Atkinson
 Accountable Officer
 November 2014