

Specialised Commissioning, Yorkshire and the Humber Developing a co-commissioning approach with CCGs

Item 12g

1. Background

- 1.1. The responsibility for Specialised Commissioning in Yorkshire and the Humber sits with the South Yorkshire and Bassetlaw Area Team of NHS England as responsible commissioner. It is evident however that the Specialised Commissioning Team cannot operate in a vacuum but need close and effective working relationships with the other Area Teams in Yorkshire and the Humber, who have a system leadership role in their individual areas and CCGs who are co-commissioners of local providers.
- 1.2. NHS England at national level is currently reviewing the portfolio for specialised services but this work is not yet concluded and discussions are taking place with the Commissioning assembly and the Secretary of State around both scope and pace in relation to any transfer of commissioning responsibility to CCGs.
- 1.3. During 13/14 the relationship between the Specialised Commissioning Team for Yorkshire and the Humber and other Area Teams and CCGs has been variable – focussing on informing/sharing the overall position; derogation outcome and commissioning intentions for 14/15.
- 1.4. Clinical input into specialised commissioning has been provided by embedded PHE consultants; the SYB Area Medical Director, Nurse Director; CRGs; the National Medical directorate; Yorkshire and the Humber SCNs and their associated clinical leads. The interface with CCGs clinical leadership has been through the sub regional commissioning collaboratives, engagement with SCNs and with individual CCGs on ad hoc service development and reviews in individual localities. During 14/15 this needs to be strengthened, with greater transparency and engagement if local care pathways are to be improved, recognising that accountability for the specialised commissioning spend sits with NHS England's SYB Area Team.
- 1.5. The challenge being faced nationally by Specialised Commissioning is enormous, with a significant financial challenge as increased demand and advancements in medicine and technology put enormous strain on available budgets, the need to secure improvements in clinical outcomes and quality and to address variation. Alongside this is the need for transformational change at a much larger scale if we are to deliver sustainable and effective solutions for the future.
- 1.6. It is evident that Specialised Commissioning needs strengthening
 - more robust contract management
 - delivery of productivity gains
 - standardisation of care processes

- services benchmarked against the best international providers to deliver quality outcomes
- better integration with whole patient pathway
- clinically led change

2. Proposal

2.1 This proposal has been developed with input from CCGs, and the other Yorkshire and the Humber Area Team in an attempt to strengthen and improve local arrangements, whilst recognising where accountability currently sits. It sees the establishment of a Yorkshire and the Humber wide Specialised Commissioning Oversight Group (SCOG).

2.2 The SCOG will involve Clinical Commissioners from the CCGs, South Yorkshire and Bassetlaw Area Team as responsible commissioner, the other 2 Area Teams and Strategic Clinical Networks.

2.1. The Oversight Group will ensure commissioners across Yorkshire and the Humber are appropriately engaged in the operational delivery, planning and contracting for specialised services. The meeting will consider all relevant issues relating to the performance, quality and reform of specialised services across Yorkshire and the Humber. This will include whole system clinical care models and strategy

2.2. It is proposed that this group is advisory in nature, with active involvement and engagement by CCGs but advisory to the responsible commissioner (NHS England). This is similar to category A as defined in the co-commissioning arrangements for primary care.

2.3. Terms of reference for the Oversight Group, including membership are attached at Appendix A.

3. Sub Regional arrangements

3.1. Discussions will take place at the sub regional commissioning collaboratives around local arrangements at sub regional level to meet local needs and to ensure that local clinical leadership is able to drive local change. As part of these discussions arrangements will be agreed to strengthen the contract management arrangements with providers, to ensure consistency in approach by the specialised and CCG commissioners and to ensure that issues such as QIPP schemes etc. are understood by all commissioners and plans are aligned.

Appendix A

Yorkshire and the Humber Specialised Commissioning Oversight Group Draft Terms of Reference

1. Purpose

To ensure that commissioners across Yorkshire and the Humber are appropriately engaged in the operational delivery, planning and contracting of specialised services. The group will operate with the active involvement and engagement of all members, whilst recognising that NHS England (SYB) is the responsible commissioner.

2. Membership

South Yorkshire and Bassetlaw Area Team:-

Eleri de Gilbert, Area Director

Brian Hughes, Interim Director of Specialised Commissioning

Dr David Black, Medical Director or Margaret Kitching, Nurse Director

Laura Sherburn, Head of Specialised Commissioning

Michael Clements, Head of specialised Commissioning Finance

Carol Stubley, Director of Finance

West Yorkshire Area Team:-

2 representatives (to be confirmed)

North Yorkshire and the Humber Area Team:-

2 representatives (to be confirmed)

CCG representatives covering CCGs across:-

North Yorkshire and the Humber	-	Cathy Kennedy (NE Lincolnshire CCG)
	-	Dilani Gamble (Harrogate and Rural District CCG)
South Yorkshire and Bassetlaw	-	2 representatives (to be confirmed)
West Yorkshire	-	2 representatives t (to be confirmed)

Strategic Clinical Networks (SCN):-

Graham Venables, Clinical Director

Public Health England:-

Dr Matt Day Consultant (Specialised commissioning)

3. Role of Group

a) In year contract Performance

- To receive updates on in year contract and financial delivery.
- To receive updates on QIPP in year delivery.
- To agree actions in case of variances.

b) Commissioning strategy

- Development of local strategy for specialised services, based on local priorities, within the context of national specialised commissioning strategy and guidance.
- Agree new approaches to commissioning care where it promotes integrated care and clinical oversight for patients, in particular services and care pathways to include a prime contractor model and co commissioning arrangements with CCGs.
- Contribute and endorse 2015/16 QIPP programme for specialised services, ensuring that wider system risks are understood and mitigated.
- Receive updates on national specialised commissioning arrangements and strategy.

c) Quality of services

- Oversee delivery of services against agreed national standards, specifications, KPIs.
- Receive analysis of derogation on specification compliance by provider and services and monitoring reports on Action Plans by providers.
- Contribute to the refresh and focus of CQUIN schemes to directly contribute to improving outcomes with challenging but achievable goals.

4. Chairing

The meeting will be chaired by Area Director (South Yorkshire and Bassetlaw) as Responsible Commissioner.

5. Servicing of meetings

The meetings will be serviced by the South Yorkshire and Bassetlaw Area Team, Director of Commissioning Administrative Team.

6. Frequency of Meetings

The group will meet monthly starting in September 2014.

7. Review of terms of reference

The terms of reference will be reviewed in March 2015 or earlier if commissioning responsibility for some services, currently prescribed as specialised services, are transferred to CCGs.

August 2014