

Report of the Clinical Commissioning Group (CCG) Task Group

Purpose of report

1. To present the recommendations of the CCG Task Group and seek endorsement for them.

Background

2. The Health Select Committee (HSC) held a workshop in October 2012 to bring together partners from health and social care and also to assist them in identifying topics for the HSC work programme. The Wiltshire Clinical Commissioning Group (CCG) was identified as a key theme.
3. At its meeting on 15 November 2012, the HSC agreed to establish a Task Group on the CCG, this having previously been endorsed by the Overview and Management Committee on 18 October 2012.
4. The Task Group met on 11 February 2013 with the following membership:

Cllr Nigel Carter
Cllr Chris Caswill
Cllr Peter Colmer
Cllr Jose Green
Cllr Peter Hutton
5. The Task Group received evidence from Deborah Fielding, Accountable Officer, CCG.
6. The Task Group reviewed the following documents:
 - Strategic Plan for the Wiltshire Clinical Commissioning Group 2013 – 2014 (Part 1)
 - Operating Plans 2012 – 2013 (Part 2)
 - Draft Commissioning Intentions 2013 – 2014 (Part 3)

Summary of information

7. CCGs were established under the Health and Social care Act 2012 and come into effect on 1 April 2013. They have responsibility for local commissioning and are General Practitioner (GP) led through local general practices. CCGs have to have regard to Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies, developed through Health and Wellbeing Boards, when commissioning care.

8. To be fully operational the CCG needs to be authorised by the NHS Commissioning Board (NCB). It is required to satisfy 119 criteria over six domains, with each criterion needing to achieve 'green' to be authorised. Following the most recent assessment, the CCG has 11 'red' criteria. The 11 'reds' have been moderated by the NCB and feedback is such that the CCG is confident that it will be authorised by 1 April 2013.
9. The NCB has developed robust governance arrangements around contracts, procurement and conflict of interests etc, which the CCG is required to follow.
10. The CCG comprises three local groups, North East Wiltshire (NEW), West Wiltshire, Yatton Keynell and Devizes (WWYKD) and Sarum, covering the Salisbury area. Each group has Director, a GP chair and one other elected GP, all of whom serve on the CCG Governing Body.
11. Individual Joint Strategic Assessments (JSA) will be 'clustered' to reflect the three local CCG groups and progress will be monitored against them.
12. There will be variance across the local groups, to reflect the different areas, but it is expected that outcomes for patients will be the same across the county. Decisions on patient care will be taken on clinical grounds not financial considerations. In prescribing, GPs will follow guidance from the National Institute for Health and Clinical Excellence (NICE).
13. The CCG is keen to engage with stakeholders to help inform future commissioning and to provide feedback on services. It will also work collaboratively with the Council to provide services.
14. The breadth of the topic of the CCG is such that the Task Group felt that it could not agree Terms of Reference for a new Task Group and it is suggested that the new Task Group should devise its own Terms of Reference.

Recommendations

The Task Group recommends that:

- 1. The Health Select Committee, within the newly-elected Wiltshire Council, should establish a CCG Task Group to undertake the recommendations below.**
- 2. The Task Group should devise its own Terms of Reference.**
- 3. The Task Group should investigate what progress the CCG makes against the priorities identified in its Strategic Plan 2013 -14.**
- 4. The performance of each of the three local groups of the CCG should be monitored, with a review requested from each area within their first year.**
- 5. The Task Group examines what mechanisms the CCG has in place to deal with conflicts of interest that could arise during the commissioning/procurement process.**

- 6. The Task Group considers what arrangements the CCG is making to engage with patients and the public, and what mechanisms are in place to measure and monitor the effectiveness of these.**
- 7. The Health Select Committee considers identifying an individual service, commissioned by the CCG, with a view to establishing a further Task Group to investigate the 'patient pathway' within that service.**

Clinical Commissioning Group Task Group

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