

Health and Adult Social Care Scrutiny Committee

Report of the Chief Officer, Dudley Clinical Commissioning Group

<u>Update on Development of the Dudley Clinical Commissioning Group</u>

Purpose of Report

- 1. This report sets out progress to date on the development of the Dudley Clinical Commissioning Group. In particular, it covers:-
 - The Authorisation Process
 - The Development of the Commissioning Support Unit
 - Implementation of Any Qualified Provider

Background

- 2. The Committee will recall that the Dudley CCG was established on the 1 April 2011 as a sub committee of Dudley PCT, with a delegated budget and a number of PCT staff assigned to provide managerial support.
- 3. Since that time significant work has taken place to ensure that the CCG:-
 - has appropriate governance arrangements
 - has appropriate organisational arrangements
 - is fulfilling its commissioning responsibilities
 - has taken appropriate steps to meet the requirements for formal authorisation as an NHS body
- 4. These issues are dealt with below.

Governance arrangements

- 5. The current formal status of the CCG is that of a sub committee of the PCT. The CCG is, effectively, a membership based organisation constituted by the 52 GP Practices in Dudley.
- 6. The CCG Board is, subject to final appointments in one or two cases, now fully established and consists of the following members:-
 - 10 GP Members
 - 1 Co-Opted GP member
 - 1 Appointed Nurse Member
 - 1 Appointed Secondary Care Doctor
 - Chief Executive of Dudley MBC
 - Lay Member Governance and Audit
 - Lay Member Champion for Patient and Public Engagement
 - Chief Officer
 - Chief Finance Officer

Organisational Arrangements

- 7. Each clinical member of the CCG Board has responsibility for managing, in conjunction with appropriate managerial staff, a portfolio covering a particular clinical area.
- 8. The CCG itself has a relatively small number of staff providing direct management support under the leadership of the Chief Officer. These staff deal with the following responsibilities:-
 - Commissioning
 - Financial Management
 - Quality & Safety
 - Community Involvement and Engagement
 - Performance Management

Authorisation

9. The CCG submitted its authorisation application in June 2012. At the time of preparing this report initial feedback on the authorisation application is awaited. And the next stage in the authorisation process is a formal visit to Dudley by the Authorisation Team on Tuesday, 25th September 2012. An update on this visit will be made at the meeting.

Commissioning Support Unit

- 10. A number of support services to the CCG will be delivered by a Commissioning Support Unit covering Birmingham, Solihull and the Black Country. At the time of preparing this report negotiations are taking place with the CSU on the precise range of services to be delivered. It is anticipated that the services involved will be as follows:-
 - Contracting and Procurement
 - Information Technology
 - Financial Services
 - Communications and Engagement
 - Human Resources
 - Regional Capacity Management
 - Governance
 - Commissioning Intelligence
 - Equality, Diversity and Human Rights
 - Quality, Safety and Patient Experience
- 11. A further update on the arrangements for these services will be given to the meeting.

Any Qualified Provider (AQP)

- 12. The committee will be aware that part of the governments commitment to extend patient choice, it specifically committed to extending patient choice through the use of the Any Qualified Provider (AQP) for appropriate services.
- 13. This means that when patients are referred by their GP, they should be able to choose from a list of qualified providers who meet quality requirements, price requirements and normal contractual obligations. This already applies in terms of the existing 'choose and book' service for acute hospital procedures.
- 14. The following principles are expected to apply:-
 - providers qualify and register to provide services via an assurance process that tests the fitness of a provider to offer NHS funded services
 - commissioners set local pathways and protocols which providers must accept
 - · referring clinicians offer the patients a choice of qualified provider

- providers are paid a fixed price based on a national or local tariff and competition is based on quality not price
- 15. The original timetable was for PCTs to make three community or mental health services available through the AQP route from October 2012. The West Midlands PCT Clusters agreed to adopt a common approach to implementation wherever possible. The three services adopted were:-
 - adult hearing
 - podiatry
 - wheelchairs
- 16. At the time of writing, the qualification process is proceeding for both the adult hearing and the podiatry services. Implementation of AQP for wheelchair services has been delayed nationally pending some further work around the development of prices and the procurement process for wheelchairs. It is anticipated that this will be completed in early 2013.

Finance Prinary

17. There are no financial implications arising directly from this report.

Law

18. The Clinical Commissioning Group is being established under the provisions of the Health and Social Care Act 2012.

Quality Impact Assessment

19. There are no quality issues arising directly from this report. Quality Impact Assessments have been undertaken for each individual AQP service identified above.

Recommendation

20. The Health Overview and Scrutiny Committee is asked to note this report.

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