

Item No. 13.	Classification: Open	Date: 21 October 2015	Meeting Name: Health and Wellbeing Board
Report title:		Primary Care Co-commissioning Update	
Wards or groups affected:		Southwark-wide	
From:		Andrew Bland, Chief Officer, NHS Southwark Clinical Commissioning Group	

RECOMMENDATIONS

- The board is requested to:
 - Note the progress made on the development and operation of primary care co-commissioning in the borough.

EXECUTIVE SUMMARY

- The purpose of this of this paper is to update the Health and Wellbeing Board (HWB) on the development and operation of Primary Care co-commissioning in the borough following the decision of NHS Southwark CCG to enter in to joint commissioning arrangements with NHS England (London Region) for general medical services from the 1 April 2015.

BACKGROUND INFORMATION

- In line with local commissioning intentions to adopt a population based approach to commissioning of local services the CCG entered in to joint commissioning arrangements with NHS England (London Region) to ensure a greater alignment of activity between those bodies responsible for the commissioning of different aspects of local health provision. In doing so the CCG, together with its HWB Board partners, will seek to ensure a greater integration of care that focuses upon the specific needs of our population and that gives focus to the holistic needs of residents rather than the services they receive from any one part of the health and social care system in isolation.
- In Southwark arrangements allow for joint commissioning of general practice in the borough with NHS England (London Region). This is a move away from NHS England's sole responsibility for the commissioning of these services following a single operating model (SOM) and provides local commissioners with the opportunity to exert greater influence and have the ability to determine and implement locally sensitive commissioning intentions. However, this arrangement does not allow for the 'Full delegation' of responsibilities in this area. Under fully delegated arrangements the CCG would take full control of commissioning activities along with delegated responsibility for associated budgets for general practice services. Under joint arrangements the statutory responsibility for primary care resides with NHS England (London Region), including budget responsibility.

KEY ISSUES FOR CONSIDERATION

5. Primary Care Joint Committee

- 5.1. These joint arrangements are undertaken by a Southwark Primary Care Joint Committee (PCJC) that comprises a voting membership of some CCG Governing Body members and the mandated NHS England Commissioners. The membership of the committee also includes non-voting participants from the HWB Board, Healthwatch and the Local Medical Committee. The committee meetings are held bi-monthly in public.
- 5.2. Under current arrangements the Southwark PCJC meets together with the other five joint committees in the boroughs that make up south east London (Bexley, Bromley, Greenwich, Lambeth and Lewisham). Each borough operates at the same level of commissioning (Joint) in south east London and the committees meet together in order to make most efficient use of administrative resource, to allow the sharing of best practice, and to allow for the most effective management of commissioner time and resource where issues are similar or the same for each of the six boroughs. It is important to note that the committees are separate and are not 'Committees in common' but rather each PCJC is a prime committee of individual CCG Governing Body.

6. Areas of focus to date

- 6.1. To date the PCJC has met three times in Public in the months of June, August and September 2015. The issues and areas of decision making for the committee have been a blend of agenda items that pertain to general practice in Southwark only and the consideration of regional issues (to date at a London level) where Southwark is impacted upon. The papers and minutes of these meetings are available on the CCG's website.

- 6.2. Over the first six months the key focus of the committee has been as follows:

6.3. *Start up and governance*

The co-commissioning arrangements for England are new and the committee has considered and agreed the operating model for the operation of co-commissioning for London and in each borough. Those arrangements as they relate to London are now established in an Operating Model that was approved in late September 2015, having been subject to committee review in the preceding months. That Operating Model is attached for the HWB Board's reference (appendix A).

It is important to note that pan London arrangements and their operation is supported by locally focused work groups that report to the PCJC and the other commissioning committees' of the CCG. The operating model is designed to enable local based decision making wherever possible.

6.4. *Primary Care Quality, Performance and Finance*

Each committee meeting has received reports and considered actions in each of these areas. In the case of quality and performance this has been with the aim of understanding the current position and seeking assurance upon the actions that are being pursued by commissioners, working together, will address areas of concern and ensure improvement going forward.

In the case of financial reporting, the committee received reports from NHS England (London Region) as the body responsible for the general practice budget. Whilst beyond the responsibility of CCG commissioners it is clearly important that the impact of budget performance and decision making is understood at all times and agreed to be aligned to the commissioning intentions of the system, when taken together.

6.5. *Alignment of commissioning intentions*

The committee has sought to understand and take action to align the commissioning intentions of NHS England with those of local commissioners. However, it is important to note that local approaches to commissioning of integrated services, and the Southwark based strategies that underpin them, have always involved NHS England commissioners, albeit in more informal arrangements, leading up to these joint arrangements. As a result the focus of Southwark discussions has been on ensuring the implementation of national, regional and borough based plans remain aligned.

At the present time the committee, along with all committees in England, is considering the implications of a nationally mandated Personal Medical Services (PMS) review that should be completed by the end of this financial year. The majority of practices in Southwark hold this type of contract that has historically awarded, through the contract, additional funding for services undertaken over and above the 'core' national contract. The majority of these contracts were awarded to local practices in the late 1990s.

The purpose of the PMS review is to provide assurance that all additional or 'premium' funds made available by this contract are delivering services over and above 'core' services, that they remain locally responsive and that they designed and delivered in such a way that seeks to reduce inequalities. Furthermore the review also seeks to ensure that going forward all residents, irrespective of the practice they are registered with have access to the same range of services and as a result the review seeks to ensure that non-PMS contract holders have the same opportunity to deliver services and be remunerated on that basis.

It is important to note that whilst the majority of England has not been subject to PMS reviews since the inception of the contract, a local review was undertaken by the NHS Southwark (Primary Care Trust) in 2012/13 and as a result many of the objectives of the review have been addressed relatively recently and the impact will be less than in other areas as a result. There is, however, an important piece of work to be overseen by NHS England and the CCG to ensure the commissioning of services remains effective through the contracts that enact it.

6.6. *Contractual action*

The committee receives recommendations upon contractual actions that pertain to the borough. These relate to the contracts held in this borough and address matters either relating to all practices (e.g. Locum reimbursement policies that relate to England and / or London) or to specific practices where contractual action is required (e.g. Breach notices). In the case of both, recommendations are received and considered in public and most often require the committee to assure themselves that contract terms and conditions are being correctly applied and with reference, where appropriate, to local commissioning intentions.

7. Operation of Joint Commissioning in Southwark

7.1. The HWB Board has received and approved the local arrangements for co-commissioning in the borough at the end of 2014/15 at the point at which the CCG made its application. Those arrangements have been enacted in full.

- The membership of the committee has been constituted in accordance with its terms of reference and is chaired by a Lay member of the CCG Governing Body
- Meetings and the papers that support them are in public and there is opportunity for members of the public to ask questions of the committee at each meeting
- The committee has enjoyed the regular attendance of a Local Authority representative (on behalf of the HWB Board) and of a Healthwatch representative
- The committee acts in accordance with national requirements for, and the CCG policy on conflicts of interest (COI). This includes:
 - Oversight by a Lay Member COI Guardian
 - A fully maintained, updated and publically available register of interests
 - Public declaration of interests and arrangements to ensure the appropriate involvement of committee members where a conflict is identified
 - Regular referral to a the CCG Conflict of Interest Panel, comprised of non-conflicted members of the CCG Governing Body, in line with the usual processes of the CCG

8. Future work plan

8.1. The PCJC for Southwark will give focus to the following areas in 2015/16, over and above its core responsibilities:

- The full and effective completion of the PMS review
- The implementation of the CCG's Primary and Community Care strategy and its emergent commissioning intentions for integration, outcomes based commissioning and new models of care
- The development of commissioning intentions for 2016/17 and the five year planning period to 2020/21

8.2. In addition the CCG will need to consider any enhanced level of co-commissioning responsibility (full delegation) it wishes to assume in future years and engagement on this with local residents, CCG members and partners (including the HWB Board) will be an area of work over the next three months.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
None		

APPENDICES

No.	Title
Appendix 1	NHS England Operating Model

AUDIT TRAIL

Lead officer	Andrew Bland, Chief Officer, NHS Southwark Clinical Commissioning Group	
Report Author	Andrew Bland	
Version	Final	
Dated	9 October 2015	
Key decision?	No	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer title	Comments sought	Comments included
Director of Law and Democracy	No	No
Strategic Director of Finance and Governance	No	No
Date final report sent to Constitutional Team		9 October 2015