

Governing Body meeting (held in public)

DATE: 30 July 2015

Title	Development of the Commissioning Intentions 2016-2018
This paper is for Discussion	
Recommended action for the Governing Body	That the Governing Body: Note the update regarding the progress achieved to engage with stakeholders to draft and inform the Commissioning Intentions Document to cover the period from 2016/2017 onwards.
Potential areas for Conflicts of interest	None.
Executive summary	<p>The purpose of this paper is to update the Governing Body on the progress in relation to the development of Commissioning Intentions for the period 2016/2017 onwards. In line with the national published guidance, it is the CCG position that the robust plan developed and agreed during 2014, provides a robust base upon which to develop and agree more detailed future plans.</p> <p>It is expected that the CCG will be required to submit first draft plans to NHS England towards the end of the current financial year. The CCG has completed the following tasks to ensure that a robust submission is achieved.</p> <ul style="list-style-type: none"> • 11th June 2015– Initial Briefing and discussion at the GP Engagement Event. The progress and achievements to date, against the current commissioning intentions plan were discussed, as part of ‘You Said, We Did’ briefing. It was highlighted that where a commissioning plan or transformation (e.g. Children and Young people), this would carry forward to the next commissioning intentions plan. The membership was briefed on the plans to use the clinical leads to work up and share the emerging commissioning plans.

Clinical Commissioning Group

	<ul style="list-style-type: none"> • 25th June 2015- Governing Body Seminar: discussion and validation of emerging clinical ideas and presentation of high level plans, with a view to shaping the later clinical lead sessions • 8th July 2015-a clinical lead workshop was organised, supported by London Borough of Bexley and BVSC colleagues, attended by a significant number of clinical leads. Members of the workshop, considered the South East London 5 Year Strategy plan and Five Year Forward View and how these dovetail with the local priorities. The output of the workshop was a short list of ideas for further scope and workup. • 23rd July 2015- The CCG teams attended a meeting of local voluntary sector partners to explain the national policy direction (Five Year Forward View) and the local headlines for transformation. Members of this workshop were briefed that a further larger stakeholder group would be organised in due course, later in the year. This is to ensure that the process is live and engaging for the whole CCG and borough stakeholders, so that the Commissioning Intentions serve as a uniting strategy, not a “technical” plan alone. <p>Going forward, it is expected that the Commissioning Intentions plan will be signed off at the Governing Body meeting on 26th November 2015. To support formal sign off and endorsement, the plan will be presented as it comes together at the GP event in September, PCAG, as well as the planned wider provider and other stakeholder groups. Any changes to national policy will be incorporated as the process continues.</p> <p>A task and finish internal Task and Finish Group with a lead representative from each Directorate team has been established to oversee the completion of a robust plan.</p> <p>A further update will be available at the next Governing Body.</p>				
<p>How does this paper support the CCGs objectives? **</p>	<table border="1" style="width: 100%;"> <tr> <td data-bbox="378 1512 563 1809"> <p>Patients:</p> </td> <td data-bbox="563 1512 1474 1809"> <p>The Commissioning Intentions Planning Process reconfirms our Joint Health and Wellbeing Strategy priorities, as well as embedding self-management for long term conditions. It will ensure that integrated and collaborative commissioning with the council and fellow CCGs, as well as NHS England, is a key enabler of success. We can achieve more together than apart.</p> </td> </tr> <tr> <td data-bbox="378 1809 563 1951"> <p>People:</p> </td> <td data-bbox="563 1809 1474 1951"> <p>Organisation and Workforce Development is a key commissioning “enablers”. Our own Organisational Development Plan guides the development of our own staff and we will work closely with the Academic Health Sciences</p> </td> </tr> </table>	<p>Patients:</p>	<p>The Commissioning Intentions Planning Process reconfirms our Joint Health and Wellbeing Strategy priorities, as well as embedding self-management for long term conditions. It will ensure that integrated and collaborative commissioning with the council and fellow CCGs, as well as NHS England, is a key enabler of success. We can achieve more together than apart.</p>	<p>People:</p>	<p>Organisation and Workforce Development is a key commissioning “enablers”. Our own Organisational Development Plan guides the development of our own staff and we will work closely with the Academic Health Sciences</p>
<p>Patients:</p>	<p>The Commissioning Intentions Planning Process reconfirms our Joint Health and Wellbeing Strategy priorities, as well as embedding self-management for long term conditions. It will ensure that integrated and collaborative commissioning with the council and fellow CCGs, as well as NHS England, is a key enabler of success. We can achieve more together than apart.</p>				
<p>People:</p>	<p>Organisation and Workforce Development is a key commissioning “enablers”. Our own Organisational Development Plan guides the development of our own staff and we will work closely with the Academic Health Sciences</p>				

Clinical Commissioning Group

		Centre and Health Education England to maximise innovation and plan for the necessary changing workforce that will support the Our Healthier South East London Strategy.
	Pounds:	It is intended that the future Commissioning Strategy will be carefully modelled and costed with numerous financial scenarios: upside, downside and base-case. Future QIPP planning will extensively modelled, tested and challenged through our Programme Office approach. The inclusive CCG-wide approach proposed means that financial sustainability and quality/safety will be worked on in a balanced way, together.
	Process:	The Commissioning Intentions plan serves as the foundation for our Operating Plan, which is a key requirement for continued assurance from NHS England. Involvement of patients and the public, together with good clinical engagement will ensure that we triangulate hard and soft quality trends and build an open, enabling approach.
What are the Organisational implications	Key risks	None.
	Equality	The need to gear existing programmes and show how we intend to impact on those in greatest need. This will need considerable Equality Impact Assessment work.
	Financial	The risks are well known and the main elements that need careful negotiation are the split between CCG and NHS England in terms of shifting responsibilities within Specialised Commissioning and Primary Care, as well as the continued implementation of the Better Care Fund.
	Data	None.
	Legal issues	The CCG has a statutory duty to provide access to high quality services within the financial envelope available.
	NHS constitution	We will integrate all actions to meet Constitution standards into our mainstream plans.
Engagement	Taking patients with us as we continue a real shift in the healthcare model for Bexley. Patient and Public engagement continues to be essential.	
Audit trail	It is intended that draft versions of the plan will shared with the Governing Body, PCAG and the Finance Working Group, so that financial and strategy plans receive the necessary scrutiny	
Comms plan	There is a statutory requirement to carry out wide engagement in the development of our Commissioning Intentions and as the plans emerge will be continuing discussion and iteration of these plans with all our stakeholders, providers and partners.	

Clinical Commissioning Group

	Although Patient and public involvement is embedded throughout the individual change programmes and projects that form our commissioning intentions, it is anticipated that engagement and consultation will be undertaken as appropriate for the broad emerging Commissioning Strategy, as it is developed.	
Author: Charles O'Hanlon, Deputy Director of Commissioning	Clinical lead: Howard Stoate CCG Chair	Executive sponsor: Sarah Valentine Director of Commissioning
Date	15 July 2015	