

**Clinical Commissioning Group**

**Governing Body**

**Paper Summary Sheet**

For: PUBLIC session  PRIVATE session

**Date of Meeting: 24 March 2015**

For: Decision  Discussion  Noting

<b>Agenda Item and title:</b>	<b>GOV/15/03/20 Primary Care Co-Commissioning</b>
<b>Author:</b>	Jo Cullen, Group Director WWYKD
<b>Lead Director/GP from CCG:</b>	Jo Cullen, Group Director WWYKD
<b>Executive summary:</b>	<p>At the January Governing Body session the CCG agreed to submit an expression of interest to pursue a Joint Commissioning arrangement for Primary Care with NHS England. The submission made it clear that this was subject to gaining a mandate to proceed from member practices.</p> <p>Throughout February and early March the CCG undertook a series of membership engagement events jointly with the LMC and completed a formal ballot of member practices.</p> <p>The outcome of the ballot was the the CCG was given a clear mandate to jointly commission Primary Care with NHS England.</p> <p>These changes require the CCG to establish a Joint Committee that meets in public and amend the constitution to reflect the revised scheme of delegation.</p> <p>Attached is the Joint Committee Terms of Reference requiring Governing Body approval.</p> <p>The draft work programme and Terms of Reference for the Operational Group is included for information and completeness.</p>
<b>Evidence in support of arguments:</b>	CCG Strategic Plan
<b>Who has been involved/contributed:</b>	CCG Clinical Executive, CCG Governing Body Member Practices , LMC and NHS England

<b>Cross Reference to Strategic Objectives:</b>	Links to delivery of the Wiltshire CCG Strategic Five Year Plan
<b>Engagement and Involvement:</b>	<p>A programme of GP member engagement and consultation events was run until mid-February, followed by formal ballot process.</p> <p>No public engagement has taken place at this stage, although this supports delivery of the proposed model of care which has been through intense public, patient and stakeholder engagement.</p> <p>Now that the CCG has a mandate to move forward, the intention is to run a programme of wider stakeholder engagement to ensure a clear understanding of what Joint Commissioning does and does not mean.</p>
<b>Communications Issues:</b>	Localities will be expected to develop robust communications plans with all stakeholders and public as part of their wider locality implementation
<b>Financial Implications:</b>	<p>While the CCG are not looking to move towards pooled budgets and many of the transactional arrangements will remain with NHS England, work is on-going to understand the likely staffing resource implications linked to joint commissioning.</p> <p>The proposal is that under the Joint Commissioning arrangements the management of the Locally Commissioned Services and any PMS Premium funds released through the PMS review would be delegated to this committee.</p>
<b>Review arrangements:</b>	We have the opportunity to reduce our involvement in Primary Care commissioning to 'Greater Involvement' at any time during the year and revert to Primary Care being directly commissioned by NHS England.
<b>Risk Management:</b>	A risk assessment was completed as part of the CCG submission and was submitted to NHS England alongside our application
<b>National Policy/ Legislation:</b>	<p>Five Year Forward View</p> <p>NHS England publication: Next Steps Towards Primary Care Co-Commissioning (Nov 2014)</p>
<b>Other External Assessment:</b>	CCG application will be assessed nationally by NHS England
<b>What specific action do you wish the Governing Body to take at the meeting?</b>	The Governing Body are asked to approve the Terms of Reference, including Scheme of Delegation and confirm the lay member / Non-Executive Director representation and Chair role on the Joint Committee.

## **NHS Wiltshire CCG Joint Committee Terms of Reference**

### **Role of the Joint Committee**

1. The role of the Joint Committee shall be to carry out the functions relating to the commissioning of primary medical services under section 83 of the NHS Act except those relating to individual GP performance management, which have been reserved to NHS England (and such CCG functions under sections 3 and 3A of the NHS Act as have been delegated to the joint committee).
2. This includes the following activities:
  - GMS, PMS and APMS contracts (including the design of PMS and APMS contracts, monitoring of contracts, taking contractual action such as issuing branch/remedial notices, and removing a contract);
  - Newly designed enhanced services (Local Enhanced Services and Directed Enhanced Services);
  - Design of local incentive schemes as an alternative to the Quality Outcomes Framework (QOF);
  - Decision making on whether to establish new GP practices in an area;
  - Approving practice mergers; and
  - Making decisions on 'discretionary' payment (e.g., returner/retainer schemes).
3. In performing its role the Joint Committee will exercise its management of the functions in accordance with the agreement entered into between NHS England and NHS Wiltshire CCG, which will sit alongside the delegation and terms of reference.

### **Geographical Coverage**

4. The Joint Committee will comprise NHS England Local Team, and NHS Wiltshire CCG. It will undertake the function of jointly commissioning primary medical services for Wiltshire CCG.

### **Membership**

5. The Joint Committee shall consist of:

Name	Position
Dr Mark Smithies	Secondary Care Doctor, Wiltshire CCG, Chair
Debra Elliott	Director of Commissioning for NHS England
Jo Cullen	Group Director for WWYKD and PC Programme (as delegated by AO)
Steve Perkins	Deputy Chief Financial Officer, Wiltshire CCG
Geoff Shone	Head of Primary Care Finance, NHS England
Nikki Holmes	Head of Primary Care, NHS England
Dr Toby Davies	GP Chair, Sarum
Dr Helen Osborn	GP Chair, WWYKD
Dr Anna Collings	GP Vice Chair, NEW
Elsa Brown	Primary Care Development Manager, NHS England
Dr Gareth Bryant	Medical Director for Wessex LMC (Non-Voting)
TBC	Wiltshire Council – see point 13 (Non-Voting)
TBC	HealthWatch Council – see point 13 (Non-Voting)

6. The Chair of the Joint Committee shall be Dr Mark Smithies, Secondary Care Doctor, Wiltshire CCG
7. The Vice Chair role shall be Debra Elliott, Director of Commissioning, NHS England
8. An invitation has been made to non-voting attendees i.e. both Healthwatch and Wiltshire Council and following the outcome of the ballot, these names will be confirmed and the Terms of Reference will be updated to reflect these.

### Meetings and Voting

9. The Joint Committee shall adopt the Standing Orders of Wiltshire CCG insofar as they relate to the:
  - a) Notice of meetings
  - b) Handling of meetings
  - c) Agendas
  - d) Circulation of papers
  - e) Conflicts of interest
10. Wiltshire CCG and NHS England shall have two votes per organisation. The Joint Committee shall reach decisions by a simple majority. However where a casting vote is required NHS

England will have the casting vote for any functions within NHS England's statutory obligations and Wiltshire CCG will have the casting vote on any of the CCG's statutory functions that are included within the scope of the joint committee's responsibilities.

11. The quorum necessary for the transaction of the business shall be four made up of two representatives from each Wiltshire CCG and NHS England (NHSE). A duly convened meeting of the Programme Board at which a quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested exercisable by the Programme Boards.
12. The Joint Committee shall meet quarterly and at such other times as required. Agendas and papers will be available to each member of the Programme Board in advance and preferably at least 2 working days.
13. Meetings of the Joint Committee:
  - a. Shall, subject to the application of 7(b), be held in public.
  - b. The Joint Committee may resolve to exclude the public from a meeting that is open to the public (whether during the whole or part of the proceedings) whenever publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted or for other special reasons stated in the resolution and arising from the nature of that business or of the proceedings or for any other reason permitted by the Public Bodies (Admission to Meetings) Act 1960 as amended or succeeded from time to time.
14. Members of the Joint Committee have a collective responsibility for the operation of the Joint Committee. They will participate in discussion, review evidence and provide objective expert input to the best of their knowledge and ability, and endeavour to reach a collective view.
15. The Joint Committee may call additional experts to attend meetings on an ad hoc basis to inform discussions.
16. Members of the Joint Committee shall respect confidentiality requirements as set out in the Standing Orders referred to above unless separate confidentiality requirements are set out for the joint committee in which event these shall be observed.
17. Secretariat provisions will be confirmed following the outcome of the ballot, these names will be confirmed and the Terms of Reference will be updated to reflect these.
18. The secretariat to the Joint Committee will:

- a) Circulate the minutes and action notes of the committee with 3 working days of the meeting to all members.
  - b) Present the minutes and action notes to the Local Team of NHS England and the Governing Body of NHS Wiltshire CCG.
19. These Terms of Reference will be reviewed from time to time, reflecting experience of the Joint Committee in fulfilling its functions and the wider experience of NHS England and CCGs in primary medical services co-commissioning.

## **Decisions**

20. The Joint Committee will make decisions within the bounds of its remit.
21. The decisions of the Joint Committee shall be binding on NHS England and Wiltshire CCG.
22. Decisions will be published by both NHS England and Wiltshire CCG.
23. The secretariat will produce an executive summary report which will be presented to South Central area team of NHS England and the governing body of Wiltshire CCG each month for information.

## **Key Responsibilities**

24. Key responsibilities will be reviewed each year and set out in the form of a work programme. For 2015/16 the strategic / development work programme that the Joint Committee is responsible for includes Premises, Workforce, PMS Reviews, Primary Care Information, Enhanced Services and Operational Resilience.

The Joint Committee is also responsible for ensuring completion of and compliance with the operational / transactional elements of Primary Care commissioning details of which are set out in the Joint Commissioning Operational Group Work Programme, together with individual organisation roles and responsibilities.

## **Review of Terms of Reference**

25. These terms of reference will be formally reviewed by NHS Wiltshire CCG and the Local Team of NHS England in April of each year, following the year in which the Joint Committee is created, and may be amended by mutual agreement between NHS Wiltshire CCG and the Local Team of NHS England at any time to reflect changes in circumstances which may arise.

## Schedule 1 – Delegation by CCG to Joint Committee – CCG functions

26. As permitted by section 14Z9 of the NHS Act 2006 (as amended) NHS Wiltshire CCG will delegate the following statutory functions to the joint committee:

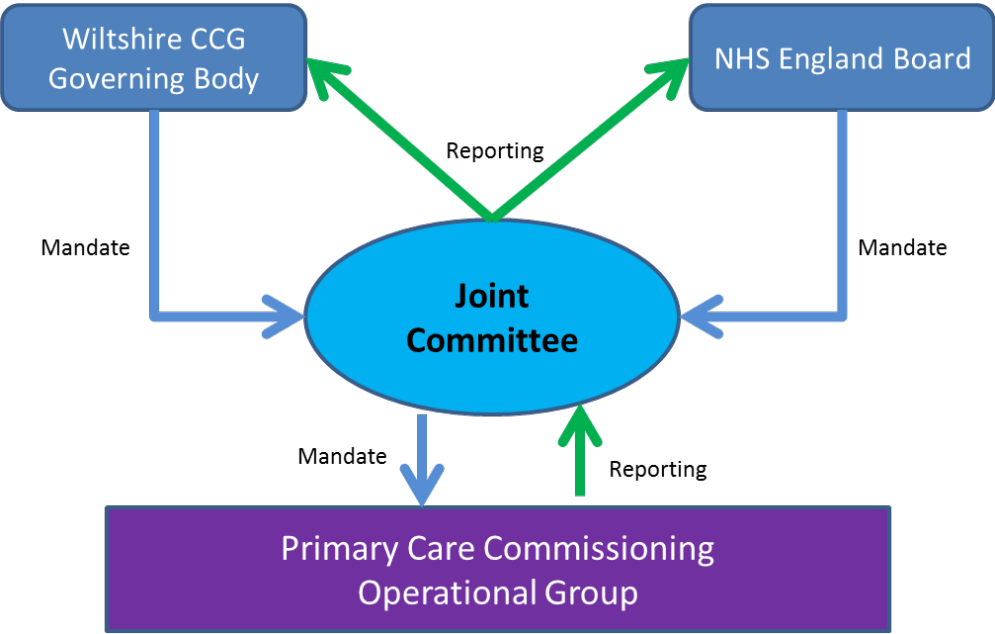
- Management of Locally Commissioned Services (formally known as LESs)  
Value: TBC
- Management of any PMS Premium funds released through the PMS review  
Value: TBC

## Schedule 2 – List of Members

Name	Position
Dr Mark Smithies	Secondary Care Doctor, Wiltshire CCG, Chair
Debra Elliott	Director of Commissioning for NHS England
Jo Cullen	Group Director for WWYKD and PC Programme
Steve Perkins	Deputy Chief Financial Officer, Wiltshire CCG
Geoff Shone	Head of Primary Care Finance, NHS England
Nikki Holmes	Head of Primary Care, NHS England
Dr Toby Davies	GP Chair, Sarum
Dr Helen Osborn	GP Chair, WWYKD
Dr Anna Collings	GP Vice Chair, NEW
Elsa Brown	Primary Care Development Manager, NHS England
Dr Gareth Bryant	Medical Director for Wessex LMC (Non-Voting)
TBC	Wiltshire Council – see point 13 (Non-Voting)
TBC	HealthWatch Council – see point 13 (Non-Voting)

## Sub-Groups

27. To ensure that the operational issues are appropriately managed a Primary Care Commissioning Operational Group will be established. The Joint Committee will be responsible for defining the Terms of Reference and governance arrangements including scope of work, mandate and reporting requirements for the Operational Group.





## Wiltshire Joint Committee Strategic / Developmental Work Programme 2015/16

Work Area	Task Outline	Cross CCG Scale Opportunity?	14/15 Q4	15/16 Q1	15/16 Q2	15/16 Q3	15/16 Q4
<b>Premises</b>							
1	Define premises strategy in relation to CCG strategy to give 'To Be' position - locality level	Local					
2	Assessment of current position plus housing plan growth estimates to give 'As Is' position (six facet surveys)	Local					
3	Determine gap between 'As Is' and 'To Be'	Local					
4	Consider opportunities for addressing premises shortfall including different care models; shared premises with other sectors / organisations; national and local funding streams	Cross-CCG					
5	Practice level discussions and solutions to fit with above	Local					
6	Agree premises priorities	Local					
7	Commence roll out	Local					
<b>Workforce</b>							
1	Define workforce strategy in relation to CCG strategy to give 'To Be' position	Local					
2	Gap analysis of current position against 'To Be' position	Local					
3	Consider different opportunities / solutions for addressing workforce shortfall e.g. recruitment, widening the primary care workforce	Cross-CCG					
4	Practice / locality level discussions and solutions to fit with above	Local					
5	Identify training requirements	Cross-CCG					
6	Implementation planning and roll-out	Local					
<b>PMS Reviews</b>							
1	PMS Reviews	Local					
2	Consider options for best way to reinvest the premium	Cross-CCG					
3	Decision as to option to be pursued	Local					
4	Communication and roll-out	Local					
<b>Information</b>							
1	Baseline information: linking national/CSU/CCG on hardware, software, capability. Identify integration issues.	Cross-CCG			tbc		
2	Review of rev and capital funding bids						
<b>Information Sharing</b>							
1	Review of IT strategy e.g. Integration and sharing of information across partners	Local					
2	Define level of information to be shared	Local					
3	Possible solutions	Cross-CCG					
4	Decision as to preferred solution	Local					
5	Work through governance requirements	Cross-CCG					
6	Hardware and software implications	Local					
7	Implementation planning and roll-out	Local					
<b>Enhanced Services</b>							
1	Review all existing national enhanced and QoF, map to delivery CCG strategy	Local					
2	Review locally commissioned services, map to the delivery of the CCG Strategy	Local					
3	Consider options include link with QoF including outcome of Somerset review	Cross-CCG					
4	Decide on preferred option	Local					
5	Develop detailed schemes	Local					
<b>Operational Resilience</b>							
	System-Wide Anticipated Demand (using SWAST)	SRG (not JC)					
	Proactive Annual resilience planning - acute, primary care requirements, etc.	SRG (not JC)					
	Define commissioning specification for Primary Care to cover peak periods e.g. Xmas and Easter	Local					
	NB - Reactive response to operational resilience is covered under operational / transaction work programme						
Transactional Detail including confirmation of individual organisation roles and responsibilities contained in Operational Spreadsheet							

## Wiltshire Primary Care Joint Commissioning Operational Group

### Terms of Reference

#### Purpose

The Wiltshire Primary Care Joint Commissioning Operational Group reports to the Wiltshire Joint Committee. The purpose of the group is to bring together the senior operations managers from across NHS Wiltshire CCG and NHS England Local Team, who will work with senior Primary Care Clinicians and the LMC, and to manage and improve the operational issues in the system.

NB This group aims to ensure that the Joint Committee is able to focus on strategic direction and change rather than spending time scrutinising and overseeing the management of operational issues

#### Responsibilities

1. Operational management of General Practice Commissioning including:
  - a. Administer the national DES locally
  - b. Application for closed lists
  - c. Branch surgery closures
  - d. Practice list reviews
  - e. Boundary changes
  - f. Termination of contracts
  - g. Practice mergers / federation
  - h. Contract variations e.g. PMS to GMS
  - i. APMS contract review
  - j. PMS premium usage
  - k. Retainer approvals
  - l. Locum reimbursement approvals
  - m. Christmas and New Year planning
  - n. Dispensing Services Quality Scheme (DSQS)
  - o. Safeguarding Policy, Procedures and Process
2. Operational management of services commissioned on behalf of practices including:
  - a. Interpreter and Translator services
  - b. Occupational health
  - c. Violent Patient Scheme (including security services)
  - d. Clinical waster contract
  - e. NHS Shared Business Services (SBS)
3. Administer Local Enhanced Services as agreed by the Joint Committee
4. Escalate unresolved issues to the Joint Committee or relevant body

5. Make recommendations for strategic change or investment to the commissioners via the Health and Social Care Strategic Group

#### 4. Accountability and Reporting

Whilst each member of the group is directly accountable to their individual organisation, the collective responsibility for managing and improving the operational issues for Primary Care in Wiltshire sits with this group and as such it is accountable to the Joint Committee

#### 5. Membership

There will be cross-organisational representation on this board and each representative member will be responsible for communication of key decisions and actions through their respective organisations.

##### Core Members: (TBC)

- Primary Care Programme Director, NHS Wiltshire CCG (Chair)
- Director of Commissioning, NHS England
- Clinical Lead, WWYKD
- Clinical Lead, NEW
- Clinical Lead, Sarum
- Deputy Director of Finance, NHS Wiltshire CCG
- Head of Finance, NHS England
- Head of Primary Care, NHS England
- Primary Care Development Manager, NHS England
- Primary Care Operational Lead, NHS Wiltshire CCG
- Medical Director, Wessex LMC

#### 6. Frequency of Meetings and Minutes

The group will meet monthly. There will be formal minutes issued within 5 working days of the meeting and a log of key actions and agreements will also be maintained, with agreed reporting to the Health and Social Care Strategic Leaders Group

#### 7. Quoracy

One member from each organisation must be represented, along with at least one Primary Care Clinician

**NB – A jointly developed framework providing additional task detail along with roles and responsibilities is in place to direct / support the work of this group. This will be supplemented by an MOU, currently under development by the NHS England central team.**