

Q&A – The NHS Commissioning Board (a special health authority) – 22/12/11

General

1. What is the NHS Commissioning Board special health authority?

The NHS Commissioning Board special health authority was established on 31st October 2011.

The special health authority is a preparatory body responsible for putting all of the arrangements in place to allow the NHS Commissioning Board to operate successfully as an independent body (subject to the successful passage of the Health and Social Care Bill through Parliament).

It plays a key role in the Government's vision to modernise the health service and secure the best possible outcomes for patients. Its current role is to make all the necessary preparations for the successful establishment of the NHS Commissioning Board.

In the meantime, all current NHS planning and delivery responsibilities remain with the Department of Health, strategic health authorities and primary care trusts.

2. What does it do?

The special health authority is a preparatory body responsible for putting the infrastructure and resources in place to allow the NHS Commissioning Board to operate successfully as an independent body. This includes practical arrangements such as governance, IT and HR.

It is designing an innovative business model, which puts patients and clinical leadership at its heart.

In partnership with leaders of emerging clinical commissioning groups, other stakeholders and the Department of Health, it will agree the method for establishing and running CCGs.

Patients, healthcare professionals and partner organisations will all be involved in developing these plans to ensure an effective system is created. The work of the special health authority has the values and pledges of the [NHS Constitution](#) and patients at its heart.

It will operate as a special health authority until the NHS Commissioning Board becomes an Executive Non-Departmental Statutory Body (ENDPB) by October 2012, (subject to the successful passage of the Health and Social Care Bill 2011 through Parliament).

3. What other functions is the special health authority expected to carry out in 2012?

In addition to the above, the special health authority is expected to take on the following functions in 2012, subject to the agreement of the board of the authority:

- Planning for 2013/14 including preparation of operating guidance to the NHS
- The special health authority will take on operational patient safety responsibilities, due to the abolition of the National Patient Safety Agency currently scheduled for July 2012
- Making appointments of strategic health authority and primary care trust non-executive members, to take over from the Appointments Commission during 2012
- In partnership with DH, establishing and making operational the new NHS Leadership Academy, the national focus for leadership development across the health system.

We are still considering what functions that are currently carried out by the NHS Institute for Innovation and Improvement may transfer to the special health authority.

Prior to the establishment of the NHS Commissioning Board as an Executive Non-Departmental Public Body (ENDPB) by October 2012 (subject to the successful passage of the Health and Social Care Bill), when the special health authority may act as a host organisation for the induction of its staff. This would apply to functions that the ENDPB would take up as soon as it was established, for example, the establishment of clinical commissioning groups. Further details on these functions and groups of staff will follow in 2012.

4. What is the NHS Commissioning Board and how does it differ from the special health authority?

Subject to the passage of the Health and Social Care Bill, by October 2012, the NHS Commissioning Board will be established as an independent statutory body and it will take on some formal statutory accountabilities, including the establishment of clinical commissioning groups and the planning for 2013–14. It is expected that it will be fully operational by April 2013.

The Board will be nationally accountable for the performance of the NHS. The Board's overarching role is to ensure that the NHS delivers better outcomes for patients within its available resources.

The Board will take on its full range of responsibilities and the new commissioning system will begin to operate once it is fully operational from April 2013.

To find out more about the proposals for how the NHS Commissioning Board may operate please read 'Developing the NHS Commissioning Board'

(http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_128118)

Governance

5. Who will sit on the NHS Commissioning Board?

The Health and Social Care Bill published on 19th January 2011 -

<http://www.dh.gov.uk/en/Publicationsandstatistics/Legislation/Actsandbills/HealthandSocialCareBill2011/index.htm>

sets out details of the membership of the Board including a Chair, Chief Executive, Executives and Non Executives and the process for their appointments.

6. How many board members will there be and how will they be appointed?

Six board members have been appointed to the special health authority to date. They are:

Professor Malcolm Grant CBE – Chair

Sir David Nicholson – Chief Executive

Ed Smith – Audit Committee Chair and Non-Executive Director

Professor Sir Bruce Keogh - designate National Medical Director

Paul Taylor - designate Interim Director of Finance

Ciarán Devane – Non-Executive Director.

Please see our Who's Who and Latest News sections of our website for more information.

Further information will be added to our website as other board members are appointed.

The aim is that there will be at least five Non-Executive Directors and there will be more Non-Executive Directors than Executive Directors.

7. Does the special health authority have its own board and governance arrangements and how will these differ from the fully established NHS Commissioning Board (subject to the passage of the Health and Social Care Bill)?

The NHS Commissioning Board Special Health Authority will have streamlined governance arrangements that reflect its limited functions but that enable it to discharge its responsibilities effectively, efficiently and transparently, in accordance with good governance standards. It will have its own board and such committees and sub-committees it considers appropriate.

The NHS Commissioning Board will be a legally separate entity from the special health authority, with its own board and committees. However, the Secretary of State has permission from the Office of the Commissioner for Public Appointments (OCPA) to roll over board level appointments from the Board Authority to the Board.

8. Who will hold the special health authority and the fully established NHS Commissioning Board to account and how will they do this?

The special health authority is an arms-length body of the Department of Health and is accountable to the Secretary of State for Health.

The Secretary of State for Health will set an annual mandate for the NHS Commissioning Board when it is fully established which will set out what it is expected to deliver within the budget it has been allocated. This will focus around a set of measurable health outcomes and improvements in patient choice and involvement.

The Board will have to produce a three-year business plan on how it proposes to exercise its functions and an annual report on how it has exercised its functions, which will be laid before Parliament.

The Secretary of State for Health will retain ultimate accountability for securing the provision of NHS services by holding the NHS Commissioning Board to account.

Commissioning

9. Who will commission NHS services until the NHS Commissioning Board is fully established?

The NHS Commissioning Board special health authority is not responsible for commissioning NHS services.

All NHS planning and delivery responsibilities remain with the Department of Health, strategic health authorities and primary care trusts until such time the NHS Commissioning Board is established and becomes fully operational, subject to the successful passage of the Health and Social Care Bill through Parliament.

Subject to this, the NHS Commissioning Board when it is established as an Executive Non Departmental Public Body by October 2012 will take on limited functions such as establishing CCGs.

The Board will take on its full range of responsibilities and the new commissioning system will begin to operate once it is fully established from April 2013.

The Board will also be responsible for directly commissioning some services including specialised health care services, GP primary care services, dentistry, pharmacy and ophthalmology.

In some circumstances, the Board may commission some services on behalf of CCGs.

10. How are you working with Strategic Health Authorities, Primary Care Trusts and Clinical Commissioning Group pathfinders to ensure a smooth transition for NHS commissioning?

The NHS Commissioning Board will make final decisions on the process and requirements for establishing CCGs. When considering whether prospective CCGs are ready to be established, the Board will work closely with emerging CCGs and it will also seek views from emerging Health and Well-being Boards.

The Board will build on the work of the commissioning development policy team within the Department of Health (DH) in making its decisions on the establishment of CCGs. They have engaged with numerous stakeholders in the development of the early thinking underpinning the draft authorisation framework including emerging CCGs, primary care organisations, local authority representatives, policy experts, patients groups and current primary care trust and strategic health authority staff.

The authorisation proposals also reflect the many responses the Department of Health (DH) received to the White Paper Liberating the NHS -

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_117353

- during the Government's Listening Exercise. The DH commissioning development team continues to engage with stakeholders to further develop and test the authorisation proposals that the Board will consider and make its final decisions on.

The special health authority is working with CCG pathfinders to co-produce the design of the NHS Commissioning Board's local structures and functions.

Staff and recruitment

11. How many staff are there currently working for the special health authority and how have they been appointed? Will more people be recruited? How and when?

All posts will be filled according process outlined in the NHS Commissioning Board's [People Transition Policy](#) –

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_128699

12. Where is the special health authority based?

The NHS Commissioning Board Special Health Authority has two offices. Its head office is based at Quarry House, Quarry Hill, Leeds and it also has a small office in the current National Patient Safety Agency headquarters in Maple Street, London.

13. When will the NHS Commissioning Board begin to appoint its staff?

How will I find out about these vacancies? Who will be eligible to apply?

The NHS Commissioning Board can only start to recruit staff after it receives Royal Assent. When posts are advertised, this will be in accordance with the NHS Commissioning Board's People Transition Policy (PTP) to try to minimise redundancies for those organisations that will cease to exist in the near future. Posts will only go out to external advert when all stages of the PTP have been gone through. For more information about the PTP, please see the link above in Q11.

14. Where will the NHS Commissioning Board be based? Will there be regional offices as well as the national headquarters? How many staff will be based in each?

Current plans suggest that NHS Commissioning Board will have its headquarters in Leeds with an additional presence in London. However, many of its functions will need to be carried out at a local level – so it will need to have teams in different parts of the country. Plans are being developed and we will provide more detail when we can.

Contact

15. Who should I contact if I have other queries?

Please email your queries to commissioningboard@nhs.net