



Commissioning Board

NHSCB28010

BOARD PAPER - NHS COMMISSIONING BOARD

Title: Implementing service specifications and policies in the 2013/14 contracting round.

Clearance: Ian Dalton, Chief Operating Officer and Deputy Chief Executive.

Purpose of Paper:

- To update the Board on the proposal to implement new service specifications and policies for specialised services in the 2013/14 contracting round.

Key Issues and Recommendations:

- In December, the NHS CB consulted on a set of clinical specifications and eligibility criteria for specialised services. The NHS CB intend to introduce standard contracts for specialised services from 1 April and include core policies and specifications, which will support the move to national consistency of access and outcome.
- Unless there are exceptional circumstances, it is not expected that providers will require significant deviation in individual contracts. In those cases where it is deemed absolutely necessary for variation by the NHS CB, this will be subject to a formal derogation process.
- Area Teams will co-ordinated a local process for assessing the impact of moving to nationally consistent specifications from June to September. This local process will involve the local clinical commissioning groups, health and well being boards and local strategic partners. This will allow a local pace of change to develop.
- Specifications that are ready for implementation will be put in place from 1 October 2013 with a clear local plan and timeline in place for any that require service change.

Actions Required by Board Members:

- Support the implementation of ratified policies in the 2013/14 contracting round from the 1 April 2013.
- Support the implementation of specifications in the 2013/14 contracting round from 1 October 2013, using derogation as a way of managing local difficulty.
- Agree the proposal for a period of engagement with stakeholders who have responded as part of the consultation.
- Agree to establish a Clinical Priorities Advisory Group and request a paper from a cross directorate specialised commissioning team to advise on process for next steps.

Implementing service specifications and policies in the 2013/14 contracting round.

Introduction

1. During 2012/13 a number of service specifications (detailed descriptions of specific specialised services) and clinical access policies (detailed descriptions of eligibility criteria for treatment including thresholds for treatment) were developed. These specifications and policies were drafted by the Clinical Reference Groups (CRGs) under the leadership of James Palmer, Clinical Director for Specialised Services.
2. This is the first time there has been a national process to produce detailed descriptions of the specifications and eligibility criteria for specialised service, and have involved some 1,200 clinicians and patients. Strategic provider engagement has happened through the 'old' specialised commissioning groups and our intention to move to a tighter, standardised system of contracting has been widely communicated.
3. The document, Prescribed specialised services: Commissioning Intentions for 2013/14, published in November 2012, described the NHS CB's vision for specialised services. The NHS CB intend to introduce standard contracts for specialised services from 1 April. This standard document will include core policies and specifications, which will support the move to national consistency of access and outcome.
4. Providers have been asked to review and understand the impact of these specifications and policies to ensure compliance with national requirements during 2013. Providers have been broadly supportive of the process and at a meeting held on the 5 December 2012, with the top 20 providers of specialised services, broad support was given for this approach.
5. Unless there are exceptional circumstances, it is not expected that providers will require significant deviation in individual contracts. In those cases where it is deemed absolutely necessary for variation by the NHS CB, this will be subject to a formal derogation process.
6. The consultation on the specifications and policies ended on the 25 January 2013 and a rapid process of evaluation of the comments is being led through the National Programme of Care teams in the Medical Directorate.
8. The Patient Insight and Informatics Directorate is working with the Medical Directorate and the Chief Operating Office's Directorate to put a feedback process in place giving people who have contributed to the consultation details of how their input has changed individual policies and specifications.

Implementation of specifications in the 2013/14 contracting round

9. Clinical access policies need to be in place for the 1 April, as they set the eligibility criteria for accessing services.

10. There are around 30 clinical access policies that need to be considered for formal adoption by the NHS CB, with their formal adoption being subject to overall affordability. It is proposed that a Clinical Priorities Advisory Group is developed to support the ratification of policies. The establishment of a Clinical Priorities Advisory Group will need to be adopted as an interim structure to support decision making for 2013/14 contracts. Consideration will then need to be given to the permanent establishment of a Clinical Priorities Advisory Group and this will require the involvement of a wide group of stakeholders.
14. Between mid-February and mid-March workshops will be run with people who have responded to the consultation. These workshops will cover both the process and the specific response to the consultation. The first workshop will run through the process, the timeline and the necessity for getting policies and specifications ready for 1 April.
16. These workshops will act as assurance groups, involving the current Patient and Public Engagement Group and additional key partners to consider the response to the consultation, specifically looking at whether the analysis of the consultation responses really takes account of and responds to the feedback received,
17. The outputs of these workshops along with the consultation reports produced via the Clinical Reference Groups will then form the basis for a Board report in April with the detailed responses and changes to policies and specifications available on the NHS CB web site.
18. All policies that have been ratified will be applied through contracts from 1 April 2013. All specifications will be mapped against providers by Area Teams from April to June. This will be a nationally co-ordinated process giving a national overview of strategic service gaps and issues.
19. Area Teams will then co-ordinate a local process for assessing the impact of moving to nationally consistent specifications from June to September. This local process will involve the local clinical commissioning groups, health and well being boards and local strategic partners. This will allow a local pace of change to develop
20. Specifications that are ready for implementation will be put in place from 1 October 2013 with a clear local plan and timeline in place for any that require service change.

Recommendation

21. The NHS CB Board is asked to:
 - support the implementation of ratified policies in the 2013/14 contracting round from the 1 April 2013;

- support the implementation of specifications in the 2013/14 contracting round from the 1 October 2013, using derogation as a way of managing local difficulty;
- agree the proposal for a period of engagement with stakeholders who have responded as part of the consultation; and
- agree 'in principle' the establishment of a Clinical Priorities Advisory Group and request a paper from a cross directorate specialised commissioning team to advise on process for next steps.

Ian Dalton
Chief Operating Officer and Deputy Chief Executive
February 2013