

BOARD PAPER - NHS ENGLAND

Title: Commissioning Support Unit (CSU) committee update

From: Dame Moira Gibb, committee chair.

Purpose of paper:

- To provide an update on discussions held at the CSU committee in September 2014.

Actions required by the Board:

- To note the discussions held and the decisions made at the September CSU committee.

Context

1. The CSU committee has two key responsibilities:
 - To oversee the **assurance** of Commissioning Support Units (CSUs), ensuring that they are fit for purpose and financially viable
 - To oversee the **development** of CSUs, ensuring that they continuously improve in their ability to deliver high quality, cost effective services, and develop independence in line with the Board's market strategy for all commissioning support services and its strategy for moving CSUs to autonomous forms.

June 2014 CSU committee

2. A set of minutes and actions from the June CSU (ratified at the September committee) is now available at [[CSU committee minutes](#)].

September CSU committee

3. A summary of the discussions at the September CSU committee is provided below. The minutes from the September CSU committee will be ratified at the CSU committee in November 2014.
 - Members were given an update on the Commissioning Support Lead Provider Framework following the publication of the Pre Qualification Questionnaire (PQQ) results on 6 August. Successful bidders that will proceed to the next stage 'invitation to tender' (ITT) include a mixture of CSUs, local authorities, public/private partnerships and large commercial consortia. This provides real confidence that clinical commissioning groups (CCGs) and other commissioners will have a choice of high quality, affordable and innovative commissioning support providers from January next year when the framework goes live. Focus now turns to supporting CCGs to buy from the framework as collaboratively as possible to get the best value for money (VFM) response from bidders.
 - The committee had a brief discussion about CCGs wishing to bring services back in house and the ongoing need for these CCGs to demonstrate VFM, that a better quality service was being put in place and that benefits of scale were not being lost. Members agreed that this is an issue that should be considered at a CCG assurance committee.
 - Members were given an update on the organisational changes across CSUs as they look to merge to generate efficiencies for customers and maximise their competitive advantage for the leader provider framework (LPF). Members noted that further redundancies are likely to be needed as a result of the ongoing changes, despite ongoing redeployment opportunities.
 - There was a discussion around the need to support CSUs to be as competitive as possible when CCGs begin to buy services from the LPF from 2015 and the fact that the current hosting regime could potentially restrain

CSUs around partnering and investing their income to improve services for customers. A further discussion will be had once greater flexibility from the hosting regime had been explored internally and with Cabinet Office and Treasury.

- Members were provided an update on some of the excellent examples emerging from CSUs where they are supporting CCGs and NHS England in some critical pieces of work, including personal budgets, specialised services and a dementia pilot working with GP practices to demonstrate variance in dementia rates, supporting better targeting of resources to improve diagnosis levels. The committee agreed that a communications plan should be developed to better demonstrate the value that CSUs are adding across the system.

Actions required by Board Members:

4. To note the discussions held and the decisions made at the September CSU committee.

**Dame Moira Gibb
Committee Chair**