

BOARD PAPER - NHS ENGLAND

Title: Primary Care Co-commissioning – Update and Next Steps

From: Ian Dodge, National Director: Commissioning Strategy

Purpose of Paper:

- To inform the Board of progress

The Board is invited:

- To be assured by the progress to date;
- To approve the delegations as set out in paragraphs eight and nine of the paper.

Primary Care Co-commissioning – Update and Next Steps

1. In November 2014 the Board approved the framework of co-commissioning of primary medical care.
2. In December, the Audit Committee agreed the statutory guidance on Conflicts of Interest.
3. Of the 209 CCGs that will be in existence on 1 April 2015, 151 have now been approved to take forward either joint or delegated arrangements from 1 April 2015. 64 CCGs have been approved for full delegation and 87 CCGs have been approved for joint commissioning.
4. Giving CCGs more control and say over primary care commissioning is part of a wider strategy to support the development “place-based” commissioning and join-up care pathways.
5. It is a vote of confidence in CCGs. It forms part of the new deal for primary care signalled in the Forward View. And it’s an essential step towards enabling new care model: integrated commissioning is a necessary precursor to integrated provision.
6. NHS England’s approach has been to:
 - encourage CCGs to adopt either delegated or joint arrangements, because we think this will benefit patients;
 - but avoid favouring one model over another;
 - This is a matter of CCG preference and context. A single national answer will not be able to take account of differential emerging patterns across the country of integrated population health provision such MCPs and PACs. The position is likely to be dynamic and change over time;
 - work hand-in-glove with NHS Clinical Commissioners to develop standardised approaches that make delegated and co-commissioning as easy and simple as possible to implement;
 - strengthen the framework for managing conflicts of interest to mitigate perceived and actual risks.
7. Looking ahead, we need to:
 - to maximise the success of 2015/16 arrangements;
 - keep learning through evaluation and feedback, and adapting the national approach accordingly. In particular the joint NHS England - NHS CC programme oversight group will keep abreast of any teething issues and make sure these are addressed rapidly and effectively;

- spot the scope and appetite for collective action through smarter national/local dialogue – the principle we are applying to new care model construction. Where common problems exist, it may not make sense for lots of different areas to invent in isolation their own unique solutions. We will explore this further with our CCG colleagues.
8. In line with NHS England's policy on the Co-commissioning of Primary Medical Services, the Board is now asked to formally resolve to delegate primary medical service functions, as set out in delegations and delegation agreements, to CCGs who have been approved for this purpose, and to authorise the Chief Financial Officer to execute the new arrangements.

Ian Dodge
National Director: Commissioning Strategy
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