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BOARD PAPER - NHS ENGLAND

Title: Report of Specialised Services Commissioning Committee to the Board

From: Noel Gordon, Chair of Specialised Services Commissioning Committee

Purpose of Paper:

• To update the Board of the meetings of the Specialised Services Commissioning Committee on 12 June and 30 June 2015

The Board is invited to:

- Note the content of the report
- Approve the Terms of Reference for the Specialised Services Commissioning Committee.

NHS England Board - 23 July 2015

REPORT TO THE BOARD FROM: Specialised Services Commissioning Committee

COMMITTEE CHAIR: Noel Gordon

DATE(S) OF COMMITTEE MEETING: 12 June 2015 and 30 June 2015

1.0 MATTERS FOR THE BOARD'S ATTENTION

Terms of Reference

1.1 At its meeting on 30 June 2015, the Specialised Services Commissioning Committee (SSCC) reviewed its Terms of Reference, which the Board is now asked to approve (Appendix A).

2.0 ITEMS FOR THE BOARD'S INFORMATION AND ASSURANCE

Response to Consultation

- 2.1 At its meeting on 12 June 2015, the SSCC received a report on the outcome of the *Investing in Specialised Services* public consultation and approved the response to the consultation. This response was published on 26 June 2015.
- 2.2 The Board launched this consultation in December 2014 to gather views on a set of proposed principles and processes for making investment decisions from specialised services. Stakeholders were broadly supportive of the principles and process, and requested further clarity on the affordability principle, the process for developing new treatment policies, and the definition of national strategic priorities.
- 2.3 On this basis, the SSCC determined that it would adopt a Prioritisation Framework for 2015/16 which was based around the principles and process supported in the consultation. The SSCC also recognised that further work with stakeholders is needed to refine the process, given the strong theme in the consultation requesting more detail and clarity.

Prioritisation Decisions for 2015/16

- 2.4 The Specialised Services Commissioning Committee (SSCC) subsequently met on 30 June to oversee the prioritisation process for 2015/16. A significant amount of the clinical work for phases 1 to 4 of the prioritisation process, to identify potential new treatments and work up the case for their effectiveness, had already been undertaken. SSCC heard that the Clinical Priorities Advisory Group (CPAG) had met on 15 and 16 June and recommended a list of new treatments that they determined met all of the principles in the Prioritisation Framework, with the exception of the affordability principle.
- 2.5 Twenty-six treatments were recommended for routine commissioning because they met all of these principles, nine of which have a resource impact. CPAG recommended that 13 treatments should not be routinely commissioned because they did not meet our principles. Two of these treatments (elosulfase alpha (Vimizin) and Ataluren) are currently being considered as part of the NICE Highly Specialised Technologies evaluation programme. SSCC heard CPAG's conclusion that commissioning decisions should follow NICE's final determinations, which are due in October 2015 and February 2016 respectively.
- 2.6 SSCC then heard that the Specialised Commissioning Oversight Group (SCOG) had met on 24 June to consider CPAG's recommendations, and that SCOG had approved the commissioning of 17 treatments that were recommended for routine commissioning with no resource impact. SSCC noted that the cost of the nine treatments that were recommended with a resource impact (£7.77m, part-year effect for 2015/16) fell within the reserves held for the commissioning of new treatments (£33.13m). The recommendation from SCOG was that all nine treatments with a resource impact that had been recommended should be commissioned.

2.7 In the light of this information, the SSCC agreed the final list of treatments to be commissioned and agreed that all nine treatments recommended for routine commissioning with a resource impact should be commissioned. The outcome of this decision was published on 2 July 2015.

Specialised Commissioning Oversight Group (SCOG) Terms of Reference

2.8 At its meeting on 30 June 2015, the SSCC approved the Terms of Reference for SCOG.

3.0 RECOMMENDATION

- 3.1 The Board is invited to:
 - i. Note the content of the report
 - ii. Approve the Terms of Reference for the SSCC.

Author: Noel Gordon, Chair of the Specialised Services Commissioning Committee

Date: July 2015

Draft Terms of Reference for Specialised Services Commissioning Committee

PURPOSE:

The Committee has been established to:

- advise the Board on development and implementation of strategy for specialised commissioning,
- agree specialised commissioning priorities and work programmes, and
- receive assurance that these are delivered.

SCOPE OF RESPONSIBILITIES

The Specialised Services Commissioning Committee operates on behalf of and reports to the Board. The following summarises the scope of responsibilities of the Committee:

- Oversee development and implementation of NHS England's strategy for specialised commissioning, especially as the new arrangements are implemented;
- Set the policy framework for specialised commissioning, within the overall commissioning system, ensuring robust planning is in place so services are patient focused, clinically led, and managed within budget;
- Agree specialised commissioning priorities, informed by the deliberations and advice of the Clinical Priorities Advisory Group and Clinical Reference Groups;
- Ensure required quality and performance standards for each specialised service are defined, with robust systems and processes in place for monitoring and assuring the performance and quality of specialised services, engaging with patients and the public as required, and driving for continuous quality improvement;
- Agree NHS England's work programme (business plan) for specialised services and receive assurance about its delivery, with associated risks identified and mitigated.

ACCOUNTABILITY:

The Specialised Services Commissioning Committee is accountable to the NHS England Board.

CHAIRMAN:

The Committee will be chaired by a Non-Executive Director.

MEMBERSHIP:

The following will comprise membership of the Committee:

- Three Non-Executive Directors, one of which will be nominated as Chairman
- Chief Executive
- National Medical Director
- National Director: Commissioning Operations
- National Director: Commissioning Strategy
- Chief Financial Officer
- National Director for Patients and Information.

EX-OFFICIO MEMBERS

- Director of Commissioning Specialised Services
- Chair of Specialised Commissioning Oversight Group
- Medical Director for Specialised Services

Members are expected to make every effort to attend all meetings and attendance at the meeting will be recorded in the minutes of the meeting. Members will be expected to attend the majority of meetings each year.

QUORACY

Meetings will be quorate if two of the Non-Executive Committee members are present