

BOARD PAPER - NHS ENGLAND

Title:

Delegation of primary medical care services functions

Lead Director:

Ian Dodge, National Director: Commissioning Strategy

Purpose of Paper:

- To seek the Board's approval of the delegation of primary medical services functions to additional CCGs for 2016/17

The Board is invited to:

- Approve the delegation of primary medical services to additional CCGs for 2016/17

DELEGATION OF PRIMARY MEDICAL CARE SERVICES FUNCTIONS

INTRODUCTION

1. In May 2014, CCGs were invited to take on greater responsibilities for the commissioning of general practice. There were three possible models from which CCGs could choose:
 - **Greater involvement:** closer collaboration with NHS England teams to ensure that decisions taken about healthcare services are strategically aligned across the local health economy.
 - **Joint commissioning:** one or more CCGs to assume joint responsibility for commissioning primary medical services with NHS England.
 - **Delegated commissioning:** CCGs to assume full responsibility for the commissioning of general practice services (although legal accountability remains with NHS England).
2. In 2015/16, 63 CCGs took forward full delegation of primary medical care services, as approved by the NHS England Board in March 2015. In addition, 87 CCGs implemented joint arrangements with their local NHS England team.
3. Of 209 CCGs, a further 51 CCGs (listed in Appendix 1) have been approved to take forward full delegation of primary medical care services from 1 April 2016. This will bring the total to 114 CCGs with full delegation in 2016/17. At the current pace of change, we expect nearly all CCGs to have taken on delegated arrangements by 2017/18.
4. Giving CCGs more control and say over primary care commissioning is part of a wider strategy to support the development of “place-based” commissioning. It forms part of the new deal for primary care signalled in the Five Year Forward View and is a critical step towards enabling new care models.
5. The delegated model looks most likely to deliver the greatest benefits for local populations. CCGs have reported that delegated commissioning has:
 - i. Increased the local appetite and energy to develop primary care services and new models of care.
 - ii. Enabled the development of a clearer, more joined up vision for primary care, which is aligned to CCGs’ wider system priorities.
 - iii. Increased clinical leadership and public involvement in primary care commissioning, enabling more local decision making.
 - iv. Improved CCGs’ relationships with a wide range of local stakeholders, including member practices, as more conversations are now happening locally about primary care development and member practice sustainability.
6. At the same time, delegation of primary medical care functions brings an increased need for very robust arrangements for managing conflicts of interest. The parallel board paper with proposals on conflicts needs to be read in conjunction with this paper.

RECOMMENDATION

7. In line with NHS England's policy on the co-commissioning of primary medical care services, the Board are asked to resolve to delegate such primary medical care service functions, as

are set out in the Delegation and Delegation Agreement¹, to each CCG approved to take forward full delegation in 2016/17 and to authorise the Chief Financial Officer to execute the new arrangements. Appendix 2 details the delegated functions. The CCGs approved for delegation have been through a regional and national due diligence process and the recommendation for their approval was reviewed and approved by the Commissioning Committee at its December 2015 meeting.

8. The Board are also asked to formally resolve to delegate such primary medical care functions as are set out in the Delegation to the joint committees of NHS England and each of the CCGs approved to exercise the primary medical care functions jointly with NHS England, and to authorise the Chief Financial Officer to execute the arrangements necessary.

¹ The Delegation is the formal legal document that sets out the statutory delegation of primary care commissioning functions to the CCG. The Delegation Agreement sets out the detailed arrangements for how the CCG will exercise its delegated functions.

Appendix 1: 51 CCGs approved for delegated commissioning in 2016/17

Regions	Local teams	CCGs
North	Cumbria and North East	NHS Northumberland CCG
		NHS Darlington CCG
		NHS Hartlepool And Stockton-On-Tees CCG
		NHS South Tees CCG
	Lancashire and Greater Manchester	NHS Heywood, Middleton & Rochdale CCG
		NHS Tameside And Glossop CCG
		NHS North Manchester CCG
		NHS Central Manchester CCG
		NHS Stockport CCG
		NHS South Manchester CCG
		NHS Trafford CCG
		NHS Salford CCG
	Cheshire and Merseyside	NHS Bolton CCG
		NHS Bury CCG
		NHS Eastern Cheshire CCG
	Yorkshire and the Humber	NHS Vale Royal CCG
		NHS South Cheshire CCG
		NHS Leeds North CCG
		NHS Leeds West CCG
		NHS Leeds South And East CCG
		NHS Greater Huddersfield CCG
Midlands and East	West Midlands	NHS Doncaster CCG
		NHS Sheffield CCG
		NHS Wyre Forest CCG
	East	NHS Redditch And Bromsgrove CCG
		NHS Walsall CCG
	Central Midlands	NHS Great Yarmouth & Waveney CCG
London	South London	NHS Corby CCG
		NHS Sutton CCG
		NHS Merton CCG
		NHS Wandsworth CCG
		NHS Kingston CCG
South	South Central	NHS Richmond CCG
		NHS Oxfordshire CCG
		NHS Aylesbury Vale CCG
		NHS North & West Reading CCG
		NHS South Reading CCG
		NHS Newbury And District CCG

	NHS Wokingham CCG
	NHS Dartford, Gravesham And Swanley CCG
	NHS Swale CCG
	NHS Canterbury And Coastal CCG
	NHS West Kent CCG
	NHS Ashford CCG
	NHS Hastings & Rother CCG
	NHS Coastal West Sussex CCG
	NHS North West Surrey CCG
	NHS North East Hampshire And Farnham CCG
	NHS Isle Of Wight CCG
	NHS Dorset CCG
	NHS Southampton City CCG

Appendix 2: Delegated Functions

The Delegated Functions, as set out in the Delegation and Delegation Agreement, include:

- decisions in relation to the commissioning, procurement and management of Primary Medical Services Contracts, including but not limited to the following activities:
 - decisions in relation to Enhanced Services;
 - decisions in relation to Local Incentive Schemes (including the design of such schemes);
 - decisions in relation to the establishment of new GP practices (including branch surgeries) and closure of GP practices;
 - decisions about ‘discretionary’ payments;
 - decisions about commissioning urgent care (including home visits as required) for out of area registered patients;
- the approval of practice mergers;
- planning primary medical care services in the Area, including carrying out needs assessments;
- undertaking reviews of primary medical care services in the Area;
- decisions in relation to the management of poorly performing GP practices and including, without limitation, decisions and liaison with the CQC where the CQC has reported non-compliance with standards (but excluding any decisions in relation to the performers list);
- management of the Delegated Funds in the Area;
- Premises Costs Directions Functions;
- co-ordinating a common approach to the commissioning of primary care services with other commissioners in the Area where appropriate; and
- such other ancillary activities that are necessary in order to exercise the Delegated Functions.