

12 March 2013		ITEM: 6
Health and Well-Being Overview and Scrutiny Committee		
Thurrock Clinical Commissioning Group Authorisation		
Report of: Mandy Ansell, Chief Operating Officer, Thurrock Clinical Commissioning Group (TCCG)		
Wards and communities affected: All	Key Decision: Not Applicable	
Chief Operating Officer: Mandy Ansell, Chief Operating Officer, Thurrock Clinical Commissioning Group		
Accountable Officer: Dr Nimal Raj, Accountable Officer, Thurrock Clinical Commissioning Group		
This report is public		
Purpose of Report: to update the Committee on the current situation regarding Authorisation for a Clinical Commissioning Group to represent Thurrock		

EXECUTIVE SUMMARY

As part of the final stage of the CCG Authorisation process the NHS Commissioning Board (NHS CB) Conditions Panel considered Thurrock CCG's application for authorisation on 5 February 2013.

The Panel considered each of the remaining red criteria and made a recommendation as to the conditions that should apply to Thurrock CCG.

The NHS CB CCG Authorisation sub-committee will make a final decision on Thurrock CCG's application for authorisation on 6 March 2013.

1. RECOMMENDATIONS:

1.1 To note the contents of the report

2. INTRODUCTION AND BACKGROUND:

Background and current position

- 2.1 At the December meeting the CCG outlined the process leading up to the site visit 20 December. This was followed by a further site visit held in London the outcome of which was confirmation that the CCG has achieved green status for 82 of the 119 criteria leaving 37 red criteria still to be addressed and an outline

of the proposed conditions currently being considered by the panel.

2.2 These red criteria fell under the 6 Key Domains as follows:

Domain 1 - A strong clinical and multi-professional focus, which brings real added value - **6 reds** remain (*linked to constitution specific assurance*).

Domain 2 - Meaningful engagement with patients, carers and their communities - **1 red** remains (*linked to the constitution / 'pan Thurrock' membership*).

Domain 3 - Clear and credible plans, which continue to deliver the QIPP (quality, innovation, productivity and prevention) challenge within financial resources, in line with national requirements (including excellent outcomes) and local joint health and wellbeing strategies – **4 reds** remain (*linked to the CCG's Finance, QIPP, Integrated Plans*).

Domain 4 - Proper Constitutional and governance arrangements, with the capacity and capability to deliver all their duties and responsibilities including financial control, as well as effectively commissioning all the services for which they are responsible – **10 reds** (*linked to statutory self – certification areas 3 of which we have since re-submitted on, and the rest related to capacity and capability within the CCG*).

Domain 5 - Collaborative arrangements for commissioning with other CCGs, local authorities and the NHSCB as well as the appropriate commissioning support – **2 reds** remain (*linked to collaborative agreements*).

Domain 6 - Great leaders who individually and collectively can make a real difference – **13 reds** remain related to Organisational and Leadership Development, and recruitment to senior roles).

These resulted in the majority of the proposed condition being placed within the range Level iii to Level vi with all Level vi related conditions being specifically related to quality and contacting activities and responsibilities with Basildon and Thurrock Hospital Trust (BTUH).

Key to support levels:

- i. model document/toolkit
- ii. make advice/expertise available
- iii. decision sign-off/approval by Board
- iv. insert/provide specific team/individual
- v. AO not ratified/alternative AO appointed
- vi. specific functions removed (note additional legal procedure to be followed if this is done)
- vii. all functions removed (re BTUH as mentioned above)

- 2.3 The risks to successful authorisation for Thurrock CCG remain although significant progress is being made, and has been acknowledged by the NHS CB:
- Governance: not securing membership of 100% of the GP practice population of Thurrock;
 - QIPP (quality, innovation, productivity and prevention) plans not delivering to expected level;
 - Insufficient capacity to support the CCG through to authorisation.
- 2.4 To further reduce the risks the Thurrock CCG has secured free coaching sessions for 3 of its clinical leads through the NHS Leadership Academy, and has commissioned KPMG to provide additional support to the risk areas highlighted to ensure that we can demonstrate further significant progress to give the NHS CB confidence that we are fit to fully take on our statutory duties.
- 2.5 Beyond the March authorisation / conditions decision (due to be notified 11 March) the CCG will be performance monitored and managed as part of the general NHS CB's CCG quarterly performance review process and will have the opportunity to submit new / refreshed evidence against the remaining red criteria at each stage. The first of these reviews will take place in June.

3. ISSUES, OPTIONS AND ANALYSIS OF OPTIONS:

- 3.1 Not Applicable

4. REASONS FOR RECOMMENDATION:

- 4.1 Not Applicable

5. CONSULTATION (including Overview and Scrutiny, if applicable)

- 5.1 Not Applicable

6. IMPACT ON CORPORATE POLICIES, PRIORITIES, PERFORMANCE AND COMMUNITY IMPACT

- 6.1 Not Applicable

7. IMPLICATIONS

7.1 Financial

Implications verified by: Not Applicable
 Telephone and email: Not Applicable

Not Applicable

7.2 Legal

Implications verified by: Not Applicable
Telephone and email: Not Applicable

Not Applicable

7.3 Diversity and Equality

Implications verified by: Not Applicable
Telephone and email: Not Applicable

Not Applicable

7.4 Other implications (where significant) – i.e. Section 17, Risk Assessment, Health Impact Assessment, Sustainability, IT, Environmental

Not Applicable

BACKGROUND PAPERS USED IN PREPARING THIS REPORT (include their location and identify whether any are exempt or protected by copyright):

- Not Applicable

APPENDICES TO THIS REPORT:

- Not Applicable

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