



Item: 7.4

Report to:	NHS Hull Commissioning Board (ERY, NL, NEL)		
Date of Meeting:	Friday 27 March 2020		
Title of Report:	Humber Strategic Commissioning Model		
Presented by:	Accountable Officer		
Author:	Sarah Lovell, Director of Collaborative Acute Commissioning		
STATUS OF THE REPORT:			
To appro	ve To endorse		
To ratify	To discuss		
To consid	der For information		
To note	x		
PURPOSE OF REPORT: The purpose of this paper affirms the intentions of the four Humber CCGs to deliver a strategic commissioning model for the Humber area of the Humber Coast and Vale Integrated Care System (ICS). It describes the governance arrangements to steer the partnership and sets out our timeline to reduce duplication and align capacity in order to deliver integrated models of care. RECOMMENDATIONS: a Note the intention to operate strategic commissioning arrangements in shadow form until the necessary approvals are in place (estimated September 2020). b c			
REPORT EXEMPT FROM PUBLIC DISCLOSURE No X Yes If yes, detail grounds for exemption			

CCG STRATEGIC OBJECTIVE (See guidance notes on page 4)		
Integrated and Joint Commissioning		

IMPLICATIONS: (summary of key implications, including risks, associated with the paper),			
Finance	Operating pooled financial arrangements (initially in shadow form) to support and manage system and finance resilience, business rules and long term financial sustainability.		
HR	Resources and capacity will be aligned to support strategic commissioning and integration. Humber lead arrangements, capacity and capabilities will be developed over the coming months, in partnership with our staff, based on where the expertise, skills and strengths exist, regardless of employing organisation (see table 1a). Where arrangements continue at place, teams will be supported to work jointly across the Humber to common objectives (see table 1b and 1c).		
Quality and Safety	As part of its strategic commissioning function the Humber CCGs will balance quality assurance, quality improvement and quality planning. We will ensure that quality issues are considered in our strategic decision making and governance processes. We will continue to focus on quality and improvement within local areas, with a stronger emphasis on incentives which promote health outcome improvement.		
Safety	See above		

ENGAGEMENT: (Explain what engagement has taken place e.g. Partners, patients and the public prior to presenting the paper and the outcome of this)

CCG Chairs, Accountable Officers with HCV Health and Care Partnership Chair. The Humber Strategic Commissioning Model has been developed by the Director of Collaborative Acute Commissioning and four CCG Chief Operating Officers. The work has been overseen by the Humber Joint Commissioning Committee

LEGAL ISSUES: (Summarise key legal issues / legislation relevant to the report)

In order to realise the ambition to create a strategic commissioner for the Humber, whilst still recognising the primacy of place, the four CCGs will establish more formal and resilient arrangements to which specific responsibilities can be delegated. The CCGs are looking to establish a Strategic Commissioning Board to be the vehicle through which delegated responsibilities are delivered – this may also include responsibilities delegated by NHS EI, where it is agreed these should be managed at a Humber population level.

The Strategic Commissioning Board does not supplant the statutory duties of the constituent CCGs, but rather facilitates greater co-ordination and alignment of at-scale decisions.

The necessary approvals will be sought from the respective CCG Governing Body / Commissioning Board / Council of Members.

EQUALITY AND DIVERSITY ISSUES: (summary of impact, if any, of CCG's duty to promote equality and diversity based on Equality Impact Analysis (EIA). **All** reports relating to new services, changes to existing services or CCG strategies / policies **must** have a valid EIA and will not be received by the Committee if this is not appended to the report)

	Tick relevant box
An Equality Impact Analysis/Assessment is not required for this report.	Х
An Equality Impact Analysis/Assessment has been completed and approved by the lead Director for Equality and Diversity. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment.	
An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in section xx in the enclosed report.	

THE NHS CONSTITUTION: (How the report supports the NHS Constitution)

The Humber strategic commissioning model will accelerate the rate of progress in delivering the NHS long term plan ambitions and a 'system-by-default' approach.

It will do this by creating the conditions for integration, through collective leadership and a new operating model which supports the developing Humber, Coast and Vale Integrated Care System (ICS).

TITLE OF REPORT

1. INTRODUCTION

The enclosed report affirms the intentions of the four Humber CCGs to deliver a strategic commissioning model for the Humber area of the Humber Coast and Vale ICS.

It describes the governance arrangements to steer the partnership and sets out our timeline to reduce duplication and align capacity in order to deliver integrated models of care.

2. INFORMATION

As a strategic commissioner, the Humber will deliver improvements to population health outcomes in the long term, tackling health inequalities and operating at a scale which adds value at a system level.

In order to realise the ambition to create a strategic commissioner for the Humber, whilst still recognising the primacy of place, the four CCGs will establish more formal and resilient arrangements to which specific responsibilities can be delegated.

Table 1, page 4 of the enclosed report describes CCG functions and activities and identifies those that could be undertaken once through lead arrangements across the Humber (1a). It is proposed that arrangements are formalised and overseen by a new Humber Strategic Commissioning Board.

The CCGs are looking to establish the Strategic Commissioning Board to be the vehicle through which delegated responsibilities are delivered – this may also include responsibilities delegated by NHS EI, where it is agreed these should be managed at a Humber population level.

The Strategic Commissioning Board will be established with equal representation from across the four CCGs, but with a mix of representatives to ensure that all of the statutory roles required as part of a Governing Body are represented.

The establishment of the Strategic Commissioning Board will not negate the need for local engagement and discussion at the four CCGs governing bodies, to ensure that the implications of potential decisions and the views of the four places are understood, however it will be for the Strategic Commissioning Board to make decisions on those areas that it has been made responsible for within each CCGs scheme of delegation.

The Strategic Commissioning Board does not supplant the statutory duties of the constituent CCGs, but rather facilitates greater co-ordination and alignment of atscale decisions.

The Strategic Commissioning Board will be supported by a Leadership Group constituted from across the four CCGs that will be responsible for establishing and overseeing the functions and processes required to enable the Strategic Commissioning Board to appropriately discharge its responsibilities.

Corporate Governance leads from the Humber CCGs will work over the Sprint/Summer 2020 to enable formal delegation of functions and obtain approvals from NHSEI.

4. **RECOMMENDATIONS**

It is recommended that the Commissioning Board / Governing Body note the contents of this report and the direction of travel.