

**WOLVERHAMPTON CCG**

**Governing Body - 13<sup>TH</sup> November 2018**

**Agenda item 10**

<b>TITLE OF REPORT:</b>	Commissioning Intentions 2019/2020
<b>AUTHOR(s) OF REPORT:</b>	Sharon Sidhu, Head of Strategy & Transformation
<b>MANAGEMENT LEAD:</b>	Sharon Sidhu, Head of Strategy & Transformation
<b>PURPOSE OF REPORT:</b>	To outline the CCG's Commissioning Intentions for 2019/20
<b>ACTION REQUIRED:</b>	<input type="checkbox"/> <b>Decision</b> <input checked="" type="checkbox"/> <b>Assurance</b>
<b>PUBLIC OR PRIVATE:</b>	Public
<b>KEY POINTS:</b>	<ul style="list-style-type: none"> <li>To give an overview of commissioning intentions for 2019/20 which take into account National, STP and Local Placed Based Intentions</li> </ul>
<b>RECOMMENDATION:</b>	<ul style="list-style-type: none"> <li>To receive &amp; note contents of report</li> </ul>
<b>LINK TO BOARD ASSURANCE FRAMEWORK AIMS &amp; OBJECTIVES:</b>	
1. Improving the quality and safety of the services we commission	Commissioning Intentions set out CCGs priority areas for the forthcoming year. The commissioning intentions predominately focus on improving the quality, safety and outcomes of services it commissions whilst ensuring it remains within its financial resource allocation.
2. Reducing Health Inequalities in Wolverhampton	Commissioning Intentions set out CCGs priority areas for the forthcoming year. The commissioning intentions predominately focus on improving the quality, safety and outcomes of services it commissions whilst ensuring it remains within its financial resource allocation.
3. System effectiveness delivered within our financial envelope	The priorities identified within the Commissioning Intentions are intended to set the basis for negotiation with providers to ensure we remain with the financial resources available to the CCG.



## **1. INTRODUCTION**

- 1.1. This report presents Governing Body with an overview of the Commissioning Intentions process and Commissioning Intentions list for 2019/20.

## **2. BACKGROUND**

- 2.1. In September 2016 NHS England published planning guidance covering the two year period from 2017 to 2019. Contracts with NHS providers covered the two year period and the CCG published it's Commissioning Intentions in 2016 in line with the two year contract.
- 2.2. The CCG will need to agree new contracts with all NHS providers when the current two year end contract ends on the 31<sup>st</sup> March 2019. Currently there is no published guidance from NHS England regarding any changes to the national standard contract or timelines by which contractual agreements for 2019/20 must be in place.
- 2.3. In the absence of any national guidance we are working on the assumption that in line with previous years we will be required to give providers six months' notice of any proposed changes. Therefore in line with this timescale the Commissioning Intentions list was approved by Private Governing Body on the 11<sup>th</sup> September 2018 and published and shared with providers by the 30<sup>th</sup> September 2018 (See Appendix 1).
- 2.4. The Commissioning Intentions have been shared with Primary Care and Local Authority colleagues for review and comment. The list has also been discussed at the Better Integrated Care and Primary Care/Modernisation & Medicines Optimisation Delivery Board during August 2018.

### **National Policy**

- 2.5. National Policy indicates that implementation of the Integrated Care Systems at a local level will continue to be a key area of focus for 2019/20. In line with this direction of travel we can expect that as well as developing our plans as a CCG, we will also be contributing to development of plans at an STP level and our commissioning intentions will need to reflect both our local place based and STP level priorities.
- 2.6. We can also expect a continuing requirement to meet national constitutional standards and to implement key national strategies. In addition there will be an expectation for CCGs to focus on reducing variation in care by reviewing opportunities identified by Right Care.

## **Black Country Sustainability & Transformation Plan (STP)**

2.7. The Black Country STP is leading on a number of specific programme areas, in particular:

- Transforming Care Programme
- Urgent & Emergency Care
- Elective Care
- Maternity
- Mental Health Services
- Cancer

2.8 In addition the Clinical Leadership Group has developed a Clinical Strategy for the Black Country STP which includes a focus on the below areas. The CCG is already working on these areas as they have been identified as either Right Care priorities or as part of our local Integrated Care Partnership approach, which are reflected accordingly in our commissioning intentions list.

- Primary Care
- Children and Young People
- Cardiovascular Disease
- MSK
- Respiratory Disease
- Frailty

## **Integrated Care Partnership – Wolverhampton Place Based Strategy**

2.9 As part of our local Integrated Care Partnership approach we are working with key stakeholders across the health economy to redesign end to end pathways across the following areas which initially include:

- End of Life
- Frailty
- Paediatrics
- Mental Health
- Urgent & Emergency Care

3.0 The CCG is currently in the process of agreeing a risk/gain share agreement with The Royal Wolverhampton Trust which help shift from the current contractual model to the development of an outcomes based commissioning framework which will help underpin the Integrated Care Partnership – Wolverhampton Based Strategy



approach. Work is underway to develop the commissioning for outcomes framework, which will be shared with the Governing Body in due course

- 3.1 Similar discussions are also taking place with Black Country Partnership NHS Foundation Trust.

### **3. CLINICAL VIEW**

- 3.1. The Commissioning Intentions have been shared with primary care for review and comment.

### **4. PATIENT AND PUBLIC VIEW**

- 4.1. In previous years the CCG has undertaken a round of public commissioning intention events. This year the CCG has taken the decision not to hold these events due to the fact that most of the intentions are existing programmes of work, which we have engaged on previously and can demonstrate ongoing patient involvement through the commissioning engagement cycle (See Appendix 1).

- 4.2. In addition the CCG undertook a series of public engagement activities last year and as a consequence have published a 'you said, we did' document which outlines how we have taken the feedback into account when developing services <https://wolverhamptonccg.nhs.uk/contact-us/you-said-we-did>. Key themes from last year's engagement event and feedback from the PPG Chairs & Citizens Forum will be taken into account during the development of services

- 4.3. There will also be some further engagement work planned in regards to the commissioning for outcome framework.

### **5. KEY RISKS AND MITIGATIONS**

- 5.1. Commissioning Intentions play a pivotal role in communicating commissioning priorities including service developments, changes in delivery and provision therefore it is important that these capture all the relevant areas to take forward in negotiations with key providers. Therefore there is a small risk that commissioning intentions do not capture all local requirements, this can be mitigated and managed through ongoing discussions with providers.

### **6. IMPACT ASSESSMENT**

#### ***Financial and Resource Implications***

- 6.1. Commissioning Intentions will be used to inform financial planning and will help support the overall requirement of maintaining financial management of the organisation.

***Quality and Safety Implications***

- 6.2. Any quality and safety implications will be addressed as part of discussions with Providers regarding Commissioning Intentions.

***Equality Implications***

- 6.3. Individual schemes/projects are required to have completed Equality Impact Assessments where required.

***Legal and Policy Implications***

- 6.4. Where there are any legal or policy implications the project lead will liaise with the relevant support.

***Other Implications***

- 6.5. Please note that the Commissioning Intentions list is not exhaustive and may need to include additional intentions following approval due to planning guidance being published or other service issues that come to light.

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**Job Title: Head of Strategy & Transformation**

**Date: 16<sup>h</sup> October 2018**

**ATTACHED:**

Appendix 1 – Commissioning Intentions 2019/20 List