

WOLVERHAMPTON CITY COUNCIL**Health Scrutiny Panel**

Wolverhampton City Clinical Commissioning Group – Authorisation Update	
Author:	Richard Young Director of Strategy & Solutions
Contact Details:	01902 444644 richard.young@nhs.net
Title of report:	CCG Authorisation Update

Summary

This report provides the Wolverhampton City Health Scrutiny Panel with an update on the progress of the Clinical Commissioning Group (CCG).

This is a fast moving area of work and elements of this report may not reflect the latest position. A verbal update will be provided at the committee.

Recommendations

The Health Scrutiny Panel is asked to note the content of the report and receive further updates on the progression of the CCG.

1. Background

Following a long process of gathering evidence, refining plans and sending these to the NHS Commissioning Board to provide assurance that the CCG will meet the 119 legal criteria necessary to take on our statutory powers, on 21st February, the CCG received the final report from the NHS Commissioning Board stating that the CCG has been authorised with conditions.

This meant Wolverhampton CCG became authorised as a statutory NHS body from 15 February subject to some conditions. These conditions were reviewed before 31 March by the NHS Commissioning Board and quarterly thereafter.

The CCG was required to submit a rectification plan to the NHS CB Local Area Team (LAT) by 2012.

2. Authorisation Process update

The CCG has received the following feedback from the local Area Team of NHS England. In effect, this means that the CCG has one outstanding condition of authorisation (i.e. 3.1.1D: QIPP). (See table 1 below).

Table 1

Condition reference	Criterion	Support level	Summary of CCG evidence	Area Operations Director recommendation
3.1.1B	CCG has a clear and credible integrated plan, which includes an operating plan for 2012/13, draft commissioning intentions for 2013/14 and a high-level strategic plan until 2014/15.	N/A	Integrated commissioning plan, approved by governing body, H&WB board and previous draft seen and commented on by Area Team. Covers all required elements, but need final review	In place Recommend discharge of condition.
3.1.1D	QIPP is integrated within all plans. Clear explanation of any changes to existing QIPP plans.	III	Concerns relate to ability to deliver QIPP – not strong record, their delivery in 12/13 was fortuitous rather than planned History of two strong providers resistant to engage fully in QIPP Need to see track record of delivery	Recommend retention of condition until track record of delivery is provided
1.2D	Provide evidence of member practice involvement in decision-making process and, where appropriate, there are clear arrangements for delegation of functions		CCG Communications and engagement strategy developed, identifying how involvement is structured. Detailed evidence of engagement through three localities, with well attended meetings held in each locality. Joint Engagement Assurance Group held and Clinical and Allied Professions forum planned for 6 th June. EGM to be held on 23 rd May 2013.	In place Recommend discharge of condition.
3.3H	Provide evidence of on-going discussion between the CCG and provider organisations about long term strategy and plans		Details provided in Integrated Plan: for RWT, monthly modernisation programme board in place, CQRM in place, review of provider CIP programmes undertaken ICP presented and supported at Health and Well Being Board on 1 st May 2013.	In place Recommend discharge of condition.

3. Next steps

The CCG will submit further evidence to the NHS CB Local Area Team (LAT). The CCG has robust plans underway to address these issues and is confident that the remaining condition will be resolved.

4. Recommendations

The Health Scrutiny Panel is asked to note the content of the report and receive further updates on the progression of the CCG.

5. Financial Implications

There are no direct financial implications of this report.