

Health Scrutiny Panel

17 September 2020

Report title	CCG Merger Proposals
Report of:	Paul Tulley Wolverhampton Managing Director Birmingham and Black Country CCGs
Portfolio	Public Health and Wellbeing

Recommendation(s) for action or decision:

The Health Scrutiny Panel is recommended to:

1. Discuss the CCG merger proposal as detailed in this report.

1.0 Introduction

- 1.1 This report seeks to provide members of the Wolverhampton Health Scrutiny Panel with information about the proposed merger of the four CCGs across the Black Country and West Birmingham to form a single CCG.
- 1.2 The proposal to merge the 4 CCGs into a single CCG is a significant change in terms of formal governance and constitution and as such it is the subject of a formal approval process by NHSE/I.
- 1.3 The views of stakeholders, to include Wolverhampton City Council, Wolverhampton Healthwatch and health and social care providers have been sought ahead of a vote by GP members in October 2020.
- 1.4 A positive vote from the GP members will result in an application being made to NHSE for a merger from April 2021.

2.0 Background

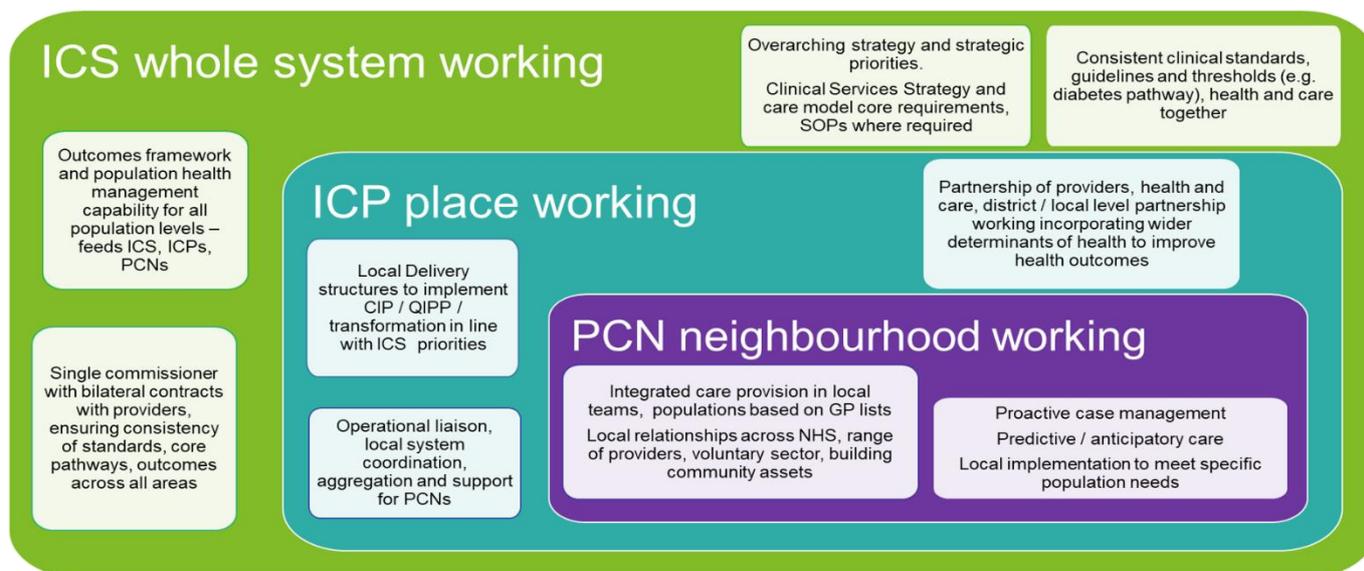
- 2.1 The NHS Long Term Plan, published in January 2019, contains clear guidance on how health and social care services should be organised in the future. The plan highlights three important levels for planning, delivery and decision-making:

System (population circa 1 million to 3 million people) - The highest level of planning in which an area's health and care partners come together to set strategic direction and develop economies of scale. The guidance builds upon the partnerships created through Strategic Transformation Partnerships ("STPs") and further strengthens these through the formation of Integrated Care Systems ("ICSs").

Place (population circa 250,000 to 500,000) - Draw health and care providers together into an Integrated Care Partnership. The Place is the level at which relationships with local councils, NHS community services and the voluntary and community sector are developed and maintained.

Neighbourhood (population circa 30,000 – 50,000) - Served by groups of GP practices working with NHS community services, social care, and others to deliver more co-ordinated services through primary care networks.

- 2.2 Each of the three levels of planning, delivery and decision-making has an important and complementary part to play in the effective functioning of the health and care system. This is illustrated in the diagram below.



- 2.3 At a system level, Wolverhampton is part of the Black Country and West Birmingham STP. Currently 4 CCGs work in collaboration as part of this STP - Dudley, Sandwell & West Birmingham, Walsall, and Wolverhampton alongside other health and care system partners. The next phase of development for STPs is the creation of Integrated Care Systems. The ambition is that each STP will become an ICS by April 2021 and that each ICS will have more streamlined commissioning arrangements to enable a single set of commissioning decisions.
- 2.4 It is within this national policy context that the Governing Bodies of each of the four CCGs have been seeking views on a proposal to merge the CCGs from April 2021 alongside plans to establish the Black Country and West Birmingham as an Integrated Care System covering a population of 1.5 million people.
- 2.5 Within the Black Country & West Birmingham it is recognised that the Place level will continue to have a distinct and important position in the way in which the ICS operates. Each of the five Places within the STP - Dudley, Sandwell, Walsall, West Birmingham, and Wolverhampton – is establishing a local Integrated Care Partnership and the CCG governance and management structures will also reflect the on-going importance of local place-based delivery and decision making.
- 2.6 At the Neighbourhood level 34 primary care networks have been formed across the Black Country and West Birmingham area.

3.0 Decision/Supporting Information

- 3.1 Some of the key benefits for patients and partners that would be realised through the proposed merger include:
- Stronger collaboration on issues that are most effectively tackled at the system level, including collaboration between our acute hospitals, specialist mental health and learning disability services and the commissioning of specialised services.
 - Less fragmentation of NHS organisations – easier to engage once rather than four times.

- Patients will be supported to engage and have influence at neighbourhood, place and system level with clear ways to get involved.
 - Opportunities to invest more resources to work with partners and tackle the wider determinants of health.
 - Reduced duplication and cost of management and administration associated with operating four separate statutory bodies.
 - Greater ability to work with partners operating at scale such as the West Midlands Combined Authority.
 - Continuing a strong focus on place through a Wolverhampton Commissioning Board and management team.
- 3.2 In our conversation since July the principle issue on which GP members and partners have sought assurance is that the merged organisation will continue to have strong and effective relationships with local partners and engagement with local people and that our GP members we will continue to have a strong clinical voice in making decisions that affect local services.
- 3.3 Contained within the Black Country and West Birmingham's plans for merger is a proposal to create a single Governing Body for system supported by five Place based Commissioning Boards.
- 3.4 The Wolverhampton Commissioning Board will hold responsibility for developing and implementing the Wolverhampton Commissioning Strategy and Delivery Plan. The JSNA will be used to inform the plan, which will be developed in full consultation with the Health and Wellbeing Board. The Commissioning Board will also have commissioning responsibilities in relation to the Wolverhampton Integrated Care Partnership, the CCG's relationship and joint working with Wolverhampton City Council and the support and development of primary care.
- 3.5 A Clinical Chair will be appointed to lead the work of the Board supported by GP Board Members, Lay Members, and officers from the CCG. To acknowledge the role of key strategic stakeholders Wolverhampton Public Health and Wolverhampton Adult Social Care will also have seats on the Board.
- 3.6 To add to this infrastructure the Black Country and West Birmingham CCGs have invested in a Wolverhampton Managing Director and are in the process of creating a team to focus specifically on meeting the needs of the Wolverhampton population.

4.0 Summary

The proposed merger of the four Black Country and West Birmingham CCGs will support the creation of an Integrated Care System as required by national NHS guidance and would secure for people and partners in Wolverhampton the benefits that stronger collaboration at the system level would deliver across the BC&WB area.

A local management team based in Wolverhampton and a clinically led Wolverhampton Commissioning Board will keep decision making in Wolverhampton for those key elements of the CCG's responsibilities that are best undertaken at the place level.