

PRIMARY CARE CO-COMMISSIONING COMMITTEE MEETING

Delegated Decision Making

Date of Meeting	4 th November 2015	Agenda Item	10
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CCG Corporate Objectives

To extend the life of our citizens and their quality of life adding life to years as well as years to life.	Y
To ensure there will be no gaps, no duplication – with integrated services and partnership working; including better relationships with voluntary, community and faith sector organisations	Y
To engage and encourage patients and the public to participate in everything we do and the importance of self-care and family wellbeing.	Y
To improve services and tackle inequality, evidence best practice to inform decisions and root out poor practice.	Y
To offer effective service interventions which will provide a better experience for patients with privacy and dignity.	Y

CCG High Impact Changes

Delivering high quality Primary Care at scale and improving access	Y
Self-Care and Early Intervention	
Enhanced and Integrated Primary Care and Better Care Fund	
Access to Re-ablement and Intermediate Care	
Improved hospital discharge and reduced length of stay	
Community based ambulatory care for specific conditions	
Access to high quality Urgent and Emergency Care	
Scheduled Care	
Quality	

Programme Leadership:

Clinical Lead	Dr Malcolm Ridgway
Senior Lead Manager	Mrs Claire Moir
Report authorised by	Dr Malcolm Ridgway

Decision Recommendations

Members are asked to:-

- Note the contents of the report and discuss and agree the preferred option as outlined in Table 1

PRIMARY CARE CO-COMMISSIONING COMMITTEE MEETING

1. Introduction

- 1.1 The purpose of this report is to provide the Primary Care Co-Commissioning Committee (PCCC) with a discussion paper on the delegated decision making arrangements for Primary Medical Care Services.
- 1.2 The committee is asked to discuss potential options for additional delegated arrangements from the PCCC, to enable decisions to be taken in a timely manner, whilst ensuring the CCG remains compliant with the governance arrangements underpinning the formal delegation agreement between the CCG and NHS England.

2. Formal Delegation Agreement – NHS England

- 2.1 The formal delegation agreement currently in place between the CCG and NHS England, allows the CCG to carry out specific functions for commissioning Primary Medical Services. This arrangement is incorporated within the CCG's Constitution's "Scheme of Reservation and Delegation" (SoRD).

3. Discussion - Delegation of Decision Making

- 3.1 The SoRD delegates the responsibility for decision making to the PCCC on the following functions:
 - "To enter into arrangements, contractual or otherwise, subject to compliance with delegated financial limits, to secure the provision of primary medical services
 - To ensure contracts and other arrangements are correctly monitored and governed including ensuring that all contractors sign the NHS England's data confidentiality code of conduct and IT security policy where relevant"
- 3.2 Following the decision to hold PCCC meetings on a bi-monthly basis, the committee is requested to discuss the rationale for delegating decision making powers in circumstances when delaying a decision until the next formal PCCC is not practicable or appropriate.
- 3.3 The options for discussion are as follows:

PRIMARY CARE CO-COMMISSIONING COMMITTEE MEETING

Table 1

Options	Risk	Benefit
a. Delegate to Executive Team (recommended)	<p>Managing conflicts of interest. This risk can be mitigated by ensuring the CCG's policy for handling conflicts of interest is adhered to. Records of decisions taken will be notified to the PCCC at the next scheduled meeting and published outlining how any potential or declared conflicts of interest are managed.</p> <p>Should the ET decide they are not able to make a decision on a specific issue then the matter will be deferred to the next PCCC.</p>	Timeliness of decision making as ET meets on a weekly basis.
b. Delegate to Chair's Action	The PCCC Lay Chair is now not as directly involved in CCG business, and therefore may not feel adequately briefed on certain issues. There also may be instances where the Chair is not immediately available to consider the issue and agree a decision.	No issue regarding conflict of interest.
c. Retain full decision making authority to PCCC	Potential delays to decision making	No issue regarding conflict of interest

4. Next Steps

4.1 To ensure business is conducted as efficiently and effectively as possible, and continue to maintain openness and transparency, the PCCC may wish to delegate authority for decision as outlined above, but with a limited financial value. This would align with the CCG's existing governance arrangements i.e. allowing delegated authority for decisions that are <£50,000 for the lifetime of the business case/proposal.

5. Conclusion

5.1 This report has presented the PCCC with a discussion paper on the current delegated

PRIMARY CARE CO-COMMISSIONING COMMITTEE MEETING

decision making arrangements for Primary Medical Care Services. The report has suggested potential options, with potentially a limited financial value to be delegated, therefore ensuring the CCG is able to conduct business as efficiently and effectively as possible whilst remaining compliant with the CCG's governance arrangements and the management of conflicts of interest.

6. Recommendations

6.1 Members are asked to:-

- Note the contents of the report
- Discuss and agree the preferred option as outlined in Table 1

Claire Moir

Governance, Assurance and Delivery Manager

22 October 2015