

## Update from the Oxfordshire Clinical Commissioning Group

### 1. Introduction

The following paper gives a general update on how the Oxfordshire Clinical Commissioning Group is progressing with the authorisation process to become a statutory NHS body in April 2013.

### 2. Background

As members will be aware, in the autumn of 2010 GPs from all practices in Oxfordshire agreed to form a single county-wide clinician led commissioning organisation called the Oxfordshire Clinical Commissioning Group (OCCG) in response to the Government's White Paper, *Equity and Excellence: Liberating the NHS*. The OCCG has six localities. The localities are increasingly taking on responsibility for commissioning local health services for the public and for the Quality, Innovation, Productivity and Prevention programme<sup>1</sup>. All of the GP practices in the county<sup>2</sup> are part of the OCCG structure – through the locality structure. Each area of work under QIPP (planned care, urgent care, long term conditions, medicines management and complex care) has a GP lead who works very closely with managers implementing the programmes of work and leading the engagement and involvement of their clinical colleagues. There are also GP leads taking a lead role for special projects such as the implementation of NHS 111 and the Appropriate Care for Everyone programme which is tackling delayed transfers of care in the county.

The OCCG aims to take over statutory responsibility for planning and purchasing healthcare for people in Oxfordshire in April 2013 when NHS Oxfordshire is disbanded.

### 3. Authorisation

The authorisation of Clinical Commissioning Groups is being managed in four waves during the summer and autumn of this year. OCCG is currently going through the process in the first wave. The CCG submitted a large amount of evidence demonstrating their readiness to take on the

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<sup>1</sup> QIPP: The Department of Health has initiated a programme of work called *Quality, Innovation, Productivity and Prevention* (QIPP) to respond to the difficult financial situation across the NHS in England. The approach looks at how the NHS can protect and promote quality while releasing savings across health systems. There is an Oxfordshire QIPP plan and it is the responsibility of all NHS health care providers in Oxfordshire to help deliver it. NHS organisations across the county are already working together to respond to this challenge.

<sup>2</sup> Shrivenham practice confirmed their intention to remain with Swindon and so are not members of OCCG. Rycote practice in Thame applied to join Oxfordshire CCG and are now members of the South East Oxfordshire Locality.

responsibilities of commissioning and this has been reviewed by the NHS Commissioning Board (NHSCB) against the six domains and 119 criteria that need to be met. .

The six domains are:

1. A strong clinical and multi-professional focus which brings real added value.
2. Meaningful engagement with patients, carers and their communities.
3. Clear and credible plans which continue to deliver the Quality, Innovations, Productivity and Prevention (QIPP) challenge within financial resources, in line with national requirements (including excellent outcomes) and local joint health and wellbeing strategies.
4. Proper constitutional and governance arrangements, with the capacity and capability to deliver all their duties and responsibilities including financial control, as well as effectively commissioning all the services for which they are responsible.
5. Collaborative arrangements for commissioning with other CCGs, local authorities and the NHSCB as well as the appropriate commissioning support.
6. Great leaders who individually and collectively can make a real difference.

The evidence was checked against the 119 criteria and each has been marked as red or green. OCCG was green for 89 of the 119 criteria. Green means that sufficient evidence has been provided and the assessment team are satisfied that the criterion is met. Red means that the evidence was unclear or missing and that more evidence will be required, either in the form of further paper-work to be provided, or by responding to questions around the key lines of enquiry (KLOEs) at the NHSCB site visit to OCCG on 18 September. Any criteria remaining unmet after the visit from the NHSCB may result in conditions being placed on OCCG for authorisation.

The NHSCB visit forms part of the legal process of assurance. The key objectives of the visit are:

- To pursue key lines of enquiry and themes resulting from the desk top assessment, in relation to specific domain criteria and authorisation thresholds.
- To confirm that the picture of OCCG that emerged in the desk top review is an accurate representation.
- To gain a more comprehensive understanding of the local context and challenges faced by OCCG, and receive confirmation of corporate ownership of these.
- An opportunity for the OCCG team to demonstrate their capability, insight and preparedness to take on the commissioning mantle, the leadership of the local health community and the challenges to be addressed.
- An opportunity for the NHS CB to hear OCCG present their challenges and ambitions and to understand how the NHS CB can support the development of OCCG in their endeavours.
- To explore the potential need for application of any conditions attached to authorisation of OCCG.

A final decision will be made by the NHSCB in October, and a verbal update on the initial findings of the visit will be given at the site visit.

#### **4. Appointments to OCCG shadow Governing Body and the development of senior structure for the organisation**

OCCG has made significant steps in establishing its shadow Governing Body (SGB) with the appointment of Ian Busby as the new Chair, along with Ros Avery and Professor Louise Wallace appointed to the two lay member roles.

Ian Busby lives in Oxford and is a Board Director of Blueground Partners, an organisational development company. He has wide experience of supporting companies in change initiatives in the public sector and he has also led change programmes in major private sector organisations such as Siemens, IBM and Network Rail; he has experience in developing new governance and board structures which will be invaluable to the development of OCCG.

All lay members have key roles in sharing corporate responsibility, as part of a team, to ensure that OCCG exercise its functions effectively. In addition, there are lead roles identified for each lay member. Ros will take up the lead role with responsibility for financial audit and Louise will lead on patient and public involvement.

Ros lives in Kidlington and is a qualified chartered accountant. She has held senior positions responsible for financial strategy and operations in leading charitable organisations, including Head of Finance with Oxfam UK and Ireland. Ros is also active in a number of charities and is currently Group Finance Director of Depaul International which works to prevent and care for the homeless in the UK, Ireland, Eastern Europe and the USA. Ros has been a Non-Executive Director for NHS Oxfordshire for the last six years.

Louise has over 30 years NHS experience, working initially as a Consultant Clinical Psychologist in hospitals across the West Midlands. She then held senior general management posts in the NHS hospital sector, including six years as Chief Executive at Banbury's Horton General Hospital NHS Trust. She has over 10 years experience as a Primary Care Trust Non-Executive Director, in Warwickshire and Coventry. Louise has had many opportunities to be involved in lay and public consultations about health services.

The new members bring with them their extensive skills and experience from the public and private sectors to help develop Oxfordshire Clinical Commissioning Group and strengthen commissioning in Oxfordshire.

Appointments are now being made to the senior management of the organisation and the structure of teams supporting work across the organisation is the next stage of fully establishing the organisation.

#### **First Shadow Governing Body (SGB) meeting in public**

OCCG held its first SGB meeting in public on Tuesday 4 September 2012 at Jubilee House, Oxford; over 60 people attended the meeting. Members of the public were given 30 minutes at the beginning of the meeting to ask questions, many were received in advance of the meeting. Whilst OCCG answered the questions relating to the agenda items of the meeting, responses to all questions received will be posted on the OCCG website within 20 working days. At the end of the meeting the Chair asked for feedback from members of the public in attendance; those who responded were generally positive about the approach SGB had taken to the meeting in public.

The next meeting in public will be held on Tuesday 4 December; time and venue to be confirmed.