

London Borough of Hammersmith & Fulham

Report to: Health, Inclusion and Social Care Policy & Accountability Committee

Date: 27/01/20

Subject: Moving to a Single Operating Model and Governance Structure

Report of: Author

Responsible Director: External Report from Mark Easton, Accountable Officer, Hammersmith & Fulham Clinical Commissioning Group

Summary

To inform the Committee about changes to the governance structures for clinical commissioning groups in North-West London as they move towards a single operating model.

Recommendations

That that the Committee considers, comment on and note the report.

Wards Affected: All

Contact Officer:

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Background Papers Used in Preparing This Report

None.

1. Background

1.1 In September 2019 CCG Governing Bodies across NW London agreed to move towards the creation of a single CCG by 1 April 2021. This position was reached at meetings of the Governing Bodies held in public and was subject to the following assurances:

- how we approach transition
- the position on financial flows and historic positions
- a single constitution (already in discussion with the LMC)
- local delegation and integration arrangements
- confirmation that a NWL-wide CCG was the correct answer

1.2 The move towards a single CCG has arisen from NHS England's plan to substantially reduce the number of CCGs and for them to be aligned to STP footprints. Across London it is anticipated London South East, South West and North Central London CCGs will be established as single CCGs for their STP areas by April 2020. Across NW London and NE London the aim is to create single CCGs by April 2021. Following the decision by the CCG Governing Bodies, the journey towards the creation of a single CCG would make 2020/21 a year of transition towards a new single operating model and progress on this is set out below.

1.3 The areas of work arising from the assurances outlined in 1.1 above are being picked up in a work plan for the first half of this calendar year. The aim is to present recommendations to Governing Bodies in June 2020 that would see membership votes taking place thereafter and then a final recommendation to NHS England for approval to create a single CCG for NW London from April 2021.

1.4 As part of the decision to merge into a single NW London CCG in April 2021, Governing Bodies agreed that there should move to a single operating model for a transition year in 2020-21.

2. Delivering the Single Operating Model

2.1 The CCGs face a dual challenge: preparing for merging into a single organisation and meeting the financial targets for reducing management costs we have agreed with the NW London System Recovery Board. Our aim is to minimise the impact of financial recovery on patient-facing services by making savings where we can on management costs. The level of saving required cannot be made simply by carrying on as we are, with smaller teams. We need to significantly change our operating model to anticipate the development of a single CCG, and the development of the NW London Integrated Care System and local Integrated Care Partnerships.

2.2 Over the last few months, the CCGs have been working on developing a new, single aligned structure for NW London. A period of staff engagement was launched on 4 December which lasted until Christmas. Draft management structures are being finalised and will be subject to discussion with NHS England, prior to a staff consultation that will last for 30 working days.

2.3 We currently expect the staff consultation to start in the last week of January for most staff. Consultation for staff in finance and IT has already commenced due to the nature of these departments. During the engagement period a number of meetings were held with staff to discuss the move to a single model and to answer their questions.

2.4 We have agreed in principle that CCGs should share some aspects of their management teams during this period of transition and that the following CCGs will work together.

- Brent and Harrow
- Central London, Hammersmith & Fulham and West London

- Ealing and Hounslow

Due to the co-terminous nature of the local system, it is currently envisaged that Hillingdon CCG will continue to have a self-contained management team.

2.5 It is likely that structures will be developed which have some staff working in a single borough, and some functions which are shared within boroughs. This will involve a reduction in the number of very senior posts and some teams having shared leadership. These moves are required to achieve viable teams within a reduced funding envelope. This is not dissimilar to other public sector organisations such as the Police and parts of Local Government where joint teams have been established.

2.6. There is nothing in our proposals which will prevent the continuation of joint commissioning arrangements where they exist, or lessen our commitment to borough based integrated care. Any council staff outposted to CCGs are clearly subject to separate employment arrangements.

2.7 In parallel, as part of the transition from an STP to an Integrated Care System (ICS), the Kings Fund has been commissioned to review our work creating integrated systems. They have interviewed key stakeholders, including council representatives, with the aim of devising a road map to integrated care at locality, place and system level. The Kings Fund work concludes in February.

2.8 The proposed change to management structures in no way alters our desire to work with Councils to continue to develop and deliver strong, integrated, place-based care for residents. The CCG will continue to work in partnership with the Borough as the new management arrangements are brought into effect and after any changes that are put in place from April 2021.

2.9 The Borough has expressed some concerns about the proposed three borough management arrangements. This proposal reflects the existing joint team structures for areas such as the Children's, system resilience and Learning disabilities. CCG colleagues will engage with their Borough counterparts on the proposals. Any comments will be considered before we publish the final structures in March 2020.

Mark Easton
Accountable Officer
Hammersmith and Fulham Clinical Commissioning Group
January 2020

List of Appendices: None.