

# Brent Clinical Commissioning Group

# Health and Wellbeing Board 10 November 2015

## **Report from Brent CCG**

For information and comment

Wards Affected: ALL

# **Brent CCG Commissioning Intentions 2016/17**

### 1.0. Summary

All Clinical Commissioning Groups (CCGs) develop and publish their commissioning intentions on an annual basis. Brent CCG has taken a proactive and inclusive approach to the development of its commissioning intentions for 2016/17, with a number of different consultation events having taken place over the last 2 months, including the Health Partners Forum held at the Sattavis Centre on 7<sup>th</sup> October 2015.

Following agreement of the CCG Governing Body to these commissioning intentions, the CCG teams will then move into the contracting cycle to embed these intentions within service contracts and contract monitoring during the course of the 2016/17 year.

The Health & Wellbeing Board should comment and provide a statement to the CCG on the Commissioning Intentions.

#### 2.0. Recommendation

It is recommended that the HWB provide comments to the CCG on the Commissioning Intentions which can be included as a statement in the Commissioning Intentions document.

#### 3.0. Detail

The CCG's vision for commissioning and contracting for services in 2016/17 has been set out in the attached document, covering:

- 1. Introduction
- 2. Contents
- 3. Review of Strategic Context
- 4. Brent CCG Commissioning Principles/ Health and Wellbeing Board Priorities
- 5. Brent's Health Landscape & Challenges
- 6. Progress against Operating Plan Domains
- 7. Progress and Achievements Over the Last 12 Months
- 8. Commissioning Vision Our Shared Vision Across North West London
- 9. Summary of Brent CCG Commissioning Priorities
- 10. Brent CCG Commissioning Intentions by grouping
  - Unplanned Care
  - Planned Care
  - IT Interoperability
  - · Integration of Health & Social Care
  - Enabling Functions
  - Children's Services
  - Mental Health
  - Carers

Following agreement of the CCG Governing Body to these commissioning intentions, the CCG teams will then move into the contracting cycle to embed these intentions within service contracts and contract monitoring during the course of the 2016/17 year.

#### 4.0. Financial Implications

The detailed financial implications to the CCG and its providers will be worked through as part of the contracting negotiations for the financial year 2016/17. The commissioning intentions are a high level plan only. Due to the CCG's tight financial constraints, it is unlikely that any additional investment will be available for 2016/17.

#### 5.0. Legal Implications

The CCG is obliged under the Health and Social Care Act 2012 to engage the Health and Wellbeing Board in the development of the Commissioning Intentions. CCGs must provide the HWB with a draft of the commissioning intentions and the Health and Wellbeing Board must give its opinion, which must be published in the CCG's commissioning intentions.

#### 6.0. Diversity Implications

Individual proposals within the Commissioning Intentions impact on patients with the intention of improving patient care, making it more co-ordinated around the patient and maximising capacity within the system to improve referral to treatment times and waiting times for appointments.

#### 7.0. Staffing / Accommodation Implications (if appropriate)

Depending on the outcome of individual service reviews, any procurement exercises that are undertaken as a result of the service review may impact on a limited number of healthcare staff working within those services commissioned by the CCG.

## **Background Papers**

The full CCG Commissioning Intentions document has been circulated with this paper.

#### **Contact Officers**

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