REPORT TO CROYDON CLINICAL COMMISSIONING GROUP GOVERNING BODY  
Meeting in Public  

29 January 2013  

Title of Paper: AUTHORISATION PROGRESS  

<table>
<thead>
<tr>
<th>Lead Director</th>
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<tr>
<td>Committees which have previously discussed/agreed the report.</td>
<td>Croydon Clinical Commissioning Group (CCG) Senior Management Team (SMT) 22 January 2013</td>
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<td>Committees that will be required to receive/approve the report</td>
<td>CCG Governing Body</td>
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<tr>
<td>Purpose of Report</td>
<td>Discussion and noting</td>
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Recommendation:  
The CCG Governing Body is asked to note progress.  

Executive Summary:  
The Health and Social Care Act 2012 set out wide ranging changes across health and social care, including the establishment of Clinical Commissioning Groups (CCGs) by 1 April 2013. In order to become authorised CCGs must demonstrate they are ‘fit for purpose’ in six domains. This paper sets out progress for this CCG, which is in the 4th and final wave for authorisation.  

Key Messages and Issues (making reference to paragraph within report)  

National Position  
In December 2012 the NHS Commissioning Board authorised 34 Wave 1 CCGs. Eight of the CCGs were authorised with no conditions, meaning they met all 119 authorisation criteria. The remaining 26 have been authorised with conditions which they should be able
to discharge before they take up their statutory responsibilities in April.

In London:

- Islington CCG - authorised with one condition
- Kingston CCG - authorised with no conditions
- Wandsworth CCG - was authorised with 2 conditions

Croydon CCG
The CCG, which is in the 4th and final Wave of authorisation, has provisionally demonstrated achieving 112 of the 119 criteria. The CCG has received very positive feedback from the panel session and of the 7 criteria not demonstrated:

- 4 related to the financial position
- 1 related to a risk sharing agreement not being in place yet – despite this being planned for sign off before the end of March
- 2 related to SI and early warning systems not in place yet – despite these being planned for sign off at the February Governing Body.

Particular strengths highlighted by the panel were:

- Strong leadership by the CCG team
- Strong partnership arrangements and relationship with the LA
- Clear evidence of a step change in clinical involvement in commissioning
- Ambitious and have high aspirations and we see the bigger picture
- Commendable succession planning for clinical leadership
- The GP networks demonstrate commendable good practice, involving learning, peer review and joint action
- Action on health inequalities shows through our work

There will then be one further opportunity to submit further evidence which can turn evidence criteria from red to green. This will include papers to be agreed at the January and February Governing Body meeting. The CCG will then hear of the final decision in early March 2013.

Other CCG Development Progress
Since the last report to the Governing Body in November:

- The Chief Nurse, two lay members and the secondary care consultant have been appointed.
- The selection and election of the two GPs for the Governing Body was undertaken, however there were no applicants.
- The service level agreement with the Commissioning Support Unit until April 2013 was signed
- 53 out of the 61 practices have signed the constitution

The key areas being progressed in preparation for the 1 April 2013 are:

- Ensuring the panel ‘reds’ are taken forward
- Implementing the Organisational Development Plan
**Governance:**

<table>
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<tr>
<th>PEC Comments where appropriate</th>
<th>None</th>
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<tbody>
<tr>
<td>Financial Implications</td>
<td>None</td>
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<tr>
<td>Implications for other CCGs</td>
<td>If the Croydon CCG is not authorised, another CCG might be asked to take responsibility temporarily.</td>
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<tr>
<td>Equality Impact Assessment</td>
<td>None</td>
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<td>Information Privacy Issues</td>
<td>None</td>
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<tr>
<td>Reputational Issues</td>
<td>If there is a negative outcome to the Authorisation process, this would have a significant effect on the reputation of the CCG.</td>
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<td>Communication Plan</td>
<td>A formal communication will be provided once the final decision is made with regard to the CCGs authorisation in March.</td>
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Authorisation Report

1. Introduction

The Health and Social Care Act 2012 set out wide ranging changes across health and social care, including the establishment of Clinical Commissioning Groups (CCGs) by 1 April 2013. In order to become authorised CCGs must demonstrate they are ‘fit for purpose’ in six domains.

This report updates the Governing Body on progress towards the CCG receiving authorisation by the NHS Commissioning Board (NHSCB), which enables the CCG to assume its full powers and responsibilities on 1 April 2013.

In December 2012 the NHS Commissioning Board authorised 34 Wave 1 CCGs. Eight of the CCGs were authorised with no conditions, meaning they met all 119 authorisation criteria. The remaining 26 have been authorised with minor conditions which they should be able to discharge before they take up their statutory responsibilities in April.

In London:
- Islington CCG - authorised with one condition
- Kingston CCG - authorised with no conditions
- Wandsworth CCG - was authorised with 2 conditions

2. Progress Towards Authorisation

2.1 Authorisation Process

The authorisation process recognises that CCGs are new, clinically-led organisations coming into being for the first time. Their full potential will emerge over time through learning from innovation and experience. At the same time, authorisation must ensure CCGs meet safe thresholds to take up their full statutory responsibilities on 1 April 2013. For this reason, authorisation of CCGs is designed as a maturity model in which the thresholds for authorisation are set in the context of a longer-term vision of what aspiring CCGs are already striving to deliver. The process should not be seen as an end in itself, but as a first step on a journey towards continuous improvement.

The content of authorisation is built around six domains. These domains, and their underpinning criteria, were developed with aspiring CCGs and other stakeholders. Assessing CCGs through these six domains provides assurance that CCGs will be able to safely discharge their statutory responsibilities for commissioning healthcare services, and is intended to encourage CCGs to be organisations that are clinically-led and driven by clinical added value.
Through the authorisation process the emerging CCG is assessed against 119 criteria through the:

- CCG submitting a range of documentation
- Panel assessment

The assessment also took into account:

- Feedback from a stakeholder 360 degree survey
- CCG data profile and
- NHS London Report of the CCG

2.2 Provisional outcome of the assessment process

Review of the documentation
Following a review of the CCG documentation (including the Constitution, the Integrated Strategic Operational Plan, the Financial Management Strategy, a group of other governance documents, minutes and papers), the CCG demonstrated achievement of 75 criteria out of 119. This meant that the CCG had 44 ‘red’ criteria to demonstrate achievement at the panel session. The experience of 2\textsuperscript{nd} and 3\textsuperscript{rd} wave CCGs is that between 50 and 70 of the 119 criteria often remained as “red” at this stage and still need to be fully evidenced.

The Panel session
A panel session was held on 20 December. The panel consisted of external members who, challenged the Governing Body members to demonstrate the achievement of the remaining 44 criteria which remained ‘red’. The CCG has received the report from the panel session, which is attached as appendix 1. In summary the CCG received positive feedback and had only 7 ‘reds’ remaining.

- 4 related to the financial position
- 1 related to a risk sharing agreement not being in place yet – despite this being planned for signed off before the end of March
- 2 related to SI and early warning systems not in place yet – despite these being planned for sign off at the February Governing Body.

Particular strengths highlighted by the panel were:

- Strong leadership by the CCG team
- Strong partnership arrangements and relationship with LA
- Clear evidence of a step change in clinical involvement in commissioning
- Ambitious and have high aspirations and we see the bigger picture
- Commendable succession planning for clinical leadership
- The GP networks demonstrate commendable good practice, involving learning, peer review and joint action
- Action on health inequalities shows through our work
The Panel suggest the following areas to take forward:

- Governing Body team development to fully include the four new members
- Build up the two-way relationship with the membership practices
- Consider what support to ask for from the Local Area Team on finances.

The CCG has responded positively to the panel report and have reflected that the CCG believe the report provides a true and fair reflection of where the PCT is, and we do not believe there to be any factual errors. However we have disagreed with some of the comments based on:

- Confusion about which year the criteria was based on and which year we were being assessed on and
- Consideration of parity with other CCGs and their assessment (which also affects the bullet above). For example we have not signed off our risk sharing arrangements for 2013/14 yet, however nor have the other CCGs who are green.

3. **Authorisation Next Steps**

There will then be one further opportunity to submit further evidence which can turn evidence criteria from red to green. This will include papers to be agreed at the January and February Governing Body meeting. Should criteria not be met by the end of the process, conditions may be imposed upon the CCG’s authorisation, which would be reviewed quarterly with the NHS Commissioning Board. The CCG will then hear of the final decision in early March 2013.

4. **Other Areas Being Progressed**

Since the last report to the Governing Body in November:

- The Chief Nurse, two lay members and the secondary care consultant have been appointed.
- The selection and election of the two GPs for the Governing Body was undertaken, however there were no applicants.
- The service level agreement with the Commissioning Support Unit until April 2013 was signed
- 53 out of the 61 practices have signed the constitution

The key areas being progressed in preparation for the 1 April 2013 are:

- Ensuring the panel ‘red’s are taken forward, which includes
  - finalising our financial plans, signing off SI and early warning system policies, signing off the South West London Risk Sharing Agreement
- Implementing the Organisational Development Plan which includes:
o Ensuring robust induction of new Governing Body members, undertaken Governing Body and Clinical Leadership Development, and delivering commissioning development for member practices

5. **Recommendation**

The Governing Body is asked to note progress in this report.

Author: Fouzia Harrington
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Date: 14 January 2013