DECISION-MAKER:	HEALTH OVERVIEW AND SCRUTINY PANEL
SUBJECT:	CCG REFORM IN HAMPSHIRE AND ISLE OF WIGHT
DATE OF DECISION:	22 OCTOBER 2020
REPORT OF:	CLINICAL CHAIR, NHS SOUTHAMPTON CITY CLINICAL COMMISSIONING GROUP

CONTACT DETAILS					
Executive Director	Title	Clinical Chair, NHS Southampton City CCG			
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STATEMENT OF CONFIDENTIALITY

N/A

BRIEF SUMMARY

The Boards of six CCGs (North Hampshire CCG, West Hampshire CCG, South Eastern Hampshire CCG, Fareham & Gosport CCG, Isle of Wight CCG and Southampton City CCG) have developed a business case to merge, and create a new CCG for Hampshire, Southampton and Isle of Wight from April 2021.

The CCG Governing Bodies met on 24th September where a decision with regards to proceeding with the merger was approved. The application to merge is currently being considered by NHS England for final approval.

The attached report outlines the proposal to merge.

RECOMMENDATIONS:

(i) That the Panel considers the proposal for six local CCGs to merge.

REASONS FOR REPORT RECOMMENDATIONS

1. To enable the Panel to provide feedback for consideration by the CCGs as they seek to develop new organisational arrangements.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2. None.

DETAIL (Including consultation carried out)

- In line with national policy, the health and care system in Hampshire & Isle of Wight will be designated as an Integrated Care System (ICS) by the end of 2020. In an ICS, NHS organisations, in partnership with local councils and others, take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve. An ICS is an evolved form of the existing Sustainability and Transformation Partnership.
- 4. Integrated Care Systems will further enable shared leadership and collaboration in order to deliver improvements for residents. Collaboration is key to successfully achieving our objectives, and significant strides forward

	have been made. CCGs work increasingly closely together and increasingly closely with local authorities, with NHS providers and with other partners to deliver our shared goals.				
5.	CCGs have been working together to determine how commissioning should evolve to better meet the needs of the local population. Our aim is to retain the benefits of the current CCG model – the local focus, local relationships with partners and local clinical leadership - whilst also gaining greater benefits of working together.				
6.	North Hampshire CCG, West Hampshire CCG, Southampton City CCG, Isle of Wight CCG, Fareham & Gosport CCG and South Eastern Hampshire CCG have concluded that coming together to form one CCG is the appropriate next step to accelerate progress. This will deliver benefits for patients and residents, benefits for primary care, and benefits for health and care partners.				
RESOU	RCE IMPLICATIONS				
Capital	<u>Capital/Revenue</u>				
7.	None.				
Propert	ty/Other				
8.	None.				
LEGAL	IMPLICATIONS				
Statuto	ry power to undertake proposals in the report:				
9.	The duty for local authorities to undertake health scrutiny is set out in National				
	Health Service Act 2006. The duty to undertake overview and scrutiny is set out in Part 1A Section 9 of the Local Government Act 2000.				
Other L	egal Implications:				
10.	None				
RISK M	ANAGEMENT IMPLICATIONS				
11.	None.				
POLICY	FRAMEWORK IMPLICATIONS				
12.	None.				

KEY DE	CISION?	No	
WARDS/COMMUNITIES AFFECTED:		FECTED:	ALL
SUPPORTING DOCUMENTATION			
Appendices			
1.	Future ways of working for Clinical Commissioning Groups in Hampshire, Southampton and Isle of Wight		

Documents In Members' Rooms

1.	None
Equality	y Impact Assessment

Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out?			No	
	rotection Impact Assessment			
Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out?			t No	
	Background Documents Background documents available for	inspection at:		
Title of Background Paper(s)		Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)		
1.				