

DECISION-MAKER:	Joint Commissioning Board		
SUBJECT:	Joint Commissioning Board Terms of Reference and Memorandum of Understanding		
DATE OF DECISION:	11 th June 2018		
REPORT OF:	Dr Mark Kelsey		
<u>CONTACT DETAILS</u>			
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STATEMENT OF CONFIDENTIALITY	
Not Applicable	
BRIEF SUMMARY Southampton City Council and Southampton City CCG have established a Joint Commissioning Board to commission health and social care in the City of Southampton. It will encourage collaborative planning, ensure achievement of strategic objectives and provide assurance to the governing bodies of the partners on the progress and outcomes of the integrated commissioning function.	
RECOMMENDATIONS:	
(i)	Joint Commissioning Board are asked to review and sign off the Terms of Reference
(ii)	The Board are asked to review and agree the Memorandum of Agreement
REASONS FOR REPORT RECOMMENDATIONS	
1.	To ensure the Governance process is in place for the Joint Commissioning Board that follows the constitutional arrangements of both the Council and Clinical Commissioning group
ALTERNATIVE OPTIONS CONSIDERED AND REJECTED	
2.	Not Applicable
DETAIL (Including consultation carried out)	
3.	Nationally there is an expectation that full integration of health and social care will be implemented by 2020. Southampton is ideally placed to increase the pace and depth of integrated commissioning, with its asset of co-terminosity between health and local government; its track record of delivering benefits through integration, its existing integrated commissioning functions and good working relationships. As a consequence a shared ambition for change has been agreed between SCC Cabinet and the Clinical Commissioning Group (CCG) Governing Body: ‘Commissioning together for health and wellbeing will allow us to push further

	and faster towards our aim of completely transforming the delivery of health and care in Southampton so that it is better integrated, delivered as locally as possible, person centred and with an emphasis on prevention and intervening early to prevent escalation’.
4.	In July 2017 Southampton City Council and Southampton City Clinical Commissioning group both gave formal approval for the establishment of Joint Commissioning Board with delegated powers to make joint decisions on behalf of the Council and CCG on certain agreed functions related to health and care. It was agreed by Full Council and the CCG Governing Body that the scope of the integrated commissioning arrangements will broadly mirror those areas of health and care commissioning covered by the Better Care Fund S75 plus other existing partnership agreements/shared funding arrangements.
5.	Full Council agreed to delegate authority to undertake joint commissioning functions that are non-executive functions within agreed budgets to individual members of the Board (Officers and Members as appropriate) acting at Board meetings within the procedures set out in the terms of reference. CCG Governing body delegated authority to the nominated members on the Joint Commissioning board.
6.	The Terms of Reference for the Board were approved at this time by both organisations. Terms of Reference require reviewing at the start of the year.
7.	As part of the process in developing the Joint Commissioning approach a number of joint sessions were held between the Cabinet and CCG Governing body members. This active discussion between clinicians and politicians led to a number of agreed values, principles and behaviours. These have been outlined in a Memorandum of Understanding, attached as Appendix 2 this requires reviewing.

RESOURCE IMPLICATIONS

Capital/Revenue

8.	The scope of the integrated commissioning arrangements is limited to agreed elements of health and care commissioning. A large majority are already included in the well-established Better Care Fund Section 75 agreement between the council and the CCG. It will also include other existing partnership agreements and shared funding arrangements. As a consequence the Joint Commissioning Board are responsible for a budget of of at least £105M. The services included within this budget will form part of the budget process for both organisations and still be required to contribute to the efficiency and savings programmes. The remit of the Joint Commissioning Board will be to recommend savings to contribute to these programmes. The Joint Commissioning Board will be responsible for delivering agreed savings, many of which will be inter related across social care and health.
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Property/Other

9.	Not Applicable
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LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

10.	Children and Families Act 2014 – emphasises that a local authority in England and its partner commissioning bodies must make arrangements (“joint commissioning arrangements”) about the education, health and care
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	provision to be secured .
11.	Care Act 2014 establishes requirement for integration of care and health by 2020
12.	NHS Five Year Forward View 2014 which outlines the future direction for the NHS which requires new partnerships in how care is delivered breaking down barriers between health and social care with more integrated approaches and with patients having far greater control over their own care
Other Legal Implications:	
13.	It is the responsibility of the Board to: <ul style="list-style-type: none"> • assess and manage any liabilities or risks reported in relation to each of the Better Care pooled fund schemes • monitor financial contributions of the Council and the CCG and make recommendations regarding future financial contributions • receive and sign off all Better Care Fund performance reports for approval and submission to NHS England • provide the Council/Cabinet and CCG Governing Body with an annual review of the S75 Better Care Partnership Agreement arrangements.
CONFLICT OF INTEREST IMPLICATIONS	
14.	None
RISK MANAGEMENT IMPLICATIONS	
15.	None
POLICY FRAMEWORK IMPLICATIONS	
16.	In line with both Constitutions

KEY DECISION?	No
WARDS/COMMUNITIES AFFECTED:	All
<u>SUPPORTING DOCUMENTATION</u>	
Appendices	
1.	Terms of Reference
2.	Memorandum of Understanding

Documents In Members' Rooms

1.	None
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Equality Impact Assessment

Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out.	No
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Privacy Impact Assessment

Do the implications/subject of the report require a Privacy Impact	No
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Assessment (PIA) to be carried out.		
Other Background Documents		
Other 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.	None	