RECORD OF EXECUTIVE DECISION

Tuesday, 15 October 2013

Decision No: (CAB 13/14 11369)

DECISION-MAKER: CABINET

PORTFOLIO AREA: CABINET MEMBER FOR HEALTH AND ADULT SOCIAL CARE

SUBJECT: IMPLEMENTATION OF AN INTEGRATED COMMISSIONING UNIT

BETWEEN THE SOUTHAMPTON CITY COUNCIL PEOPLE DIRECTORATE AND SOUTHAMPTON CITY CLINICAL

COMMISSIONING GROUP

AUTHOR: Stephanie Ramsey

THE DECISION

- (i) To consider the consultation feedback on the establishment of an Integrated Commissioning Unit.
- (ii) To approve the establishment of an Integrated Commissioning Unit.
- (iii) To note that there will be an additional cost to the Council due to the establishment of the Integrated Commissioning Unit of £90,800 from 2014/15 onwards which will be addressed as part of the development of the budget.
- (iv) To approve as a last resort a draw from the General Fund Revenue Budget contingency for the in year pressure in 2013/14 which cannot be managed within existing resources or from the savings to be delivered, as set out in paragraph 28.
- (v) To delegate authority to the Head of Legal, HR and Democratic Services, following consultation with the Director of People, to agree and execute the Memorandum of Understanding.

REASONS FOR THE DECISION

- Redesigning and commissioning integrated services will improve quality and outcomes and result in more effective use of resources and cost avoidance and as a consequence release savings.
- 2. It has been identified that some investment will be required to attract the skill set needed into some of the more senior posts to ensure the leadership, experience and rigour necessary to achieve the change required at scale and pace.

DETAILS OF ANY ALTERNATIVE OPTIONS

- A range of approaches were considered including no change to current aligned commissioning or a compromise that would have a shared strategy but continuing with separate commissioning functions. This was rejected as would maintain inconsistencies in commissioning leading to disjointed pathways and provision, duplications and inefficiencies and limited use of outcome based commissioning.
- 2. Alternative models were considered in developing an Integrated Unit including use of Section 75 agreements with pooled budget that either of the organisations could be the lead for or the development of a Joint Venture company. These would all have supported the benefits of integrated commissioning such as pooling capabilities and purchasing power across the Council and CCG; realigning spend to outcomes required; influencing the market on a grander scale; commissioning more joined-up services so everything "works together and achieving value for money.
- 3. However the decision was taken to develop the model outlined in this document as this achieves the benefits of integrating commissioning whilst being less disruptive to staff as no TUPE implications, retaining accountability and governance for each organisation and allowing period to trial and evaluate the approach first.

OTHER RELEVANT MATTERS CONCERNING THE DECISION

Recommendations received and considered from Overview and Scrutiny Management Committee held on 10th October, 2013:

- (i) To aid communication and joint working look at opportunities to co-locate teams as soon as possible.
- (ii) That the Health Overview and Scrutiny Panel monitors progress of the ICU and how the Council and CCG are maximising opportunities to pool budgets.

CONFLICTS OF INTEREST

None.

CONFIRMED AS A TRUE RECORD

We certify that the decision this document records was made in accordance with the Local Authorities (Executive Arrangements) (Access to Information) (England) Regulations 2000 and is a true and accurate record of that decision.

Date: 15th October 2013 Decision Maker: The Cabinet

	Proper Officer: Judy Cordell
SCRUTINY Note: This decision will come in to force at the expiry of 5 working days from the date of publication subject to any review under the Council's Scrutiny "Call-In" provisions.	
Call-In Period expires on	
Date of Call-in (if applicable) (this suspends implementation)	
Call-in Procedure completed (if applicable)	
Call-in heard by (if applicable)	
Results of Call-in (if applicable)	