

Report To:	Governing Body Meetings in Common
Report Title:	CCGs' Merger Programme Update
Report From:	Adrian Stokes, Accountable Officer
Date:	8 July 2020
Previously Considered by:	N/A

Action Required (*delete as appropriate*)

Decision:		Assurance:		Information:	✓	Confidential	
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Purpose of the Report:

To update the Governing Bodies of the three Coventry and Warwickshire Clinical Commissioning Groups on progress with the Merger Programme.

Key Points:

- Since the last update to the Governing Bodies in May significant progress has been made on the programme.
- Development sessions have been held with the Governing Bodies of the three CCGs to discuss the principles that will sit behind critical application products and to apprise members of key risks to the merger programme and the mitigations in place to address them.
- Work over the summer months will continue at pace and will include: engagement, as required, with relevant stakeholders on application documents; production of the documents to gain Governing Bodies' 'sub-group' approval and meet NHSE requirements; and the appointment process for a single Accountable Officer (AO) for the three CCGs ahead of the merger.

Recommendation:

Governing Body Members are asked to **NOTE** the content of this report.

Implications

Objective(s) / Plans supported by this report:	<ul style="list-style-type: none"> • We will work collaboratively with our partners to continuously improve quality of care. • We will enable our local health and care system to deliver a sustainable, integrated response to the needs of our Places, reducing health inequalities through our commissioning strategy. • We will focus our resources to secure services that are value for money and promote a financially sustainable health economy. • We will empower our diverse and motivated workforce to work in partnerships to improve population health.
Conflicts of Interest:	All team members have a potential conflict of interest in relation to the HR component of the programme, in particular. Conflicts of interest will be formally recorded and managed throughout the programme. Governing Body members also have a conflict of interest given their paid roles within the current CCGs.

Financial:	Non-Recurrent Expenditure:	Costs will be incurred as a result of the merger. These will be monitored separately but will need to be absorbed within the running costs' allowances across the CCGs.				
	Recurrent Expenditure:	N/A				
	Is this expenditure included within the CCG's Financial Plan? (Delete as appropriate)	Yes		No		N/A
Performance:	NHSE will take a supportive role in ensuring a successful merger application. Benefits realisation is a core component of the merger application and will be formally assessed following the successful merger of the CCGs.					
Quality and Safety:	The merger aims to support long term improvements in quality as the CCGs move towards becoming a strategic commissioner within an integrated care system.					
Equality and Diversity:	General Statement: The CCG is committed to fulfil its obligations under the Equality Act 2010, and to ensure services commissioned by the CCG are non-discriminatory on the grounds of any protected characteristics. Policies/decisions may need to be adjusted in line with any equality analysis or due regard. Any decision that is finalised without being influenced by appropriate due regard could be deemed unlawful.					
	Has an equality impact assessment been undertaken? (Delete as appropriate)	Yes (attached)	✓	No		N/A
Patient and Public Engagement:	The communications and engagement workstream will be pivotal in ensuring effective patient, public and stakeholder engagement throughout the merger period.					
Clinical Engagement:	The communications and engagement workstream will be pivotal in ensuring effective patient, public and stakeholder engagement throughout the merger period.					
Risk and Assurance:	Moderate. A programme risk register has been established and will be monitored and updated throughout the programme.					

Background

- 1.1 The mandate to progress a merger of the three clinical commissioning groups in Coventry and Warwickshire was finalised in February 2020 following positive vote outcomes. The intention is to achieve a single CCG for Coventry and Warwickshire CCG to become operational on 1 April 2021.
- 1.2 CCGs wishing to merge are required to make a formal merger application to NHS England (NHSE). The process involves submission of a number of documents, which are then reviewed against NHSE's requirements for CCG mergers. The deadline for submitting these documents for a 1 April 2021 merger is 30 September 2020 with a pre-application (draft submission) deadline of 21 August 2020.
- 1.3 The merger programme experienced a 'pause' from mid-March to early-May due to the CCGs needing to prioritise responding to the COVID-19 pandemic. Whilst the CCGs continue to respond to the pandemic, in early-May it became possible to restart the work on the merger programme due to a re-allocation of COVID-related roles within the CCGs.
- 1.4 Prior to submitting merger documents to NHSE the products require Governing Bodies' approval. Given the scale of the task, the timelines involved and the need for an efficient process, the Governing Bodies of the three CCGs have delegated responsibility for document approval to a Governing Bodies' 'sub-group'. The sub-group comprises a balance of Governing Body members from across the three CCGs and from across the differing Governing Body roles.

Progress update

- 2.1 Since the last report to the Governing Body in May significant progress has been made by the programme, including:
 - Detailed project plans for each workstream for Phase 3 (Application) - developed by Workstream Leads and reviewed by the Programme Office.
 - Most application documents are in development, albeit at differing stages.
 - The holding of weekly meetings between the Programme Director and Manager and the two Accountable Officers of the three CCGs and, separately, a weekly meeting between the Programme Director and Programme Manager (plus workstream leads, as required) with the Merger Support Team at NHS England (NHSE).
 - Establishment of the Governing Bodies' sub-group for approval of the products in three stages (June, July and August). This staggered approach enables the group to focus its attention on a set number of products at one time whilst also ensuring sufficient time for feedback from the GB sub-group to be addressed by the relevant Workstream Leads ahead of documents being submitted to NHSE.
 - Governing Body Development sessions for the three CCGs in June during which members were invited to discuss the principles that will sit behind critical application products, such as the Clinical Commissioning Strategy and the Merger Communication and Engagement plan. Members were also apprised of key risks to the merger programme and the mitigations in place to address them.
 - Development of the merger communications and engagement plan for on-going stakeholder dialogue and engagement in relation to some application documents, as these are developed.

- Commencement of Phase 4 (Implementation of the new CCG) and Phase 5 (Closing down the current CCGs) scoping to enable programmes for these phases to be set during July.

Next stages

3.1 Future work to take place over the summer months will include:

- continuation or commencement of engagement with relevant stakeholders on merger application products, as appropriate;
- production and quality assurance of all application products to ensure they meet NHSE's requirements and gain GB sub-group approval;
- appointment of a single Accountable Officer (AO) for the three CCGs ahead of the merger;
- consideration of opportunities for closer working arrangements between the three CCGs during the remainder of 2020/21, accepting that the newly appointed AO may wish to shape this further once in post;
- finalisation of Phase 4 and Phase 5 programme plans.

Monitoring issues and risks

4.1 The Issues Log and Risk Register is submitted to the Programme Board on a weekly basis and is regularly shared with NHSE.

Recommendation

5.1 That Governing Body members note the content of this report.

End of Report