What is commissioning and how is it changing?

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**What is commissioning?**

<table>
<thead>
<tr>
<th>The hierarchy of decision making</th>
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<tr>
<td><strong>Central government</strong></td>
<td>Determines overall NHS budget and objectives</td>
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<td><strong>NHS England &amp; national bodies</strong></td>
<td>Set priorities and allocates funding to commissioners</td>
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<td><strong>Commissioners</strong></td>
<td>National and local, decide on which services to fund</td>
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<td><strong>Providers</strong></td>
<td>Allocate resources between services or departments</td>
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<td><strong>Clinicians</strong></td>
<td>With the service user, decide on whether/what care is needed</td>
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<td><strong>Service users</strong></td>
<td>Take part in decisions about treatment and self care</td>
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What is commissioning?

Planning, agreeing and monitoring services, including...

- Determining needs of a population
- Defining priorities

- Service specification
- Negotiating and agreeing contracts

- Monitoring service quality and ensuring contract standards are met
What does the commissioning system look like?

Since 2013

National

DH

DHSC

Regional

SHAs

NHS England

Local

PCTs

CCGs

Service providers

Service providers
Who is responsible for commissioning?

**Statutory commissioners**

- 152 local authorities
  - Public health
  - Social care
- 195 clinical commissioning groups
  - Acute and community services
  - Some primary care
- 5 NHS regional teams
  - Specialised services
  - Primary care
  - Some public health

**Supporting/co-ordinating bodies**

- 5 commissioning support units
  - Provide support services to commissioners
- 44/14 STPs/ICSs
  - Strategic planning by providers and commissioners
- 152 health and wellbeing boards
  - Strategic planning by local authority and NHS commissioners
Clinical commissioning groups (CCGs)

- 195 CCGs across England
- Commission most NHS services including **urgent and emergency care, acute care, mental health and community services.**
- Responsible for approximately two thirds of the total NHS budget
- **Membership bodies** - local GP practices as the members
- Led by an **elected governing body** made up of GPs, other clinicians and lay members
- They **work closely with NHS England**, which is responsible for assuring CCGs, and supporting them to develop

£75.6bn 2018/19
NHS England regional teams

• 5 NHS England regional teams: North, Midlands and East, London, South East, South West

• Directly commission:
  • **Specialised services**, such treatments for rare cancers, renal dialysis, neonatal services
  • **Primary care**, including GPs, pharmacists and dentists
  • **Some public health services**, eg screening programmes
  • Some other services – eg for people in prisons

£24.2 bn in 2017/18
Local authorities

• 152 local authorities
• Commission many public health services including sexual health services, health visitors, school nursing and addiction services
• Commission social care services for older people and for those of working age

Public health grant £3.2bn in 2018/19

2016/17 approx. £16.8bn on adult social care
Other bodies involved in commissioning

Health and Wellbeing Boards
- Formal committees of local authorities that bring together local authority and NHS representatives
- Very limited formal powers - partnership forum rather than an executive decision-making body

Five commissioning support organisations
- Provide a range of support and services to CCGs and NHS England
- This includes finance, HR services, contract management, and procurement
How is commissioning changing?
How is commissioning changing?

Co-commissioning

• Most CCGs now have a role in commissioning **general practice**

• CCGs are also taking on some responsibility for commissioning **specialised services**

Joint / integrated commissioning

• **CCGs working together** – some sharing management structures and CEOs

• **CCGs and local authorities are working together** to support more integrated health and social care
5 CCGs: work together on health and wellbeing board and county-wide commissioning strategies such as child and mental health

3 CCGs: jointly commission from main local acute provider and some community services. Have shared staff resource for this.

8 CCGs: from 4 neighbouring counties have some joint commissioning arrangements, e.g. 111, ambulance services, patient transport, some mental health services

24 CCGs: make some joint decisions on buying support services from local commissioning support unit.

5 CCGs: work together on health and wellbeing board and county-wide commissioning strategies such as child and mental health

2 CCGs: share posts, share strategic plans, pooled running cost budget, close working arrangements

Example of CCG joint working
How is commissioning changing?

**Sustainability and Transformation Partnerships**

- 44 STPs
- Average population is 1.2 million people
- Bring together CCGs, NHS England, providers, local authorities and others
How is commissioning changing?

**Integrated Care Systems**

- June 2017 - 8 shadow ICSs identified in first wave, plus two devolved systems
- May 2018 - 4 new areas identified
- “‘evolved’ version of an STP that is working as a locally integrated health system”
- Commissioners, providers and others taking shared responsibility for **collective resources**
- More autonomy
Where next for commissioning?

- Increased collaboration
- Increased delegation
- Move to ‘strategic commissioning’
  - Population based budgets
  - Provider alliances/lead provider arrangements
- Implications for provider / commissioner split??
Thank you

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