Welcome - to the first edition of the North Specialised Commissioning bulletin for stakeholders

This bulletin is designed to update you on a regular basis on issues relating to specialised commissioning in the North of England. The bulletin will be produced twice a year, providing information for stakeholders, but if there is anything urgent in between we will let you know promptly.

In this edition we give a brief overview of Specialised Commissioning and the specialised commissioning team in the North. In addition this bulletin focuses on two of our main priorities; the Commissioning Intentions which is a blueprint for transforming specialised commissioning during 2016/2017 and the direction of travel for collaborative commissioning with CCGs.

Specialised Commissioning in brief

NHS England directly commissions specialised services with a value of approximately £14bn. Ministers are responsible for deciding which specialised services should be commissioned directly by NHS England rather than by CCGs, based on advice from the Prescribed Specialised Services Advisory Group (PSSAG), a multi-disciplinary Department of Health Committee.

There are over 145 services that are commissioned by 10 specialised commissioning teams that are part of NHS England. Around 60 of these are highly specialised (including services for people with very rare diseases). The specialised commissioning teams are grouped by the NHS England regions – North, Midlands and East, London and South.

NHS England specialised commissioning teams directly commission services from trusts and other providers including the independent sector and hold and manage the contracts with these providers.

The list of specialised services is under constant review. Each services comes under one of six ‘Programmes of Care’ (POC):

- Internal medicine – digestion, renal, hepatobiliary and circulatory system
- Cancer
• **Mental health**
• **Trauma** – traumatic injury, orthopaedics, head and neck and rehabilitation
• **Women and children** – women and children, congenital and inherited diseases
• **Blood and infection** – infection, immunity and haematology

To find out more visit: [https://www.england.nhs.uk/commissioning/spec-services/npc-crg/](https://www.england.nhs.uk/commissioning/spec-services/npc-crg/)

**Specialised Commissioning Team (North)**

The NHS England Specialised Commissioning North senior team includes:

- Robert Cornall, Acting Regional Director of Specialised Commissioning
- Dr Alison Rylands, Clinical Director
- Lesley Patel, Director of Nursing
- Frances Carey, Acting Director of Finance
- Liz Rogerson, Assistant Director of Specialised Commissioning for the North East
- Andrew Bibby, Assistant Director of Specialised Commissioning for the North West
- Matthew Groom, Assistant Director of Specialised Commissioning for Yorkshire and the Humber
- Mary Hardie, Head of Communications and Engagement

**Commissioning Intentions for Specialised Services for 2016/17**

NHS England’s commissioning intentions for Specialised Services for 2016/17 has now been published. The document outlines the strategic interventions we are planning to radically improve the way we commission, review and transform specialised services. The scope of services in 2016/17 will reflect changes agreed by Ministers, and the new mandatory Information Rules tool will provide a consistent base for all contracts with providers of specialised services.

The Commissioning Intentions describe how we intend to strengthen collaborative commissioning, tier specialised services around key geographies and place-based planning whilst ensuring consistent national standards and apply a collaborative process for resolving significant local specialised services issues. It details how we will clinically drive the necessary changes to improve quality alongside continued improvements to transparent, consistent contracting for excluded drugs and devices and collaboration to improve the value for patients in the supply chain.

**Changes to the Scope of Specialised Services**

Specialist Wheelchairs and Outpatient Neurology services are two services that will no longer be commissioned by NHS England and the budgets and responsibility for their commissioning will be with CCGs in 2015/16.

Ministers have also agreed that adult specialised severe and complex obesity services should be devolved to CCG contracts from April 2016.

Other changes that have been agreed by ministers are to transfer the commissioning of the services below to NHS England Specialised Commissioning rather than being commissioned by CCGs; these services will be reflected in NHS England contracts from April 2015:

- some highly specialised adult urological procedures
- some adult oesophageal procedures
- services for patients with homozygous familial hypercholesterolaemia
- some adult specialist haematology services.

**Work programmes by National Programmes of Care for 2016/17**

NHS England undertakes service reviews using a structured programme methodology with provider selection carried out in
an open and transparent way. Whenever we review a service we seek to ensure public, patient and carer voices are at the
centre of our healthcare services, from planning to delivery and we would greatly appreciate the support of our
stakeholders including Health and Wellbeing Boards, Oversight and Scrutiny Committees and local Healthwatch
organisations to do this.

The services that are being reviewed across the country now and into 2016/17 (listed by PoC) include:

- Mental Health PoC - CAMHS, learning disability transformation, mental health low and medium secure services
- Cancer PoC - stereotactic radiosurgery/radiotherapy (SRS/T), PET CT, proton beam therapy,
- Trauma PoC – hyperbaric oxygen treatment, paediatric burns, spinal cord injury
- Women and Children PoC - genomic laboratories, congenital heart disease, paediatric surgery and paediatric
  intensive care
- Internal Medicine PoC - intestinal failure
- Blood and Infection PoC - Hepatitis C networks, haemoglobinopathy, specialist infectious diseases

Drugs and devices review spans several PoCs.

Although these services are being reviewed across the whole of England there will be regional and local consultation
where appropriate followed by implementation plans that may affect regional and/or local services.

Regional Service Programme for the North

As well as National Commissioning Intentions the document includes the Regional Service Programmes for England. The
service programme for the North of England includes the following priorities:

Mental Health
The focus for 2016/17 will be the implementation of the on-going mental health high secure capacity plan and Child and
Adolescent Mental Health inpatient (CAMHS Tier 4) mental health provision. Plans have been reviewed by specialised
teams and are currently under review by local panels led by NHS England’s Directors of Commissioning Operations.

Cancer
An extensive local area work plan has been developed including; radiotherapy in North Cumbria and in Yorkshire and
Humber, chemotherapy care closer to home in South Tees, urological cancer services in Greater Manchester, pancreatic
cancer services and sarcoma services in Yorkshire and the Humber, South Cheshire cancer pathways, and the Mersey
upper gastrointestinal cancer consolidation programme.

Blood and Infection
Addressing service specification and governance issues with regards to HIV services will be a priority in 2016/17. Work
will also be undertaken to harmonise contractual and pricing arrangements.

Internal Medicine
The configuration of respiratory services will be reviewed across the North Region. A number of local reviews are also
planned including vascular services in the North East and Cumbria and Yorkshire and Humber in collaboration with CCGs,
implementing a new bariatric service in the North West, adult cystic fibrosis capacity in Lancashire and implementing the
current review of cardiology in the North West and the provision of complex cardiac devices in Yorkshire and Humber

Trauma
Two major trauma reviews are planned to address compliance issues in Cheshire and Merseyside and Greater
Manchester. Other reviews planned include prosthetics in North Cumbria, back pain in the North East, and the
development of a new model of care for complex rehabilitation in Yorkshire and Humber. Work is also ongoing to roll out
the assistive technology service across Yorkshire and the Humber.

Women and Children
Neonatal services and transport are to be reviewed in the North East and North West to consider demand, capacity and
configuration. The Children’s Epilepsy Surgery Services consultation received a significant level of feedback and the POC board is currently considering the options in the NHS England response. Work will continue to improve complex discharge process for children who require long term ventilation through the development of a new model of care.


To find out progress on the projects or proposed service developments in your local area please contact your Specialised Commissioning hub representative, listed at the end of this bulletin.

Collaborative Commissioning

Specialised services include a diverse range of services from renal dialysis through secure services in mental health to treatments for rare cancers. We know the current commissioning arrangements work well for some patients, but for others they can be an obstacle to providing the best experience of care. We must tackle the latter and do better for all patients. Collaborative commissioning provides a real opportunity to do this, through CCGs and NHS England, each with Their own responsibilities, working together in a way that delivers better outcomes for patients.

A Specialised Services Collaborative Commissioning Programme Oversight Group was set up in February 2015 to shape and direct the national program to support and enable CCG’s with collaborative commissioning for specialised services.

By integrating specialised services with other commissioning functions we can provide greater flexibility in the deployment of pooled funds across different services and increase the scope for joining up care pathways. It is part of a move to place-based commissioning enabling a joined up view of commissioning for a given population. Devolution of specialised commissioning is also consistent with Government policy on devolution such as joining up the local £ as in the Greater Manchester devolution.

Ten collaborative commissioning oversight groups have been established across the country and they have identified priority areas for service transformation and redesign in 2015/16. The six national Programme of Care boards have also been asked to identify best practice pathways and care models. In the north, the three collaborative commissioning oversight groups: North East and Cumbria; North West and Yorkshire and Humber, have all met and discussed terms of reference. Work is progressing particularly at pace in the Yorkshire and Humber collaborative as this group have been working together since the beginning of the year.

The way forward

By strengthening collaborative commissioning arrangements there is a clear direction of travel which will deliver more joined-up local, place-based commissioning in the next 3 – 5 years with an aim to fully transfer commissioning responsibility to CCGs.

Specialised Commissioning will need new models of commissioning and new models of delivery to achieve the aims of collaborative commissioning. This means place based commissioning and each service looked at within the context of the whole pathway of care and the population served. And delivery across the pathway and in networked models.

New Models for Commissioning Specialised Services

In order to get the best quality care for patients who need specialised services, ensure services are joined up and avoid duplication, work has begun to look at all the prescribed specialised services and consider on what basis they should be commissioned in future. This work has taken the form of segmenting specialised services into footprints or tiers to devise commissioning models for devolving services to collaboratives in the future. The tiers identified are:

- Group of CCGs
• Health economy eg City /county – such as the Greater Manchester arrangement
• Sub region (eg Yorkshire and Humber)
• National

Using a tool developed by NHS England, services are being assessed against these tiers. Legislation does not currently exist for commissioning responsibility to be delegated in this way, however, in house and external legal advisers are working with NHS England on governance arrangements to support this “tiering” work.

Next steps

Principles to steer the next phase of collaborative commissioning and transforming delivery are currently being worked on nationally and regionally. To find out more and/or get involved in this work, please contact your local Specialised Commissioning Hub, contact details are below:

How to contact us

To find out more about what is happening or to discuss any issue relating to Specialised Commissioning in your area please contact:

For the North West - Andrew Bibby, Andrewbibby@nhs.net, tel: 0113 8252600
For the North East and Cumbria – Liz Rogerson, Liz.Rogerson@nhs.net tel: 0113 8253044
For Yorkshire and the Humber – Matthew Groom, matthew.groom@nhs.net, tel: 0113 8255414

If you have any comments or suggestions for the Regional Specialised Commissioning Bulletin, please contact M.Hardie@nhs.net