



Cllr Mel Collins
**Chair the NW Joint Health and Overview
Scrutiny Committee**
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To: **Mark Easton**
Accountable Officer of NWL Collaboration of
CCGs

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Date: 21 August 2019

Dear Mark

Commissioning Reform in North West London

The members of the North West London Joint Health Overview and Scrutiny (the JHOSC) welcome the opportunity to respond to North West London Collaboration of CCGs (NWLCCCG) proposal to establish a single Clinical Commissioning Group (CCG) for North West London. We would like to thank you and your colleagues for attending the two meetings that we held to consider this change, for your response to questions raised and for extending the deadline for responses.

As you know, the JHOSC has considered this proposed change twice. Whilst some information is vague, we also see gaps in the information provided. We strongly believe that it is crucial to have sufficient and transparent information. More detail is needed to understand how this will be delivered against the backdrop of significant financial efficiencies (in both the NHS and local government) and move towards standardisation across North West London. We therefore have some comments on your proposals and further questions.

Financial implications: Thank you for including financial principles in the further detail document. It would be useful to better understand the financial modelling of the new NWL CCG. It is noted that savings from the staffing reduction alone will only contribute a small percentage of the current deficit. As such, we would like to understand how the new structure will deliver savings whilst still being able to respond to areas of local priority. The JHOSC's meeting in October will consider the financial recovery plan and we look forward to hearing more detail then.

Services to residents/local responsiveness: We would want to better understand what impact the proposed changes will have on the delivery of the services our residents receive and how decisions about these services will be made. There also remain questions about the 'single streamlined decision-making' process; how responsive it will be and to what extent decisions can still be made to reflect local interests? We also are keen to ensure the continued engagement with the voluntary sector.

Given how interlinked health, social care and Public Health are and in the context of budget pressures, we are keen to ensure that any restructure will see the continuation of quality, integrated

and coordinated services in our boroughs and that there will be no expectation to shift cost pressures to either social care or public health for the delivery of these services.

Timeframe: While we understand the drivers behind the proposed changes, given the significant change that is due to be achieved over a few months, we want to ensure that the timescales are realistic. We note that the update document outlines the reasoning behind the ambitious timeframe for change, but would recommend that it would be worth considering extending the programme timelines to allow for further engagement, especially with residents, and effective implementation.

During this process, consideration will have been given to the impact of the changes on our most vulnerable populations. We would like sight of NWLCCCG's Risk Register, Equality Impact Assessment and mitigation plan for this change programme.

Lessons learnt: The current model of CCGs was introduced in part to address shortcomings of Strategic Health Authorities which were previously removed as they lacked the local element. We would like to be assured that NWLCCCG has learnt lessons from Strategic Health Authorities and has plans in place to ensure good local delivery based on local knowledge.

Governance and oversight: The success of the single NWL CCG will rely on effective leadership, governance and transparent consultation. We would like clarity on the following governance and decision-making matters around the Case for Change.

As discussed during our second meeting, members of the JHOSC have concerns about Local Government representation on new CCG's board. Given the range of challenges across North West London we do not believe a single Local Government representative is adequate and that it will not represent the full range of views. We would like the board to have multiple Local Government representatives and for them to represent the range of boroughs (e.g. inner and outer London and the different political make-up of authorities). We would like more detail on how local accountability will be achieved following a merger

Overall, the JHOSC acknowledges the reasons behind the proposal for a single CCG, however, as outlined above, we would like more information on how it will work in practice. We are seeking assurances that patient care will not be compromised in any way; that our jointly commissioned and provided services will not be affected; and that there will be not be any cost shunt to local authorities.

We look forward to working with NWLCCCG and other NHS colleagues over the coming months and years.

Yours sincerely,

Councillor Mel Collins

Chair the North West London Joint Health and Overview Scrutiny Committee
London Borough of Hounslow