

**AGENDA ITEM**

**REPORT TO HEALTH AND  
WELLBEING BOARD**

**24 JULY 2019**

**REPORT OF CLINICAL  
COMMISSIONING GROUP**

**PROPOSALS FOR NEW CLINICAL COMMISSIONING GROUPS FOR TEES VALLEY AND  
DURHAM CCGs**

**SUMMARY**

At its meeting on 26 June 2019, the Board considered a presentation relating to Integrated Care Systems (ICS). Part of that presentation referred to proposals for the merger of CCGs in the Tees Valley and Durham. It was agreed that the Board would discuss and provide comments on the proposals, at its July meeting. This report provides background to why change is required, at this time; what proposals are being put forward and which proposal is likely to deliver what is needed.

The Board is asked to provide its views on the proposals to the CCG.

**RECOMMENDATION**

That the Board considers and provides its views on the proposals.

**DETAIL**

1. There are currently five CCGs covering the Tees Valley and Durham:
  - NHS Darlington CCG (patient pop. 100k)
  - NHS Durham Dales, Easington and Sedgfield CCG (patient pop. 272k)
  - NHS Hartlepool and Stockton on Tees CCG (patient pop. 300k)
  - NHS North Durham CCG (patient pop. 253k)
  - NHS South Tees CCG (patient pop. 293k)
2. These CCGs plan, buy and monitor NHS services for a population of over 1.2 million people.
3. The 5 CCGs have had a shared Accountable Officer and Management Team since Oct 2018, working at scale, whilst retaining strong focus on local communities. However, the NHS Long Term Plan requires:
  - fewer CCGs, and suggests 1 CCG per ICS
  - the creation of 'strategic' commissioning organisations
  - reduction in running costs by 20%

- need to focus on transforming services across providers to provide better outcomes for patients and to reduce inequality
4. Merger could help the CCG provide the above and additional benefits.
  5. Proposals:
    1. A single CCG across the ICS i.e. Cumbria and the North East
    2. A single CCG across the 5-CCG collaborative: merger of Darlington CCG, Durham Dales, Easington & Sedgefield CCG; Hartlepool & Stockton-on-Tees CCG; North Durham CCG and South Tees CCG.
    3. A single CCG across each Integrated Care Partnership: i.e. the southern ICP (South Tees CCG, Hartlepool and Stockton on Tees CCG and Darlington CCG) and the central ICP (Durham Dales, Easington and Sedgefield CCG, North Durham CCG, South Tyneside CCG and Sunderland CCG)
    4. **Two CCGs across Tees Valley and Durham i.e. a single Tees Valley CCG and a single Durham CCG, whilst retaining a shared management structure**
  6. The CCGs' consider that Option 4, above, would work best, because:
    - a local focus could be retained, whilst making greater savings
    - It will support pathway transformation and greater equality in clinical outcomes across our populations
    - It will strengthen CCG work with Local Authorities
    - It will assist the effective use of clinical leadership, across a broader population base
    - It will support financial sustainability
    - It is likely to be supported by partners, stakeholders and NHS England

#### **What happens next?**

7. CCGs are working with the local Healthwatch organisations to engage with the public to get their views on the plans. They are also consulting with other stakeholders, such as Health and Wellbeing Boards, Councils, MPs etc.
8. The outcomes of the engagement and consultation will inform the decisions CCG Governing Bodies make at the end of August 2019.
9. Following this, an application will be made to NHS England and it will inform the CCGs if they can establish the new arrangements, from April 2020

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