

**South West London Clinical Commissioning Groups
September Governing Body Paper for Part 1
Merger Application**

Introduction

1. At the beginning of September, the Governing Bodies of the six South West London (SWL) Clinical Commissioning Groups (CCGs) agreed to recommend to their members that they vote to approve the new SWL CCG constitution and hold a SWL Committees in Common meeting at the end of September to formally approve SWL's application to NHS England to merge the six CCG and create a new, single, CCG.

Discussion

2. Since the above meetings, we have continued to develop both the merger application and the governance documentation that will support the new CCG.
3. The merger application is divided into ten sections against which our proposal will be evaluated. These sections and assessment criteria are below.
 - **Section One:** Alignment with (or within) the local STP/ICS: to provide the most logical footprint for local implementation of the NHS Long Term Plan, and to provide strategic, integrated commissioning to support population health. The merger application should briefly set out how the proposed new CCG will work with all other local STP/ICS partner organisations (including any other CCGs, in line with the legal requirements) and (where relevant) other partner organisations (including other CCGs/providers) outside the existing STP/ICS with which it has significant working relationships. Any CCG merger proposal which crosses existing STP/ICS boundaries may prompt consideration of whether the existing STP/ICS boundaries are themselves appropriate or need to be re-drawn
 - **Section Two:** Coterminosity with local authorities: there is a presumption in favour of the proposed new CCG being coterminous with one or more upper-tier county council or unitary local authority. The existing CCGs must demonstrate how the merger would be in the best interests of the population which the new CCG would cover. This is particularly important in any case where the boundary of the proposed new CCG is not coterminous with local authority boundaries. In all cases, in line with the legal requirements, the existing CCGs must demonstrate in their application that they have effectively consulted with the relevant local authority(ies) regarding the proposed merger, record what the local authority(ies)' views are, and what the CCGs' observations on those views are. They should also show how they have/will put in place suitable arrangements with local authorities to support integration at 'place' level (population of between 250,000 and 500,000);
 - **Section Three:** Strategic, integrated commissioning capacity and capability: in line with the legal requirements, the existing CCGs must demonstrate that they have/will develop the leadership, capacity and capability for strategic, integrated commissioning for their population. This will include population health management, new financial and contractual approaches that encourage integration, and developing place-based partnerships. In accordance with the

legal requirements, the application must demonstrate how any commissioning support services to be procured will be of an appropriate nature and quality;

- **Section four:** Clinical leadership: in line with the legal requirements, the existing CCGs must demonstrate how the proposed new CCG will be a clinically led organisation, and how members of the new CCG will participate in its decision-making;
 - **Section five:** Financial management: in accordance with the legal requirements, the existing CCGs must show how the new CCG will have financial arrangements and controls for proper stewardship and accountability for public funds;
 - **Section Six:** Joint working: ideally, a merger should build on collaborative working between the existing CCGs and represent a logical next step from current arrangements. The merger application should show progress on joint working to date and must show how the existing CCGs intend to resource and manage the merger process itself;
 - **Section seven:** Ability to engage with local communities: assurance is required that the move to a larger geographical footprint will not be at the expense of the proposed new CCG's ability to engage with - and consider the needs of - local communities. (Note: duty to involve the public in commissioning - s.14Z2; and the Public Sector Equality Duty);
 - **Section eight:** Cost savings: where possible, the existing CCGs should show how collaboration and joint working to date has contributed to cost savings; they must also show any further cost savings projected to result from the merger, and when, and how cash released will be re-invested;
 - **Section nine:** CCG Governing Body approval: the merger application must show evidence of approval for the merger by the Governing Body of each of the existing CCG governing bodies;
 - **Section 10:** GP members and local Healthwatch consultation: evidence is required that each of the existing CCGs have engaged with, and seriously considered the views of, their GP member practices, and local Healthwatch, in relation to the merger. The merger application must record the level of support and the prevailing views of each existing CCG's member practices and local Healthwatch, and the existing CCGs' observations on those views.
4. In order to continue with our application, we need to submit it by 30 September. Attached to this paper are:
- A briefing document for the CIC on MFT application;
 - Governance documents to support the new CCG (these are all in draft and subject to change):
 - Draft Constitution;
 - Draft Scheme of Reservation and Delegation;
 - Draft Standing Orders;
 - Draft Borough Committee Terms of Reference (ToR);

- Draft Accountability Agreement;
 - Draft Primary Care Commissioning Committee ToR;
 - Draft Finance Committee ToR;
 - Draft Audit Committee ToR; and
 - Draft Remuneration Committee ToR.
 - NHS England CCG Merger Guidance.
5. In agreement and with the support of London Wide and Surrey and Sussex LMCs, Sarah Blow and Andrew Eyers, as the Accountable Officers of the six SWL CCGs formally asked permission from NHS England to submit the merger application before the membership had been asked to vote on the new constitution. In the event that the membership do not support the new constitution we will withdraw the application before the final NHS England application panel (see paragraph 5).
6. The membership votes will be taking place on the below dates:

CCG	Date
Kingston	8 October
Richmond	9 October
Wandsworth	3-10 October
Merton	16 & 17 October
Sutton	15 October
Croydon	17 October

Next Steps

7. We will formally submit our application on 30 September. The NHS England London Regional team will consider our application at an assessment panel meeting on 15 October. The recommendation of this meeting will then go to a further NHS England national assessment panel, currently scheduled for 29 October.
8. We expect to hear the result of our application in November.

Recommendation

9. The CiC confirm the CCGs should submit the merger application on 30 September in accordance with national guidance.
10. The CiC recommends to the membership to support the new constitution.