

<b>Subject:</b>	<b>Clinical Commissioning Group (CCG) Prospectus</b>		
<b>Date of Meeting:</b>	<b>12 June 2013</b>		
<b>Report of:</b>	<b>The Director of Public Health</b>		
<b>Contact Officer:</b>	<b>Name:</b>	<b>Giles Rossington</b>	<b>Tel: 29-1038</b>
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<b>Ward(s) affected:</b>	<b>All</b>		

**FOR GENERAL RELEASE**

Note: The special circumstances for non-compliance with Council Procedure Rule 3, Access to Information Procedure Rule 5 and Section 100B(4) of the Local Government Act 1972 (items not considered unless the agenda is open to inspection at least five days in advance of the meeting) were that the draft prospectus only became available from the CCG after the papers had been published. Deferring this item to the next scheduled HWB meeting would result in too great a delay in publishing the CCG prospectus.

**1. SUMMARY AND POLICY CONTEXT:**

- 1.1 Clinical Commissioning Groups (CCGs) are each required to publish a 'prospectus' in 2013. Guidance to CCGs from NHS England defines the prospectus as "a very short guide which explains to your local community what the CCG is, and the ambitions you have for your local population's health services". CCGs have considerable latitude in terms of designing local prospectuses.
- 1.2 NHS England guidance obliges CCGs to obtain the approval of their local Health & Wellbeing Board(s) before publishing their prospectus.
- 1.3 The draft Brighton & Hove CCG is included as **Appendix 1** to this report.

**2. RECOMMENDATIONS:**

- 2.1 That HWB members consider and comment on the CCG prospectus (**Appendix 1**)
- 2.2 That HWB members endorse the publication of the prospectus.

**3. RELEVANT BACKGROUND INFORMATION/CHRONOLOGY OF KEY EVENTS:**

- 3.1 CCGs are required to publish a 'prospectus', explaining to local people what they do and what their strategic priorities are. NHS England guidance to CCGs makes it clear that they must seek local HWB approval before publishing a prospectus – essentially so that the HWB has an opportunity to ensure that CCG prospectuses are properly focused on the priorities embodied in the local Joint Health & Wellbeing Strategy.

#### 4. COMMUNITY ENGAGEMENT AND CONSULTATION

- 4.1 None undertaken.

#### 5. FINANCIAL & OTHER IMPLICATIONS:

##### Financial Implications:

- 5.1 There are no financial implications arising from this report.

*Finance Officer Consulted: Name Michelle Herrington Date: 10/06/13*

##### Legal Implications:

- 5.2 There are no legal implications arising from this report. As set out in the body of the report, NHS England have issued guidance which requires CCG's to seek agreement to the Prospectus by the local Health and Wellbeing Board.

*Lawyer Consulted: Elizabeth Culbert Date:  
10/06/13*

##### Equalities Implications:

- 5.3 The CCG prospectus is intended to enable members of the public to better understand the functions and priorities of the CCG. However, some groups of people may struggle to access information via the prospectus and members may wish to ascertain what additional steps the CCG has taken to communicate with 'hard to reach' groups.

##### Sustainability Implications:

- 5.4 None directly

##### Crime & Disorder Implications:

- 5.5 None directly

##### Risk and Opportunity Management Implications:

- 5.6 The CCG prospectus is intended to enable members of the public to better understand the functions and priorities of the CCG. The prospectus therefore

needs to be easily accessible, accurate and informative in order to maximise the opportunities to engage the local community.

Public Health Implications:

- 5.7 None directly

Corporate / Citywide Implications:

- 5.8 The CCG's strategic plans, as set out in the prospectus, should support the ambitions of the city Joint Health & Wellbeing Strategy.

**6. EVALUATION OF ANY ALTERNATIVE OPTION(S):**

- 6.1 The HWB has the option of declining to endorse the CCG prospectus or of requesting additions/amendments. In particular, it should consider these actions if the CCG prospectus does not focus on the jointly agreed JHWS priorities. However, the draft CCG prospectus does include a focus on the JHWS priorities, so it is recommended that the draft be endorsed.

**7. REASONS FOR REPORT RECOMMENDATIONS**

- 7.1 HWB approval for the CCG prospectus is required before the CCG can begin its preparations for publication.

**SUPPORTING DOCUMENTATION**

**Appendices:**

1. Draft CCG prospectus

**Documents in Members' Rooms**

None

**Background Documents**

1. Letter to CCG Clinical Leads from Dame Barbara Hakin, NHS England Chief Operating Officer, 29 April 2013. Gateway Reference Number 00048.

