Response to NHS Chief Executive’s Open Call for Evidence and Ideas

Respondent ID: 18

Organisation name: National Clinical Commissioning Network Lead

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National Clinical Commissioning Community

Following the listening exercise for the Health and Social Care Bill, it is now important to build a supportive implementation programme to advance clinical commissioning, share learning and promote leadership.

Delivery is to be assisted by the growth of the national commissioning networks developed to date with an expansion of both clinical and managerial champions, to bring clinical commissioning to a level at which the momentum for change becomes unstoppable, and a critical mass of clinical commissioning achievements can be quickly delivered.

Aims

The clinical commissioning community is an overarching framework which works in close collaboration with other national and local clinical networks across England as part of one overall implementation system. Its fundamental focus is to support the development of commissioning in order to improve patient outcomes and experience and drive up standards and quality.

- To provide clinicians in commissioning across the country with a simple means of connecting with each other, accessing contemporary information and good practice
- To bring together a community of experts who will support national work being undertaken on the development of commissioning
- To assist in providing a consistency of message, dispel misconceptions and negative attitudes and help to create calm during the period of transition
- To keep the frontline clinical community informed directly of products and development of systems
- To provide a means of inclusion for other health care professionals to be involved in commissioning development
- To connect the National Clinical Directors to clinical commissioners and consortia.
- To provide DH with a real time communication system that connects to clinicians and GP consortia in an interactive way
- To actively promote the policy of clinically led commissioning and to encourage more clinicians to play an active part
- To support and augment the quality of local information that is collected and distilled by the Regional Commissioning leads
- To minimise risk in the system by assisting and fast tracking the development of the skills and competencies of clinical commissioners
Delivery

The implementation of clinical commissioning can benefit from the production of a ‘policy epidemic’ which will be dependent on the involvement of people with a particular set of leadership and social skills.

A relatively small number of ‘champions’ disseminating information, knowledge and enthusiasm can stimulate and create a cascade of change.

They are and will be:

1. **Connectors** - with the gift of bringing the service together - making contacts and influencing people - *promoting co-production*

2. **Credible** - trusted experts in clinical practice and commissioning who wish to pass knowledge on to others – almost pathologically helpful - *supporting subsidiarity*

3. **Charismatic** - persuaders with powerful negotiation skills – convincing others to agree with them - *aligning systems*

Both the National Clinical Commissioning Network and the associated Healthcare Professionals Network have delivered an ever increasing number of clinicians involved with and enthused by commissioning.

Many clinical champions are already active across England. This number will be expanded. These champions are now empowered with the DH ‘seal of approval’.

Three Key Messages

To summarise and capture the new and unique contribution of this work:

- This work directly supports the *hard wiring* between the centre and regional directors to assist and expand programmes for clinical commissioning development, and will afford additional perspectives and contributions through a national network of clinicians and managers.

- This will supply a focussed and global viewpoint alongside the opinion of the wide range of supportive organisations (BMA, RCGP, NAPC, NHS Alliance, FDA) and provide independent and *unbranded* advice for policy development and implementation.

- It specifically will create coherence and joint working throughout the healthcare professional community both nationally and regionally to demonstrate a multidisciplinary approach that can be adopted locally.


**Benefits and Output**

Key benefits for this work would be:

1. Strengthening the implementation of clinical commissioning by fostering a culture of innovation throughout the clinical and managerial communities.

2. The ability to articulate consistent policy messages relating to clinical commissioning through visible public spokespersons and thereby support the production of materials for clinical commissioners.

3. Bring increased capacity and focus within primary care to the QIPP Programme and forge strong links with the DH team to support delivery.

4. Supporting the capture of learning in a systematic way though NHS networks.

5. Promoting clinical leadership through the further development of:
   - National Clinical Commissioning Network
   - Healthcare Professionals Network
   - CNO Nurses in Commissioning Network
   - AHP National Network

6. Support the identification of and provide a network for good/best practice in service redesign and help connect clinical commissioning groups across England.

7. Support problem solving and the resolution of potential and actual disputes.

8. Publicising and sharing quality performance in clinical commissioning with a focus on the business plans and local metrics developed and used to assess the impact of change in services.

9. Ultimately see clinical commissioning rapidly established as part of everyday practice in Primary Care and assist the firm grounding of government policy.