

**Report to:** East Sussex Health Overview and Scrutiny Committee (HOSC)

**Date of meeting:** 21 September 2017

**By:** Assistant Chief Executive

**Title:** Clinically Effective Commissioning

**Purpose:** To provide HOSC with an overview of a new regional NHS initiative, 'Clinically Effective Commissioning'.

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## **RECOMMENDATIONS**

- 1) To consider and comment on the report.**
  - 2) To agree what, if any, further scrutiny of this issue is required.**
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### **1 Background**

1.1 Clinically Effective Commissioning is a new regional NHS initiative which aims to improve the effectiveness and value for money of healthcare services by ensuring that commissioning decisions across the region are consistent, that they reflect best clinical practice, and that they represent the most sensible use of limited resources.

1.2 The aim is to apply sound clinical decision making within mutually agreed policies. The intention is to ensure equality of access, improved clinical outcomes, better patient experience and efficient demand and capacity management across the system. In addition, supporting processes are being put into place to make it easier for clinicians to work within clinical policies where they exist.

### **2 Supporting information**

2.1 Clinically Effective Commissioning is a regional initiative which is being led locally by CCGs. South East Coast HOSC Chairs have agreed that scrutiny of this programme should initially be conducted by individual HOSCs, and a similar report is being presented to Brighton and Hove, West Sussex and Surrey HOSCs. As Clinically Effective Commissioning progresses, and should substantive plans for changing services be identified, it may be necessary to further explore whether these plans are better scrutinised individually or jointly.

2.2 Further information on the programme is attached at Appendix 1 and will be presented to HOSC by Wendy Carberry, Accountable Officer of High Weald Lewes Havens CCG on behalf of all three Sussex CCGs.

### **3. Conclusion and reasons for recommendations**

3.1 HOSC is recommended to consider and comment on the report and to agree any further scrutiny required. HOSCs are likely to become more involved in scrutinising aspects of this work-stream as it develops.

**PHILIP BAKER**

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