

Future of Commissioning

NHS BT LUNG SUMMIT 22nd February 2023

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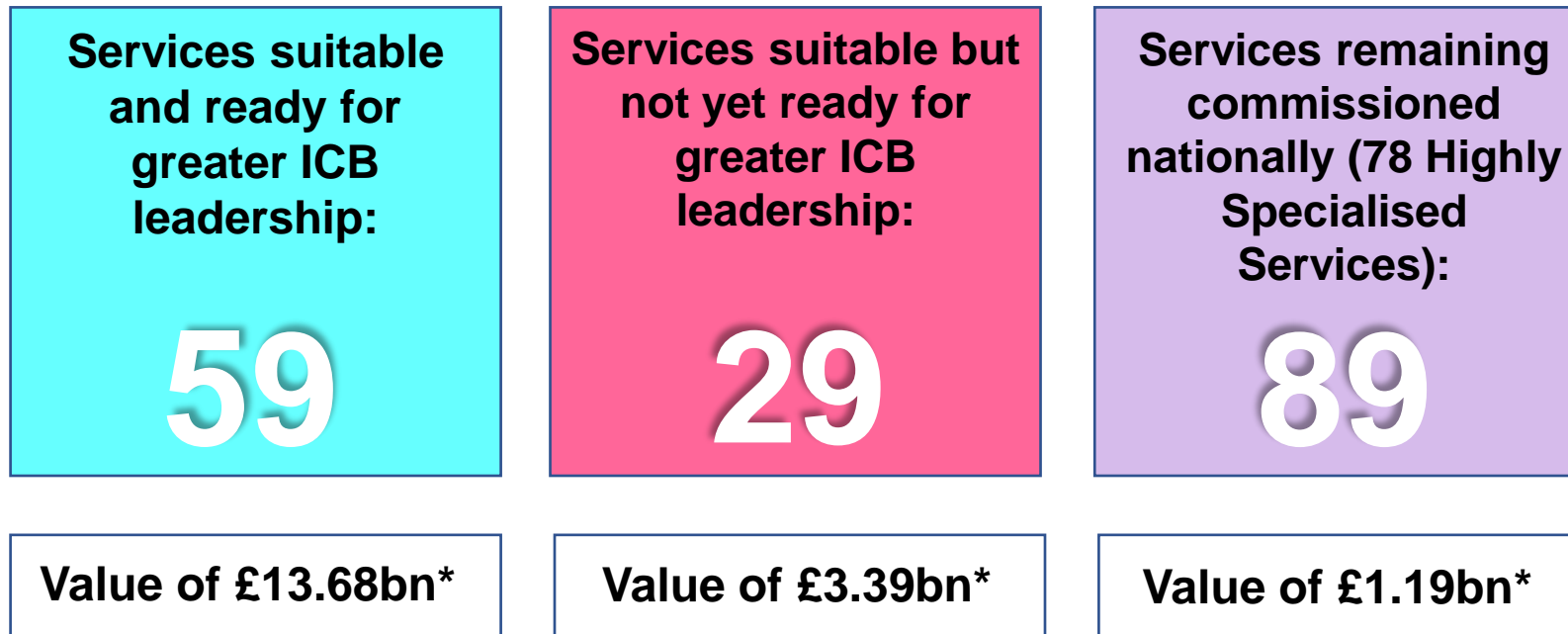
Part 1: Changes to the commissioning landscape

- NHS England joint commissioning of some specialised services with Integrated Care Boards from 1 April 2023.
- Joint committees between NHS England and multi-ICB collaborations
- Nine geographical footprints - will oversee and take commissioning decisions on 59 specialised services identified as suitable and ready for integrated commissioning.
- NHS England will continue to set national policies and standards and will remain ultimately accountable for the commissioning of all prescribed specialised services.
- Commissioning responsibility for all other specialised services will be retained by NHS England, for some temporary and others permanent
- Highly Specialised Lung transplantation services permanently retained

[Roadmap for Integrating Specialised Services within Integrated Care Systems,](#)

Register as a stakeholder to receive updates if you are interested: [stakeholder](#)

Output of the Service Portfolio Analysis with financial values



These numbers show groupings at a prescribed specialised services manual level, however analysis was carried out at a service line level 22 services have services lines which sit across the three commissioning levels.

Proposed Joint Committees for 23/24

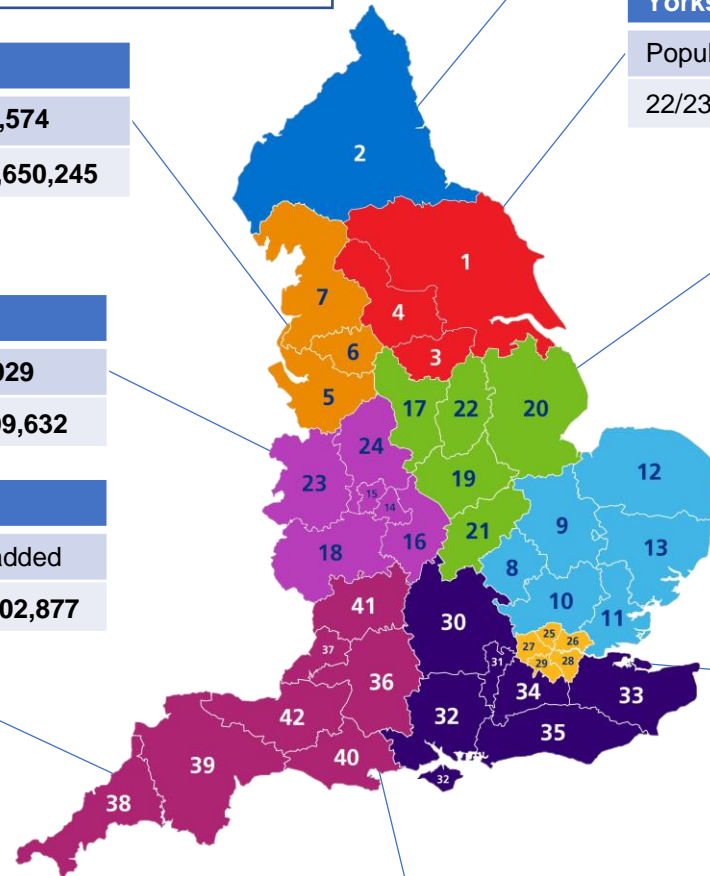
Around 92% of core service spend is planned for greater ICB leadership

North West	
Population footprint	7,693,574
22/23 Baseline allocation (£)	1,592,650,245

West Midlands	
Population footprint	5,961,929
22/23 Baseline allocation (£)	1,216,799,632

South West	
Population footprint	To be added
22/23 Baseline allocation (£)	1,093,902,877

Population footprints used on this slide were provided by regions in their summaries. As a result, several different data sources have been used.



North East North Cumbria	
Population footprint ¹	3,008,913
22/23 Baseline allocation ² (£)	530,756,150

Yorkshire and the Humber	
Population footprint	5,526,350
22/23 Baseline allocation (£)	977,217,204

East Midlands	
Population footprint	4,696,629
22/23 Baseline allocation (£)	915,007,681

East of England	
Population footprint	7,082,155
22/23 Baseline allocation (£)	1,248,453,788

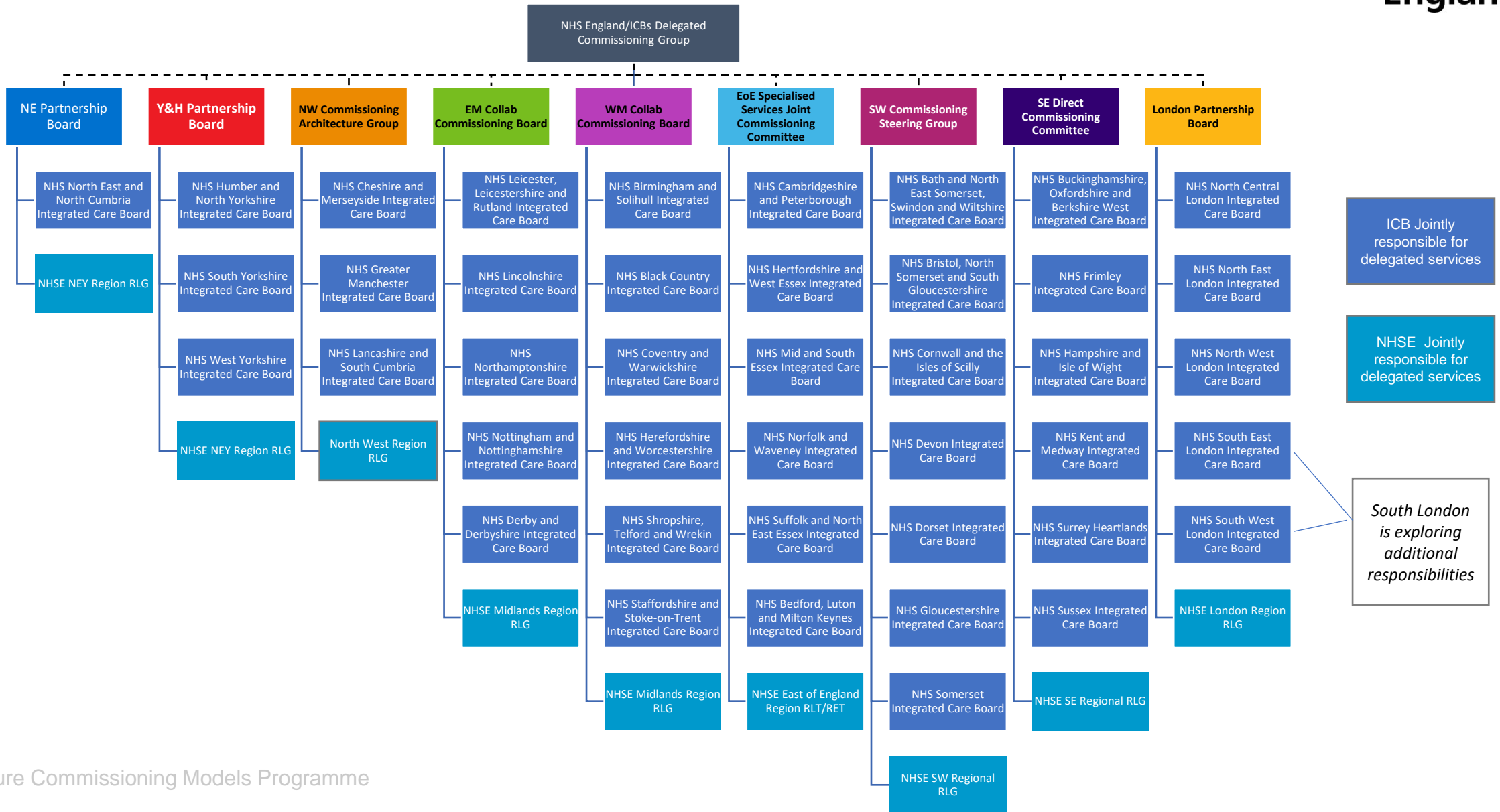
London	
Population footprint	10,579,509
22/23 Baseline allocation (£)	2,295,275,813

South East	
Population footprint	To be added
22/23 Baseline allocation (£)	1,729,451,243

Services that are suitable but not yet ready for greater ICB leadership in 23/24

22/23 Baseline allocation (£)	1,552,218,137
These services will form part of discussions at Joint Committees, however ICBs will not have shared decision-making responsibilities and voting rights for them.	

The make-up of the nine joint committees



Part 2: Lung Transplantation Service



SCHEDULE 2 – THE SERVICES

A. Service Specifications

Service Specification No.	170006/S
Service	Lung transplantation service (Adults)
Commissioner Lead	
Provider Lead	
Period	
Date of Review	

1. Population Needs

1.1 National/local context and evidence base

Lung transplantation is an established treatment for irreversible lung failure. It offers carefully

<https://www.england.nhs.uk/wp-content/uploads/2017/04/lung-transplantation-service-adult.pdf>

SCHEDULE 2 – THE SERVICES

A. Service Specifications

Service Specification No.	170013/S
Service	Cardiothoracic Transplantation Service (Paediatrics)
Commissioner Lead	
Provider Lead	
Period	
Date of Review	

1. Population Needs

1.1 National/local context and evidence base

The service provides a comprehensive transplantation service for infants and children referred with cardiac or respiratory failure who have not responded to maximum conventional treatment and who are therefore candidates for transplantation.

[cardiothoracic-transplantation-service-paediatrics.pdf \(england.nhs.uk\)](https://www.england.nhs.uk/wp-content/uploads/2017/04/cardiothoracic-transplantation-service-paediatrics.pdf)

Service Standards

Do we need to review the service specifications?
Should we review the service standards?
What are the priorities?

The service will deliver these aims for adults with advanced lung disease by:

- pre-operative assessment
- hospital based care
- post-transplantation follow-up
- long term follow-up
- post-transplant immunosuppression
- Delivering care through shared care centres and outreach clinics
- Effective communication with patients, referring clinicians and other services
- Managed transition between services, including shared care centres and providers of specialist respiratory care

TRANSPLANT SPECIFIC MEASURES



Contents	
Section 1 - Measures	
Adult Transplant Centre Measures	
Tx16-2A-101	The Multidisciplinary Team
Tx16-2A-102	Multidisciplinary Assessment
Tx16-2A-103	Multidisciplinary Assessment Meetings
Tx16-2A-104	Core Members Attendance
Tx16-2A-105	Extended Membership
Tx16-2A-106	Minimum Cardiothoracic Transplant Centre Workload
Tx16-2A-107	Minimum Individual Workload
Tx16-2A-108	Specialist Surgical Cover
Tx16-2A-109	Access to ITU Inpatient Facilities
Tx16-2A-110	Access to Operating Theatres
Tx16-2A-111	Diagnostic/Assessment Services
Tx16-2A-112	Clinical Guidelines
Tx16-2A-113	Patient Pathways
Tx16-2A-114	Direct Emergency Access
Tx16-2A-115	Multiprofessional Transplantation Follow Up Clinic
Tx16-2A-116	Transition and Transfer Policy
Tx16-2A-117	Patient Information
Tx16-2A-118	Patient Advice Line
Tx16-2A-119	Patient Feedback
Tx16-2A-120	Facilities for Family and Carers
Tx16-2A-121	Clinical Indicators Review / Audit Meeting
Tx16-2A-122	Core Members Attendance at Clinical Indicators Review / Audit Meeting
Tx16-2A-123	Clinical Trials
Paediatric Transplant Centre Measures	
Tx16-2A-201	The Multidisciplinary Team
Tx16-2A-202	Multidisciplinary Assessment
Tx16-2A-203	Multidisciplinary Assessment Meetings
Tx16-2A-204	Core Members Attendance
Tx16-2A-205	Extended Membership
Tx16-2A-206	Specialist Surgical Cover
Tx16-2A-207	Access to ITU Inpatient Facilities
Tx16-2A-208	Access to Operating Theatres