

Appendix 1**Commissioning case for change approval process**

The commissioning case for change approval process aims to ensure that the PCT provides full support to the production of commissioning cases for change and that opportunities for joint working are fully utilised.

The PBC Support Team will co-ordinate support from the PCT. Ideally this will mean that a variety of individuals from the PCT are involved in the whole planning process. At a minimum, the Commissioning case for change Support Questionnaire must be completed before the case is considered at the PBC Governance sub-committee.

Mental Health / Learning Disability / Substance Misuse / Children (including Child and Adolescent Mental Health) proposals need to have close involvement of the relevant joint commissioning team manager to ensure proposed changes/services fit with the Health/ Herts County Council strategy. Cases may be approved through this process and then will be referred to the JCPB/CYYPPB for decision making.

Proposals including the use of freed up resources for premises development must be submitted to the technical group for approval.

The PBC Support Teams for East & North and West Herts will also liaise with each other to ensure that proposals are shared between localities and implemented as widely as possible. This will be supported by the Service Redesign ADs and Managers

All commissioning cases for change must be received by the relevant Locality Assistant Director at least 10 working days before the sub-committee

A representative from the PBC locality must attend the PBC Governance sub-Committee to present that commissioning case for change and answer questions

If there is insufficient information, the case must come back to the committee. Cases should not be signed off "subject to"

PBC Governance sub-committee must consider the commissioning case for change and the Commissioning case for change Support Questionnaire. Minutes must clearly indicate that all risks have been considered. The sub-committee must be satisfied that:

- The case for change will support the Acute Services Review
- The case for change will improve the quality of patient care
- The case for change will provide Value for money
- The case for change has strong clinical engagement

Cases requiring transfers of funds greater than £(??Board to decide??) should be given approval in principle and referred to the PEC for final decision making.

The sub-committee will complete the approval form to provide feedback to the cluster and ensure appropriate monitoring is in place. A database will continue to be used to co-ordinate this process. Monitoring will take place within 6 months. If approval is given, it must be made clear who has authority to sign contracts, up to what level and what recommendations are needed from the Governance sub-Committee.

If the commissioning case for change is not approved, they may be re-submitted with additional info if required. If agreement cannot be reached, the PEC will be asked to make a final decision.

In line with national guidance, Commissioning cases for change must include the following:

- Evidence based clinical effectiveness
- Strategic fit with national and local priorities
- Governance arrangements
- Contribution to national and local targets
- Assessment of potential discrimination on all population groups
- Patient / public support
- Stakeholder support from all organisations involved.
- Justification/evidence that resources can be released through the substitution of care
- Affordability within the current and projected indicative budgets
- Assessment of the impact on current service providers
- Value for money
- Benefits for patients (quality standards)
- Proposed procurement route
- Risk assessment and controls
- Timescales for implementation
- Sensitivity analysis
- Proposals for the use of freed up resources
- Process for accreditation of potential providers

The PBC Support Team must ensure that all the above is included and the Commissioning case for change Support Form completed before the Commissioning case for change is submitted for approval

Commissioning case for change support form

This form must be completed and accompany all cases submitted to the PBC Governance sub-Committee

- Is this project:
- Spend to save
 - Disinvestment and reinvestment in another service
 - New investment

Additional information may be attached if required

Supported by	Issues considered	Signature & Date
Acute Commissioning	How much budget will need to be transferred ? From which budget ? Does the relevant Acute Trust recognise and accept the loss of income ? Will this commissioning case for change support the delivery of ASR trajectories ?	
Finance	Are the financial plans correct ? Has appropriate activity data been used ? Does the proposal offer value for money ? Is the sensitivity analysis correct ?	
Public Health	Will this proposal reduce health inequalities ? Will this proposal improve equity of access ? Will this proposal meet identified health need ? Will the suggested clinical pathway lead to the suggested benefits ? Is the proposal based on evidence of good practice ? Will the proposal improve the quality of patient experience.?	
Corporate Services	Does the proposal have stakeholder support ? Have risks been adequately identified and addressed ? Does proposal comply with Standards for Better Health ? Do the proposals comply with Standing Financial Instructions and other relevant procurement rules	

**Commissioning case for change approval form
(to be completed for all cases considered by the PBC Governance sub-committee)**

Case Ref number	0001/07	
Case Title	<i>Eg. Proposal to establish new diabetes service</i>	
Submitted by		
PBC sub-committee date	<i>Xx/xx/xxxx</i>	
Status	APPROVED / INFORMATION REQUIRED /REJECTED	
Reasons for rejection		
Further information required	<i>e.g. Timetable for implementation</i>	<i>Date</i>
Activity data required	<i>e.g. numbers of patients seen</i>	<i>Date</i>
Outcomes data required	<i>e.g. number of referrals to other services</i>	<i>Date</i>
Other monitoring data required	<i>e.g. evidence of patient satisfaction</i>	<i>Date</i>
Review arrangements		
Procurement route agreed		
Additional Comments		