

To: SHA CEs

From: Duncan Selbie

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A review of the Professional Executive Committee (PEC) of the PCT

I thought it might be helpful to write to you to explain the Department's plans for the future roles and functions of PECs. You may be aware that we are about to undertake a review to consider this question, and I wanted firstly to set out our thinking and plans for that review and secondly to explain what action reconfiguring and non reconfiguring PCTs should take between now and October.

Why review PECs

Professional Executive Committees were established as part of a PCT's governance arrangements in 1999.

The role of the PEC when it was established was to lead the Board through detailed thinking on priorities, service policies and investment plans with decisions about how to take these forward largely delegated to the Executive. It was described as being the "engine room" of the PCT model.

There are a number of reasons why a review may now be timely:

- ***The current role of the PEC is (arguably) too vague.*** Since 2002, the DH has referred little to the role of the PEC and as a result some PECs have developed to suit the needs of their local PCT, but others have withered.
- ***Different forms of clinical leadership.*** At the time of their creation, PECs formed the largest aspect of clinical leadership in primary care. Given the rise of practice based commissioning, this is no longer so.
- ***It is difficult for PECs to evolve.*** The membership of PECs and allowances paid to members are both written into legislation. PCTs are thus limited in the extent they can change their PECs to meet changing need.
- ***The time is right for a review.*** *The Health Reform in England: update and commissioning framework* indicates the need for a review in the context of PBC governance and accountability. Furthermore, the SHA and PCT reconfigurations are further drivers for a review of the role of the PEC against these crucial changes.

Proposals for a review

The need to retain PECs in the future is a given, however their form and function is not, and is something we want to discuss with stakeholders. We plan to carry out a rapid review aimed at producing a document which would be ready for formal consultation by about mid October. Following consultation, revised guidance will be issued in the new year, with new arrangements most likely coming into effect from April 2007. The review will focus on the future role, membership and support needs of PECs in the context of the future health system.

The benefit of this approach is that it should be possible to undertake the review and publish a consultation document quite quickly (in the autumn).

Interim arrangements

In the mean time the following arrangements should be followed;

For non reconfiguring PCTs

Existing PECs and their membership should be retained.

For reconfiguring PCTs

When existing PCTs are dissolved (to be replaced by the new organisations on the 1st October) the PEC(s) automatically cease to exist. Each PCT should establish a new PEC within the existing legislative framework. Terms of appointment for PEC members should not go beyond April 2007, by which time the results of the review outlined above will be known and new arrangements agreed. PCTs should plan for PEC Chairs to be in place as soon as possible.

For varying PCTs

Some PCTs are slightly changing their areas on 1st October but not dissolving. Where this happens PECs will be unaffected by the changes. PCTs will however wish to consider the membership of the PEC to ensure that it still complies with the directions on PEC membership, especially if professional members provide services to the residents of an area of the PCT which is moving to a neighbouring PCT.

The legislation governing PECs is contained in the Primary Care Trusts (Membership, Procedure and Administration Arrangements) Regulations 2000/89, <http://www.opsi.gov.uk/si/si2000/20000089.htm>, and the Primary Care Trust Executive Committee (Membership) Directions 2003, <http://www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsLegislation/PublicationsLegislationArticle>.

I would be grateful if you could cascade the information in this note to your PCTs.

For further information, please contact Julie Topping at Julie.Topping@dh.gsi.gov.uk.

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