

BOB ICB BOARD

Title	Formal acceptance of commissioning responsibility for Specialised Commissioning (70 services)		
Paper Date:	06 March 2025	Board Meeting Date:	11 March 2025
Purpose:	Discussion	Agenda Item:	
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Executive Summary			
<p>In May 2022 NHS England set out the national roadmap to transfer commissioning responsibility for Specialised Commissioned services from NHS England to Integrated Care Boards (ICBs) enabled by the legislative provisions in the Health and Social Care Act 2022. The national goal is to enhance the capability of Integrated Care Boards (ICBs) to function as strategic commissioners, leading efforts to improve population health by integrating services across comprehensive and interconnected care pathways.</p> <p>To safely achieve the national mandate for the transfer of commissioning responsibility a South East (SE) regional programme was established to prepare the six SE ICBs to accept this responsibility by the 1 April 2025. The six SE regional Chief Executive Officers (CEOs) have led the programme.</p> <p>To formally enact the transfer of commissioning responsibility the BOB ICB Board is required to review, endorse and sign two documents. This paper sets out the requirements to formally enact the transfer of commissioning responsibility for the 70 Specialised Commissioning services and requests Board approval for Chief Executive Officer signatory of the following documents. The ICB Board is also asked to delegate to their Chief Executive Officer any proposed minor changes to the documents below.</p> <ol style="list-style-type: none"> Delegation Agreement that will legally transfer responsibility to the ICB (appendix 1) Collaboration Agreement that sets out the intended operating model across the SE footprint (appendix 2) <p>Content:</p> <ul style="list-style-type: none"> • Background to the national intent to transfer commissioning responsibility to ICBs. • System benefits of delegation. • Transfer and assurance process. • Development of the roadmap to achieve the opportunities of delegated responsibility. 			
Action Required			
<ol style="list-style-type: none"> 1. The Board are asked to formally agree ICB readiness to accept commissioning responsibility for 70 NHS England specialised services by signing the Delegation Agreement. 			

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| <p>2. The Board is asked to formally endorse and sign the South East regional Collaboration Agreement, which sets out how the six SE ICBs will discharge commissioning responsibilities across a multi ICB footprint.</p> |
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Conflicts of Interest:	<p>This report contains information relating to organisations that members of the Board lead/are employed by. The perspective of these members is an important aspect to enable the Board to focus on where the ICB (Integrated Care Board) and system contribute to improvement. Management of this item has been discussed with the ICB Chair in advance of the meeting.</p>
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Date/Name of Committee/ Meeting, Where Last Reviewed:	<p>N/A</p>
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Specialised Commissioning Delegation

Executive Summary:

1. This paper provides:
 - The background to the national intent of transferring commissioning of specialised services¹ responsibility from NHS England to ICBs.
 - The relevant assurances to the Board of the process to confirm ICB readiness to accept delegated commissioning responsibility for 70 specialised services from 01 April 2025.
 - The requirements of the Board to formalise the legal transfer of responsibility and the infrastructure requirements to discharge its statutory commissioning responsibility.
 - The development of the plan to achieve the opportunities of delegated commissioning responsibility for specialised services.

Background

2. In May 2022 NHS England set out the roadmap that required ICBs to strengthen existing partnerships to increase their involvement in the commissioning of the 154 specialised services to enable the ambition for ICBs to act as strategic commissioners.
3. Following a national assessment of these services, 70 services were identified as appropriate to be transferred to ICB responsibility. The service portfolio includes acute hospital and mental health, learning disability and autism services.
4. NHS England will retain responsibility for the remaining services, which have been assessed as not appropriate or ready for transfer to ICBs.
5. Specialised services support people with a range of rare and complex conditions often in a specialised or tertiary hospital that are designed to meet unique needs that general services cannot address. This includes treatments for, cancer, genetic disorders, mental health, head and spine conditions, blood and infection, trauma and women and children services. These services deliver cutting-edge care and are a catalyst for innovation, supporting pioneering clinical practice in the NHS.

System benefits of delegation

6. Delegating responsibility for specialised commissioning will help BOB ICB become better strategic commissioners and leaders in population health. They will work with specialised service providers and local health systems to design and deliver services that meet community needs by:
 - **Focusing more on prevention:** Early diagnosis and intervention to prevent or delay the need for specialist treatment.
 - **Improving outcomes:** Patients will benefit from a more holistic, coordinated, and multidisciplinary approach to care, receiving the right care at the right time and place.
 - **Reducing health inequalities:** Using population health budgets tailored to local needs to improve accessibility, quality, and address unwarranted variations.

¹ Specialised services support people with a range of rare and complex conditions. They often involve treatments provided to patients with rare cancers, genetic disorders or complex medical or surgical conditions. They deliver cutting-edge care and are a catalyst for innovation, supporting pioneering clinical practice in the NHS. Specialised services are not available in every local hospital because they have to be delivered by specialist teams of doctors, nurses and other health professionals who have the necessary skills and experience. For more information, please go to: <https://www.england.nhs.uk/commissioning/spec-services/>

- **Optimising resource use:** Ensuring resources are invested wisely to improve quality, reduce health inequalities, and enhance value.
 - **Collaborating effectively:** Local commissioners will have more oversight and influence over out-of-area services, making it easier to integrate with local specialist pathways.
7. BOB system population access 80% of specialised care within our geographic footprint, which offers an opportunity to shape services within our geography to optimise the health outcomes and needs of our population.

Transfer and Assurance Process:

8. The six SE regional ICBs have committed to taking a collaborative approach to the transfer of commissioning responsibility and established a regional programme, led by their Chief Executive Officers. This optimises capacity and expertise to oversee the transfer and assurance process.
9. The system has dedicated clinical and managerial resource, that represents the system within the regional programme, to support the safe transfer of commissioning responsibility, develop an appropriate system infrastructure and align the regional resource to discharge our statutory responsibilities.
10. As part of the assurance process NHS England has developed the following safeguards on behalf of ICBs:
- i. NHS England retains statutory legal accountability for all services.
 - ii. NHS England will continue to set national policies and standards and will remain accountable for the commissioning of all prescribed specialised services.
 - iii. A financial framework has been developed which ensures stability for providers and patients whilst at the same time enabling ICBs to work together to transform and integrate pathways of care.
11. In October 2024, an assessment of ICB 'readiness' to accept commissioning responsibility for the 70 specialised services were considered and approved by the National NHS England Board in December 2024.
12. To enact the legal transfer of responsibility from NHS England to the ICB the Board is asked to review and confirm that the organisation will act within the requirements of the following documents. The ICB Board is also asked to delegate to their Chief Executive Officer any future proposed minor changes to the documents below.
- iv. [Delegation Agreement that will legally transfer responsibility to the ICB \(appendix 1\)](#)
 - v. [Collaboration Agreement that sets out the intended operating model across the SE footprint \(appendix 2\)](#)

A series of Board engagement sessions have been held to offer the Board opportunities for assurance and influence these agreements.

13. These documents include legal, operational, and financial guidelines. They also include the governance and accountability framework to ensure that the delegation process is compliant with the NHS Act and other statutory regulations. The agreements emphasise the principles of collaboration, transparency, and requirement for efficient use of resources, whilst ensuring that the delegated functions are exercised to address health inequalities and comply with mandated national standards.

14. The collaboration and Delegation agreements are interdependent.
15. The **Delegation Agreement** is primarily mandated legal wording in line with the Health and Care Act and its sub-sections, there are 10 schedules the most material highlighted below:

Schedule 2 – *The Services*, lists the 70 services that are to be transferred.

Schedule 7 - *Mandated Guidance* outlines the service specifications that must be adhered to as well the commissioning policy and standard operating procedures (SOPs) for specialised services.

Schedule 8 *The Local terms* outlines the governance model of a Joint Committee and Subcommittee structure, and other specifics that have been locally developed. This schedule confirms the SE multi ICB collaborative model rather than an individual ICB commissioning footprint.

Schedule 9 – *Developmental arrangements* set out those agreed with the NHSE national moderation panel.

16. The **Collaboration Agreement** describes the way in which the six SE ICBs will collaborate within the regional geographical footprint and the mechanisms that enable this model of working. There are five schedules in the agreement with the most material set out below:

Schedule 2 – *Governance Arrangements* describes the three-tier governance model.

Schedule 3 – *Financial Arrangements* outlines the arrangements. These arrangements include risk sharing, allocations, capital, and the finance operating model.

Schedule 4 – *Information and governance and sharing provision*. This schedule works in tandem with the Delegation Agreement to support collaborative information and data sharing between the partners.

Schedule 5 – *Commissioning Hub Arrangements*. This schedule outlines the retention of the NHS England team who currently support commissioning of the services to be transferred to the ICB and how they will support systems to effectively discharge their responsibilities set out in the Delegation Agreement.

Achieving the aims of transfer of responsibility:

17. BOB ICB are one of seven regional stakeholders navigating the challenges and complexities of developing an effective commissioning framework across multi ICBs, regions and national commissioners to ensure an appropriate level of Board assurance.
18. The collaborative SE approach and CEO leadership will put us in a prime place to achieve the opportunity that the transfer of commissioning responsibility gives us.
19. 2025/26 will be considered a year of transition, as the ICB continues to develop closer collaboration with the regional Specialised Commissioning Staff Hub team, develop local knowledge and increase engagement with system and regional partners to identify and agree the focus and required outcomes of our joint priority programmes.
20. Building on work commenced in the spring of 2024, the ICB will strengthen engagement with our local system partners and stakeholders to develop the Five-Year Specialised

Commissioning Clinical Strategy. This work will aim to identify improvement and integration opportunities that can be delivered both once at scale across the SE region and those agreed as priority areas of focus across the BOB system.

Recommendations:

21. The Board are asked to formally agree ICB readiness to accept commissioning responsibility for 70 NHS England specialised services by signing the Delegation Agreement.
22. The Board are asked to formally endorse and sign the Southeast regional Collaboration Agreement, which sets out how the six SE ICBs will discharge commissioning responsibilities across a multi ICB footprint.
23. The ICB Board is also asked to delegate to their Chief Executive Officer any proposed small/immaterial changes to the Delegation and Collaboration Agreements.