

Chair's foreword

The Northern CCG Joint Committee (hereafter referred to as 'the Joint Committee'), established in October 2017, has continued to meet during 2020/21 and is guided by the following principles:

- Securing continuous improvement to the quality of commissioned services to improve outcomes for patients with regard to clinical effectiveness, safety and patient experience
- Promoting innovation and seeking out and adopting best practice, by supporting research and adopting and diffusing transformative, innovative ideas, products, services and clinical practice within its commissioned services, which add value in relation to quality and productivity.
- Developing strong working relationships with clear aims and a shared vision putting the needs of the people we serve over and above organisational interests
- Avoiding unnecessary costs through better co-ordinated and proactive services which keep people well enough to need less acute and long term care.

Throughout the year the Joint Committee routinely discussed governance proposals to support the shared ambition of the NHS organisations in North Cumbria and the North East (NCNE) to become an Integrated Care System (ICS).

Jon Rush
Chair
April 2021

Membership

During 2019-20 membership of the Joint Committee comprised the following Clinical Commissioning Groups (CCGs):

NHS County Durham CCG
NHS North Cumbria CCG
NHS North Tyneside CCG
NHS Sunderland CCG

NHS Newcastle Gateshead CCG
NHS Northumberland CCG
NHS South Tyneside CCG
NHS Tees Valley CCG

NHS North Yorkshire CCG is an Associate Member and is eligible to attend the Joint Committee as a non-voting member. However, where there is an issue requiring a decision to be made that will affect the NHS North Yorkshire CCG, the Accountable Officer or nominated deputy will have full voting rights in relation to the relevant issue.

Voting membership of the Joint Committee comprises the Chair and Chief Officer from each member CCG (or a nominated deputy) and each CCG is entitled to exercise one vote as required.

There are also two (non-voting) lay members of CCGs on the Joint Committee.

The Managing Director of North of England Commissioning Support (NECS), Chair of the Cumbria and North East CCG Chief Finance Officers' Group and Director of Governance and Partnerships North East and North Cumbria Integrated Care System also attend meetings of the Joint Committee in a non-voting capacity.

Meetings

Meetings of the Joint Committee were held in September and November 2020 and January and March 2021. Due to Covid-19, it was not possible to hold meetings of the Committee in public so these were held virtually. However, papers were published on the CCG website together with recordings of the final two meetings.

These were also supported by development sessions, particularly as the role of the North East and North Cumbria ICS developed and the Committee aimed to understand the Governance and relationship issues.

Activity and approvals 2020/21

The following key areas of the Joint Committee work in 2020/2021 are outlined below:

Work Plan for 2020/2021

A work plan for the Joint Committee for 2020/21 was agreed and which includes:

- Proposals for jointly commissioning breast diagnostic services across the ICS area
- To jointly commission cardiology and specialised neuro-rehabilitation services within NHS England/NHS Improvement's Specialised Commissioning team for the North East and North Cumbria
- Development of a consistent policy to be applied across the ICS area for Value-Based Clinical Commissioning (VBCC) and Individual Funding Requests (IFRs)
- North Cumbria North East Prescribing Forum
- Plans for rheumatology services in the County Durham, South Tyneside and Sunderland ICP as they develop and for any other services being developed on an ICP footprint which may have an impact on area areas of the region
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Avastin for the treatment of wet age-related macular degeneration (AMD)

The work to enable the prescribing of Avastin had been co-ordinated by the Committee. Following an appeal by one of the multinational drug companies, the Supreme Court had ruled in favour of the proposals to implement Avastin for the use of AMD at regional and national levels which has the potential to save the taxpayer millions in the treatment of wet age-related macular degeneration (wet AMD). Implementation has been delayed due to Covid-19 but the plan is still to scale up delivery, possibly via the ICS Provider Collaborative.

Governance

At its meeting in September 2020, the Committee approved revised Terms of Reference which took account of changes in CCG structures and to widen the scope of its responsibilities, the appointment of new two lay members (Michelle Thompson and Jeff Hurst) and the re-appointment of Jon Rush as Chair.

Development sessions and other key areas of discussion

These included:

- Developing an Integrated Care System (ICS) in the North East and North Cumbria
- Research and Evidence updates
- The use of Avastin for the treatment of wet AMD
- Academic Health Science Network
- Northern Treatment Advisory Group (NTAG) Annual Report
- How-Fit Programme
- Learning Disability inpatient provision across the region
- Commissioning of Maternal Medicine Network
- North of England Commissioning Support (NECS) Annual Review, Business Plan 2021/22-2022/23 and customer board reports