

Paper: A4
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<b>Date</b>	Tuesday, 10 March 2015					
<b>Title of paper</b>	<b>NWL CCGs' collaboration board summary update</b>					
<b>Presenter</b>	Clare Parker, Chief officer, CWHHE					
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<b>Clinical Lead</b>	Tim Spicer					
<b>Confidential</b>	<table border="1"> <tr> <td><b>Yes</b></td> <td><input type="checkbox"/></td> <td><b>No</b></td> <td><input checked="" type="checkbox"/></td> <td>Items are only confidential if it is in the public interest for them to be so</td> </tr> </table>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input checked="" type="checkbox"/>	Items are only confidential if it is in the public interest for them to be so
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**The Governing Body is asked to:**

Note the report for information.

**Summary of purpose and scope of report**

This summary update details the business that has been dealt with in recent meetings of the collaboration board, papers for which have been circulated to governing body members via email in advance of its meetings.

The governing body is particularly asked to note the delegated work in hand to jointly manage and deliver shared support services, to take forward joint procurement negotiations, to guide the annual contracting process for 2015/16 and to agree on the joint policies that have been recommended by NWL CCGs' Policy and Development Group following clinical consultation.

Other areas of collaboration continue to be developed in a consultative manner before being taken to governing bodies for local decisions and /or adjustments.

**Quality & Safety/ Patient Engagement/ Impact on patient services:**

The collaboration board facilitates strategic collaboration across common objectives held by eight clinical commissioning groups (CCGs): Central London CCG, West London CCG, Hammersmith & Fulham CCG, Hounslow CCG, Ealing CCG, Brent CCG, Harrow CCG and Hillingdon CCG.

- The vision of the collaboration board is to improve patient care across the health economy as a whole. Our commitment is to do so by respecting the individual sovereignty of our member CCGs, promoting meaningful stakeholder engagement and facilitating evidence-based decision making in the best interests of our respective local health populations.

**Finance, resources and QIPP**

There are no additional resource implications not already agreed by the CCGs. Cost sharing arrangements are in place for NWL CCGs' shared support services. All joint finance strategies or proposals with financial applications are brought to governing bodies for local decision.

**Equality / Human Rights / Privacy impact analysis**

Lay member and Healthwatch representation is included on the collaboration board to provide input into strategies as they are being developed. Detailed verbal and written feedback following consultation during 2014 was provided by lay members and reflected in the arrangements.

Risk	Mitigating actions
<p>What events could prevent the accomplishment of this paper / proposal?</p> <p>The work of our collaboration board supports CWHHE Corporate Objective number four, which is building relationships with other organisations.</p> <p>This does not relate to any specific entry on the Board Assurance Framework or local CCG risk register.</p>	<p>N/A</p>

**Supporting documents**

Collaboration board papers have been circulated to governing body members via email in advance of the collaboration board meetings being held.

**Governance and reporting**

(Committees, groups, other bodies in your CCG or other CCGs that have discussed the paper)

Committee name	Date discussed	Outcome
<p>This the first point of receipt for the summary report on recent meetings. It is an item for all NWL CCGs' governing body meetings in March.</p>		