

*From the Rt Hon Andrew Lansley CBE MP
Secretary of State for Health*



To leaders of all prospective CCGs

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Dear Colleague,

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I am writing to you to set out the important freedoms you can expect when the Health and Social Care Bill is passed into law and when CCGs take on their full statutory responsibilities. You will no doubt be aware of some of the interest the Bill's return to the House of Lords is attracting in the media. This is not unusual for high-profile legislation, and I would like to reassure you that the Government remains fully committed to the successful passage of the Health and Social Care Bill.

I meet frontline doctors engaged in developing clinical commissioning groups (CCGs) regularly, and I am struck by your energy and commitment to reshaping NHS services to deliver better results for patients. Your desire to improve services stands as testament to your dedication as public servants. In return, the Government will hold true to our word to give you the powers and freedoms you need to deliver better services for patients.

1. You will have the freedom, with your new powers and responsibilities, to commission services in ways that meet the best interests of your patients.

You will, for example, be able to determine where integrated services are required and commission them accordingly. You will be able to work with existing providers of health and care services to deliver better results for patients. Or you will be able to commission new services to address weaknesses in current levels of provision.

I know many of you may have read that you will be forced to fragment services, or to put services out to tender. This is absolutely not the case. It is a fundamental principle of the Bill that you as commissioners, not the Secretary of State and not regulators, should decide when and how

competition should be used to serve your patients' interests. The healthcare regulator, Monitor, would not have the power to force you to put services out to competition.

2. You will have the freedom to work with whoever you want to in commissioning health services

Many of you will be building on the strong relationships you have with people currently employed in Primary Care Trusts by developing new relationships with people in local government, in the private sector or in charities. Only you can determine who will best be able to support you in commissioning better NHS services. As statutory organisations, you will be able to choose your commissioning support from whatever organisations in whichever sectors are best able to meet your needs and requirements, and every effort is being made to enable you to begin to exercise choice before April 2013 where possible. Whatever commissioning support arrangements you choose, you will always retain responsibility as a CCG for the commissioning decisions you make – the Bill does not allow these decisions to be made by other bodies.

Amidst the speculation about the Bill, I know some of you may have read that you will be forced to use private sector commissioning support services. I would like to assure you this is not the case. You are best placed to judge how best to commission services, and who should support you in doing so, and the Government has no intention of interfering in decisions you take in the interests of your patients. Indeed, the Bill will prevent such interference.

3. You will be free from top-down interference

Under the Health and Social Care Bill, you will have the legal responsibility for the NHS budget entrusted to you from April 2013 onwards, and the legal power to use it in the interests of your patients. The powers and responsibilities will be vested in you. The NHS Commissioning Board will hold you to account for the outcomes you deliver within the resources given to you, but will be responsible for promoting autonomy in how you achieve these outcomes.

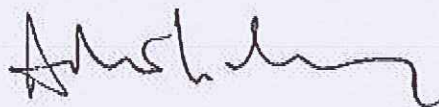
I know there have also been concerns that clinical senates could second-guess the decisions you take. This is not the case. Clinical senates will be ideally placed to advise both CCGs and the NHS Commissioning

Board on clinical issues at a broad strategic level. They will not be statutory bodies and will have no role in performance management or in the day-to-day work of CCGs. They will have knowledge of healthcare across a broad geographic area and clinical credibility which can be called upon when required.

Some of you may have read that clinically-led commissioning could be implemented without the Bill. But you will know, from your experience of practice-based commissioning, just how wrong this is. For as long as there is an authority other than the CCG that has the legal responsibility for the NHS budget in your area, the freedoms you seek will never be fully realised. That is why we took the decision to vest these powers directly in CCGs through the Bill and why we are committed to passing it into law.

Over the coming weeks, as the Bill continues to be debated in Parliament before being passed into law, I will continue to visit as many of you as I can – to learn about how you are planning to use the freedoms and powers the Government's NHS reforms will bring you to deliver better care for your patients.

Yours ever,



ANDREW LANSLEY CBE

