

LOCAL COMMISSIONING GROUP

Information

May 2019

Introduction

The Health and Social Care Board (HSCB) is inviting interest for Member posts in each of its 5 Local Commissioning Groups (LCGs), which were established in 2009 as HSCB Committees. This offers an exciting opportunity to become involved in the planning and delivery of health and social care to local populations across Northern Ireland (NI).

Each LCG plays a key role in understanding the health and social care needs of its local population which is an essential pre-requisite to the planning of services which are responsive to current and emerging needs and ensuring delivery of health and social care to meet that assessed need. LCGs engage with community partnerships to fulfil this responsibility.

The LCGs incorporate a range of professional interests such as GPs, nurses, dentists, pharmacists and social workers as well as voluntary and elected representatives, to ensure that the work of the HSCB has sensitivity and influence at a local level.

Health and Social Care Board (HSCB)

The HSCB has 3 main functions:

- To arrange or “commission” a comprehensive range of modern and effective health and social care services for the 1.8million people who live in NI;
- To performance manage Health and Social Care Trusts that directly provide services to people and support service improvements in pursuit of optimal quality and value for money, in line with relevant government targets and;
- To effectively deploy and manage its annual funding from the NI Executive – currently around £4.5billion – to ensure it is targeted upon need and reflects the aspirations of local communities and their representatives

The work of the HSCB has the potential to reach everyone at some point in their lives – its expenditure amounts to around £10million on every single day of the year – as it strives to ensure that services provided daily, to people in their homes by their GP, in hospital or in the community, deliver what is expected of them.

The HSCB is going through a major period of transition. In October 2016, the then Minister when launching “*Health and Wellbeing: 2026 Delivering Together*” confirmed an earlier Ministerial announcement that the HSCB would close: the planned dissolution date of March 2021 is contingent upon NI Executive approval by November 2020.

The majority of HSCB functions will transfer to the Department of Health (DoH), to whom it is accountable, and significant partnership working is ongoing to shape the new arrangements, develop new ways of working and ensure that the key functions of the HSCB continue to be delivered across all of the core business areas at regional and local levels.

It will be important to ensure that throughout the interim period, the local provision of health and social care continues and LCG membership offers prospective applicants the opportunity to make a positive contribution to enhancing and delivering services across Northern Ireland.

Local Commissioning Groups (LCGs)

The 5 LCGs are geographically coterminous with each of the 5 Health and Social Care Trusts that directly provide services to the community (Appendix 1) and intersect with boundaries of the 11 Council areas (Appendix 2).

The HSCB is required by statute to prepare and publish an annual Commissioning Plan, in partnership with the Public Health Agency (PHA), in response to the DoH issuing a Commissioning Plan Direction. The Commissioning Plan sets out the range and cost of services to be commissioned and incorporates the 5 Local Commissioning Plans which are developed and co-produced by each LCG with local populations and service providers. This combination of a regional and local approach to commissioning means that service improvements can be sensitive to local population need while being rolled out across the region at a pace and scale to the benefit of all. The 2018/19

Commissioning Plan can be accessed at:

[http://www.hscboard.hscni.net/download/PUBLICATIONS/COMMISSIONING%20PLAN S/Draft-Commissioning-Plan-2018-19.PDF](http://www.hscboard.hscni.net/download/PUBLICATIONS/COMMISSIONING%20PLAN%20S/Draft-Commissioning-Plan-2018-19.PDF)

The LCGs have a lead role at local level for planning and commissioning services, which include securing the implementation of Local Commissioning Plans. The LCGs are responsible for assessing the needs of their populations using a wide range of data as well as local intelligence gathered from engagement with service users and carers, local communities and service providers.

LCGs are working with Integrated Care Partnerships, which comprise of a range of local service providers, users and carers, to establish formal Locality Networks to co-design service change which reflects the needs of the local LCG population and adapted to the health and wellbeing circumstances in local communities.

LCGs are represented on Community Planning Partnerships, working with a wide range of partners to develop population plans which focus on outcomes and secure the contribution of education, housing, transport and other providers with a significant influence on health and wellbeing. An outcomes based approach enables an evaluation of the impact of improvements on people's lives as a whole.

LCG Membership

The Local Commissioning Groups (Membership) Regulations (Northern Ireland) 2009 prescribes the composition of each LCG:

- 4 General Medical Practitioners (GPs);
- 1 Pharmacist;
- 1 Dentist;
- 4 locally elected representatives;
- 2 representatives from the voluntary and community sector with an interest in health and social care;
- 5 employees of the Health and Social Care Board (HSCB) and Public Health Agency (PHA):
 - 2 social workers (HSCB),
 - 1 nurse (PHA),

- 1 person registered as a public health medicine specialist on the Specialist Register maintained by the General Medical Council
- 1 person who is registered as a member of a profession to which the Professions Supplementary to Medicine Act 1960 extends.

Each LCG is supported by an Assistant Director of Commissioning and an administrative team based in the following locations:.

Belfast, South Eastern LCGs

HSCB Eastern Office
12/22 Linenhall Street, Belfast

Northern LCG

HSCB Northern Office
County Hall, 182 Galgorm Road, Ballymena

Southern LCG

HSCB Southern Office
Tower Hill, Armagh

Western LCG

HSCB Western Office, Gransha Park House
Clooney Road, Londonderry

HSC Board Committee

LCGs have been constituted as Committees of the HSCB and operate within an approved Scheme of Delegation.

The LCG Interim Chairs are accountable to the Chair of the Health and Social Care Board for discharging their responsibilities.

To ensure that public service values remain at the heart of the HSC, LCG Chairs and Members are required, on appointment, to subscribe to the Code of Conduct and Code of Accountability for members of HSC bodies.

Time Commitment

Members will be expected to devote approximately 2 days per month. This can vary and may involve commitment both inside and outside normal working hours.

All prescribed Members are eligible to apply for the post of LCG Interim Chair, which requires an increased time commitment per month. As at June 2019, an Interim Chair is required for the Northern, South Eastern and Western LCGs: it is likely that this Interim Chair posts will be recruited in August 2019.

Remuneration:

Members will receive £156 - £207 per day. Independent Contractor members are also eligible to claim allowances at the agreed Department of Health rates, for locum cover and loss of earnings, as well as travel and subsistence costs necessarily incurred on LCG business.

Period of Appointment:

As the HSCB is working towards a closure date of March 2021, the period of appointment will be in parallel with the timescale for the closure of the HSCB or subject to a maximum period of 4 years.

Annual performance assessments will be required throughout the period of appointment.

Eligibility Criteria:

The Local Commissioning Groups (Membership) Regulations (Northern Ireland) 2009 refers. A copy of the geographic area of the Belfast, Northern, South Eastern, Southern and Western HSC LCGs, which are coterminous with the respective HSC Trust boundaries, is included at Appendix 1.

General Medical Practitioner/General Dental Practitioner/Pharmacists (Independent Contractors)

General Medical Practitioners, General Dental Practitioners and Pharmacists must be currently practising within the area of the LCG.

Local Government Representatives

Councillors must be serving on a Local Council within the area of the LCG as at June 2019. Applicants must not be employed by the Department of Health, a health and social care body or a health service body.

The reduction in the number of Local Councils in 2015 means that a small number of electoral areas within the 11 Councils now straddle the geographic area of 2 Health and Social Care Trusts/LCGs. Prospective applicants are asked to carefully consider Appendix 2.

Belfast LCG – Belfast City Council; Lisburn and Castlereagh City Council.

Northern LCG - Antrim and Newtownabbey Borough Council; Causeway Coast and Glens District Council; Mid and East Antrim Borough Council; Mid Ulster District Council.

South Eastern LCG - Ards and North Down Borough Council; Lisburn and Castlereagh City Council; Newry, Mourne and Down District Council.

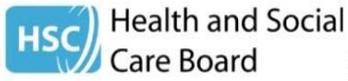
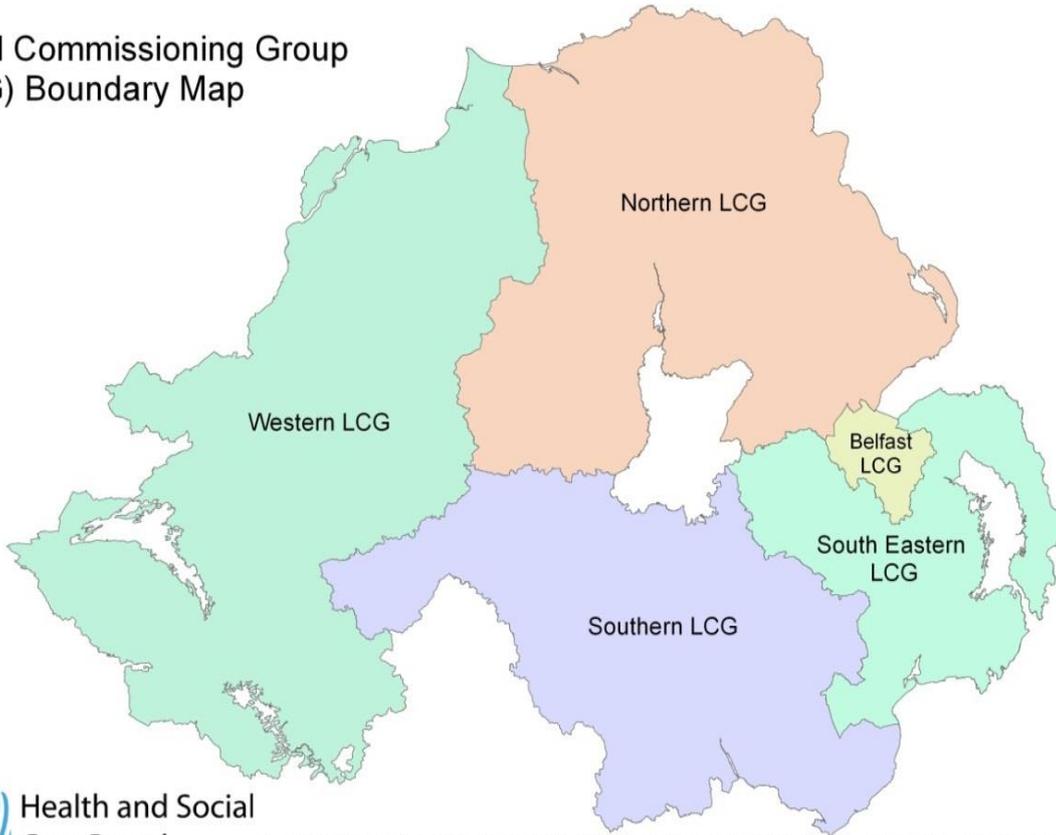
Southern LCG - Armagh City, Banbridge and Craigavon Borough Council; Mid Ulster District Council; Newry, Mourne and Down District Council.

Western LCG - Derry City and Strabane District Council; Fermanagh and Omagh District Council; Causeway Coast and Glens District Council.

Voluntary and Community Sector Representatives

Applicants must be a representative of a voluntary and community organisation with an interest in health and social care within the area of the LCG ie., coterminous with the respective HSC Trust boundary. Applicants must not be employed by the Department of Health, a health and social care body or a health service body.

Local Commissioning Group
(LCG) Boundary Map



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APPENDIX 2

Northern Ireland showing Health and Social Care Trusts,
and Local Government Districts (2014)

