

Long-list of options considered

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| Option 1 | Do nothing option – commissioning arrangements remain separate, split between the two organisations with separate decision-making, except where joint commissioning arrangements already exist |
| Option 2 | Greater use of existing funding alignment arrangements, such as Section 75/Better Care Fund with organisations retaining their own budgets and accountabilities |
| Option 3 | The CCG acts as lead strategic commissioner for all health, social care and public health commissioning on behalf of system |
| Option 4 | The Local Authority as lead strategic commissioner for all health, social care and public health commissioning on behalf of system |
| Option 5 | The Local Authority acts as lead strategic commissioner for Children and Young Peoples services on behalf of system. The CCG acts as lead strategic commissioner for Adult Services on behalf of system |
| Option 6 | Strategic commissioning of health, social care and public health services is undertaken through a new vehicle such as a Joint Health and Care Committee on behalf of system. |

Commissioning with Devon was initially considered but not taken forward through the assessment as there was little / no appetite from Devon at this time as they are working towards Devon-wide strategic commissioning and due to the focus on place based commissioning for health and care the option was not supported by NHS England

Assessment Criteria

1. Achievement of outcomes set out by the system through the Sustainability and Transformation Plan for CIOs
 - Commission for improved population health and wellbeing outcomes
 - Reduce health and social inequalities
 - Develop well-co-ordinated and seamless care
 - Support individual and communities to take responsibilities for the own health and well-being

2. Achievement of straightforward and acceptable governance under current legislation
 - Provide clear and strong leadership to the new Accountable Care System
 - Enable local democratic and clinical engagement and accountability
 - Commission for a whole population using a capitated outcome based contract

3. Achievement of financial advantages for the public purse both through more effective strategic commissioning and cost of delivering the new commissioning model
 - Make best use of the Cornwall £
 - Minimise costs associated with organisational restructuring
 - Achieve management efficiencies
 - Make best use of VAT regulations

Assessment Criteria (cont)

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4. Making the most effective use of the workforce skills and experience in CIOS
 - Provide one strong and robust commissioning and contract management function
 - Create an environment of collaboration between commissioners and providers
 - Develop excellent commissioning skills and expertise across the system

 5. Deliver improved quality across the health and care system
 - Manage a system-wide view of quality, access and performance
 - Support ISC in holding providers to account for delivery of quality improvements