

Clinical Commissioning and Executive Committee

Terms of Reference

Chair:	Accountable Officer
Vice Chairs	Managing Directors
Administrator	Executive Assistant
CCG Executive Lead	Accountable Officer
Frequency of Meetings	<p>Monthly</p> <p>Agendas and papers will be distributed at least five working days in advance of the meeting, unless there are exceptional circumstances for individual papers</p> <p>Minutes to be distributed within ten working days after the meeting</p>
Quorum	<p>Six members of which:</p> <ul style="list-style-type: none"> • At least one must be a non-executive GP CCG Governing Body member • At least three CCG Governing Body clinicians • At least one CCG Governing Body Lay Member • At least two Executive Members
Membership	
<i>Members – voting</i>	<ul style="list-style-type: none"> • CCG Clinical Chair • At least 2 Elected CCG Governing Body GPs • Secondary Care Doctor • LM for PPI & Quality or Lay Member for PC as a deputy • Accountable Officer • 2 Place Based CCG Managing Directors • Medical Director (Transformation & Clinical Strategy) • Chief Finance Officer • Chief Nurse • Director of Integration & ICS Development • Director of Strategy & Transformation
<i>In Attendance – non-voting members</i>	<ul style="list-style-type: none"> • Director of Primary Care • Director of Digital Strategy & Infrastructure • Director of Partnership and Change • Associate Director of Corporate Services

- Associate Director of Communications Engagement & OD

Other individuals will be requested to attend the committee as required, dependent on the items of business

Appendices

Appendix 1: Scheme of Reservation and Delegation Extract

1. INTRODUCTION AND STATUTORY FRAMEWORK

- 1.1 The Clinical Commissioning and Executive Committee is established in accordance with the Herefordshire and Worcestershire CCG Constitution, Standing Orders, Standing Financial Instructions and Scheme of Reservation and Delegation.
- 1.2 These terms of reference set out the membership, remit, responsibilities and reporting arrangements of the Committee and shall have effect as if incorporated into the constitution.
- 1.3 The Clinical Commissioning and Executive Committee is a Committee of the Governing Body and has the ability to execute any powers assigned to it by the Governing Body and those specifically delegated in these terms of reference and/or through the CCG Constitutional Scheme of Reservation and Delegation.

2 PURPOSE

- 2.1 The purpose of the Committee is to:
 - Oversee the CCG's clinical commissioning and transformation agenda, the implementation of the CCG Clinical Commissioning Strategy and provide assurance to the Governing Body that there is appropriate clinical input into the CCG's decision making;
 - Ensure that the CCG commissioning policies, decisions and transformation plans are consistent with the strategies of the CCG Governing Body, within the strategic context of the Herefordshire and Worcestershire STP;
 - Oversee ICS development, the CCG's transition to a Strategic Commissioner, and provide Strategic Commissioner decision making for the implementation of STP programmes;
 - Oversee the CCG's corporate agenda; and
 - Oversee joint commissioning arrangements with local authorities – through S75, Better Care Fund (BCF) and other joint commissioning arrangements.

3. REMIT AND RESPONSIBILITIES

The remit and responsibilities of the committee are as follows:

3.1 Commissioning Policies and Transformation

- Oversee the development and implementation of the CCG's clinical commissioning strategy, ensuring population health needs and service issues are optimally addressed within available resources to deliver the NHS quintuple aim;
- Lead and oversee the annual commissioning cycle, ensuring it is clinically led, addresses population health and service needs and drives system wide transformation;
- Oversee the development and implementation of the CCG and system (STP/ICS) annual operational plans, ensuring triangulation and alignment of system plans;
- Assure and sign off CCG Clinical Policies and Strategies relating to the business of the CCG, ensuring alignment and integration with the work of the Primary Care Commissioning Committee;
- Receive and approve outline business cases for proposed developments and service changes, service specifications, ensuring appropriate clinical, financial and quality input and challenge have been part of the process;
- Receive reports/ recommendations from relevant CCG and STP groups, forums and committees, taking them into account in decision making, assuring or reviewing as appropriate;
- Oversight and assurance of the CCG and STP digital strategy and its implementation;
- Oversight of contractual and procurement activity, providing assurance to the Governing Body that this is being carried out effectively and appropriately in line with CCG strategy; and
- Sign off new contract awards, in line with the CCG's Standing Financial Instructions and Scheme of Reservation and Delegation.

3.2 ICS Development, Transition to Strategic Commissioner and STP Work Programmes

- Oversee ICS development, providing assurance of and strategic input into ICS development on behalf of the Governing Body;
- Oversee the CCG's transition to a Strategic Commissioner, ensuring CCG capacity and capability is understood and in place; and
- Oversee and provide the CCG strategic input into STP work programmes and plans, ensuring clinical engagement, robust benefits realisation frameworks, monitoring and clear governance is in place.

3.3 CCG Corporate Agenda

- Review the CCG's Communication and Engagement Strategy prior to submission to the Governing Body;

- On behalf of Governing Body monitor the trends and key process issues in relation to Complaints, Freedom of Information and MP and media enquiries;
- Review the OD strategy prior to submission to Governing Body, receiving, reviewing and approving OD plans;
- Approve HR policies, monitoring staff related trends and overseeing any implementation plans and actions agreed as a result;
- Ensure that a meaningful appraisal process is in place and embedded within the organisation;
- Maintain close links with the CCG's Staff Council and receive their reports as needed;
- Review organisational training and development needs, ensuring plans and effective delivery are in place;
- Oversight of corporate contracts and operations, reviewing and approving major corporate projects and programmes, business cases and proposals; and
- Be the lead committee for the following services, including approval of strategies, policies and reports:
 - Business Continuity and Emergency Planning, Resilience and Response
 - Equality and Inclusion
 - Health & Safety

3.4 Joint Commissioning with Local Authorities

- Oversee joint commissioning arrangements with Local Authorities, ensuring robust governance in place for S75, BCF/iBCF and other joint commissioning arrangements;
- Ensure joint commissioning plans and priorities are in line with CCG Governing Body strategy; and
- Ensure joint commissioning of services, care models and pathways optimally addresses population health and service needs, drives financial sustainability and delivers the NHS quintuple aim.

3.5 Strategic objectives and risk management

- The committee will oversee progress against delivery of those corporate objectives and enablers for which it is assigned as the lead Committee; and
- The committee will monitor areas of risk relating to the committee's remit, ensuring that appropriate controls and mitigating actions are in place.

4 MEMBERSHIP

4.1 The Committee shall be appointed by the Governing Body as set out in the CCG constitution and may include individuals who are not on the Governing Body.

4.2 The CCG Accountable Officer will chair the committee.

4.4 The Committee membership shall consist of the following individuals:

- CCG Clinical Chair
- Elected CCG Governing Body GPs
- Secondary Care Doctor
- LM for PPI & Quality or Lay Member for PC as a deputy
- Accountable Officer
- Place Based CCG Managing Directors
- Medical Director (Transformation & Clinical Strategy)
- Chief Finance Officer
- Chief Nurse
- Director of Integration & ICS Development
- Director of Strategy & Transformation

4.5 A quorum shall be six members, of which:

- At least one must be a non-executive GP
- At least three clinicians
- One Lay Member
- At least two Executive members

5. ATTENDANCE AT MEETINGS

5.1 The following individuals will be invited to attend all meetings:

- Director of Primary Care
- Director of Digital Strategy & Infrastructure
- Director of Partnership and Change
- Associate Director of Corporate Services
- Associate Director of Communications Engagement & OD

Other individuals will be requested to attend the committee as required, dependent on the items of business.

6. DECLARATIONS OF CONFLICTS OF INTEREST

6.1 The provisions of Managing Conflicts of Interest: Revised Statutory Guidance for CCG or any successor document will apply at all times.

6.2 The chair and governance lead will have an extract of Committee members' conflicts of interest declarations available for reference. Where a member of the Committee is aware of an interest, conflict or potential conflict of interest in relation to the scheduled or likely business of the meeting, they will bring this to the attention of the Chair of the meeting as soon as possible, and before the meeting where possible.

6.3 The Chair of the meeting will determine how this should be managed and inform the member of their decision. The Chair may require the individual to withdraw from the meeting or part of it. Where the Chair is aware that they themselves have such an

interest, conflict or potential conflict of interests they will bring it to the attention of the Committee, and the Vice Chair will act as Chair for the relevant part of the meeting.

- 6.4 Any declarations of interests, conflicts and potential conflicts, and arrangements to manage those agreed in any meeting of the Committee, will be recorded in the minutes. This will be subsequently recorded within the "Conflicts of Interest Declared During a Meeting" register.
- 6.5 Failure to disclose an interest, whether intentional or otherwise, will be treated in line with the Managing Conflicts of Interest: Revised Statutory Guidance and may result in suspension from the Committee.
- 6.6 All members of the Committee shall comply with, and are bound by, the requirements in the Herefordshire and Worcestershire CCG's Constitution, Standards of Business Conduct and Conflicts of Interest Policy, the Standards of Business Conduct for NHS staff (where applicable) and NHS Code of Conduct.

7. MEETINGS AND VOTING

- 7.1 The Committee will operate in accordance with the CCG's Standing Orders. The Executive Assistant supporting the Committee will be responsible for giving notice of meetings. This will be accompanied by an agenda and supporting papers and sent to each member representative no later than five working days before the date of the meeting. When the Chair of the Committee deems it necessary, in light of the urgent circumstances, to call a meeting at short notice, the notice period shall be such as they shall specify.
- 7.2 Each member of the Committee will have one vote. The Committee will reach decisions by a simple majority of members present, but with the Chair having a second and deciding vote, if necessary. However, the aim of the Committee will be to achieve consensus decision-making wherever possible.
- 7.3 If a decision is needed which cannot wait for the next scheduled meeting or it is not considered necessary to call a full meeting, the Committee may choose to convene a telephone conference or conduct its business on a 'virtual' basis through electronic means. Minutes will be recorded and tabled at the following meeting for review.

8. BOARD SECRETARY

- 8.1 The Associate Director of Corporate Services, in their role of Board Secretary, or a member of the corporate governance team, will support the Committee Chair in discharging their duties and responsibilities and in management of the Committee's business. They will draw the Chair's and Committee's attention to best practice, national guidance and other relevant documents as appropriate. They will manage the Committee's business planner and share this at each meeting of the Committee.

9. COMMITTEE OPERATION AND ADMINISTRATION

- 9.1 The Committee will be supported by an Executive Assistant. They will work closely with the Board Secretary with the overarching aim of ensuring that the Committee receives relevant and timely information and that key documents such as the

Committee's business planner and action log are effectively maintained.

10. FREQUENCY

10.1 The Committee will meet monthly.

10.1 A minimum of fourteen days' notice for calling a meeting shall be given unless the meeting is being called due to urgent circumstances as per section 7.1 above. The Committee recognises the potential need for ad hoc meetings in addition to the bi-monthly meetings.

11. AUTHORITY

11.1 The Committee is authorised by the CCG Governing Body to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any requests made by the Committee. The Committee is authorised by the Governing Body to obtain external legal or other independent professional advice and to secure the attendance of external individuals/bodies with relevant experience and expertise if it considers this necessary.

12. REPORTING

12.1 The Committee will report to the full Governing Body via a chair's summary report. The minutes of the Committee meeting shall be formally recorded by the Executive Assistant.

12.3 The Committee will ensure appropriate officers are informed of reports which affect their portfolio.

13. CONDUCT OF THE COMMITTEE

13.1 The Committee shall conduct its business in accordance with any national guidance. The seven Nolan principles of public life shall underpin the conduct of the Committee and its members.

13.2 Annually the Committee shall review its own performance, membership and terms of reference. Any resulting changes to the terms of reference or membership will be reviewed and endorsed by the CCG Governing Body.

14. REVIEW OF TERMS OF REFERENCE

14.1 The CCG's Governing Body will review and endorse the Committee's terms of reference annually.

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Appendix 1: Scheme of Reservation and Delegation Extract

Decision/Duties	Reserved to the Membership	Reserved or delegated to Governing Body	Accountable Officer	Chief Finance Officer	Other (Stated)
Regulation and Control					
Approve arrangements for dealing with complaints					Clinical Commissioning and Executive Committee
Discharge of the Public Sector Equality Duty					Clinical Commissioning and Executive Committee
Strategy and Planning					
Approve clinical and corporate strategies		Y			Clinical Commissioning and Executive Committee
Approve commissioning & clinical strategies and plans					Clinical Commissioning and Executive Committee
Approve CCG's operational plans					Clinical Commissioning and Executive Committee
Approve proposals for ensuring quality and developing clinical governance in services provided by the CCG or its constituent practices, having regard to any guidance issued by the Secretary of State					Clinical Commissioning and Executive Committee
Receive and approve outline business cases for proposed developments and service changes, ensuring appropriate clinical input and challenge has been part of the development process;					Clinical Commissioning and Executive Committee
Approve corporate and clinical policies					Clinical Commissioning and Executive Committee
Approval of and oversight of performance of joint commissioning arrangements with Local Authorities					Clinical Commissioning and Executive Committee



Approval of fully ratified business case for disinvestment/decommissioning of services (where full public consultation hasn't been triggered)					Clinical Commissioning and Executive Committee
Human Resources					
Approve human resources policies for employees and for other persons working on behalf of the CCGs					Clinical Commissioning and Executive Committee
Operational and Risk Management					
Approve the CCG's arrangements for business continuity and emergency planning					Clinical Commissioning and Executive Committee
Tendering and Contracting					
Approval of the CCG's contracts for any commissioning support					Clinical Commissioning and Executive Committee
Approval of the Group's contracts for corporate support (for example finance provision)					Clinical Commissioning and Executive Committee
Approval of contract and procurement awards (subject to value - see detailed scheme of delegation)		Y	Y		Clinical Commissioning and Executive Committee