

# **NHS St Helens Clinical Commissioning Group**

## **Governing Body**

### **Terms of Reference**

**The Governing Body is established in accordance with NHS St Helens Clinical Commissioning Group's (the CCG) Constitution. 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. Membership**

- Lay Chair
- 6 x General Practitioners (with leads for Finance and Performance, Clinical Governance and HR&OD)
- Chief Financial Officer
- Clinical Chief Executive/Clinical lead (Accountable Officer) - GP
- Independent Secondary Care Consultant
- Independent Executive Nurse (Safeguarding Lead)
- Lay Member Audit/Finance/Governance
- Lay Member - Patient and Public Lead
- Director of Adult Social Care & Health
- Director of Public Health
- St Helens CCG Chief Nurse

#### **2. Remit and responsibilities**

The St Helens CCG Governing Body is responsible for ensuring that it discharges its statutory duties for the commissioning of health and wellbeing services. The Governing Body is in place to seek assurance on all aspects of clinical commissioning and to give assurance to all member practices and other stakeholders that the CCG is operating in a responsible and effective manner.

The Governing Body will have the responsibility of reviewing and monitoring the Assurance Framework and to ensure that any identified risks allocated to the Committee are actioned appropriately and that assurances are sought.

## **Key Responsibilities**

### **Leadership of the system**

1. To provide clinical leadership for commissioning in the services for their populations, ensuring that plans are patient focused and secure improvements in health, and that all delegated financial / activity / quality targets are met.
2. To work in collaboration with the Health and Wellbeing Board to develop and secure the implementation of a Health and Wellbeing Strategy for the area, based on needs jointly identified through the JSNA, and focused on reducing inequalities in health.
3. To develop the Commissioning Plan for the CCG population ensuring that the investment available is used to deliver the goals set out within the Health and Wellbeing Strategy, and that the plan balances accountability for the effective use of resources with maximum freedom for clinicians to innovate in order to deliver real improvements for patients.
4. To ensure appropriate patient and public involvement in commissioning and procurement.

### **Commissioning and contracting**

5. To ensure that agreed commissioning intentions are realised through the contracting process, ensuring that effective evaluation and performance management systems are in place to measure the impact and outcomes of commissioning decisions.
6. To ensure effective clinical input to commissioning and contracting for **2014/15**, ensuring achievement of health outcomes and reduction in inequalities across the area.
7. To lead the development of new clinical strategies and policies, ensuring effective engagement from across the clinical system.
8. To approve recommendations from Procurement experts with regard to the mechanisms for how services are secured for the area, ensuring adherence to national policy such as Any Qualified Provider and the Principles and Rules for Co-operation and Competition. (NB – this excludes recommendations whereby General Practice would be the exclusive provider.)

### **Service Improvement**

9. To agree and ensure delivery of the Service Improvement Programme, derived from the Commissioning Plan, and secures delivery of the QIPP programme at level 1 / 2.

## **Alignment**

10. To ensure alignment between the work of the CCG and local authorities.
11. To ensure coherence across the wider Merseyside footprint, and ensure implementation of QIPP pathways / programmes.

## **Performance Monitoring and Management**

12. To review the contract performance of providers (community and secondary care) ensuring effective actions are taken to address any shortfalls in achievement of agreed targets (clinical quality and financial).
13. To provide assurance that all clinical quality targets are met by provider organisations.
14. To undertake an annual assessment of Health and Wellbeing Board performance against the agreed objectives

## **Financial Management and Reporting**

15. To ensure there are appropriate arrangements in place in respect of financial and budgetary controls.
16. To ensure there are arrangements in place to secure the delivery of financial balance at the year end.

## **3. Administration**

The committee will be supported by an appropriate Secretary that will be responsible for supporting the Chair in the management of the committee's business. The Secretary will take minutes and produce action plans as required.

## **4. Quorum**

The Chair (or Vice Chair), 3 GP members and 50% of full members must be present including the Chair or Vice Chair.

If the Chair is absent temporarily on the grounds of a declared conflict of interest, the Deputy Chair, if present, shall preside. If both the Chair and the Deputy Chair are absent or disqualified from participating, or there is neither a Chair or Deputy, a member of the group, governing body, committee or sub-committee respectively shall be chosen by the members present, or by the majority of them, shall preside.

## 5. Frequency and notice of meetings.

The Governing Body shall meet bi monthly during the financial year.

Members shall be notified at least 10 days in advance that a meeting is due to take place.

Agendas and reports shall be distributed to members 7 working days in advance of the meeting date and will be published on the NHS St Helens CCG website 7 working days in advance of the meeting for public viewing.

## 6. Conduct

All members are required to make open and honest declarations of the interest at the commencement of each meeting or to notify the Committee Chair of any actual, potential or perceived conflict in advance of the meeting.

All members a required to uphold the Nolan Principles and all other relevant NHS Code of Conduct requirements.

## 7. Date and Review

These Terms of Reference were approved by the St Helens CCG Governing Body on [date to be inserted]

Date:	<b>November 2015</b>
Version No	<b>2</b>
Review dates	<b>November 2017</b>