

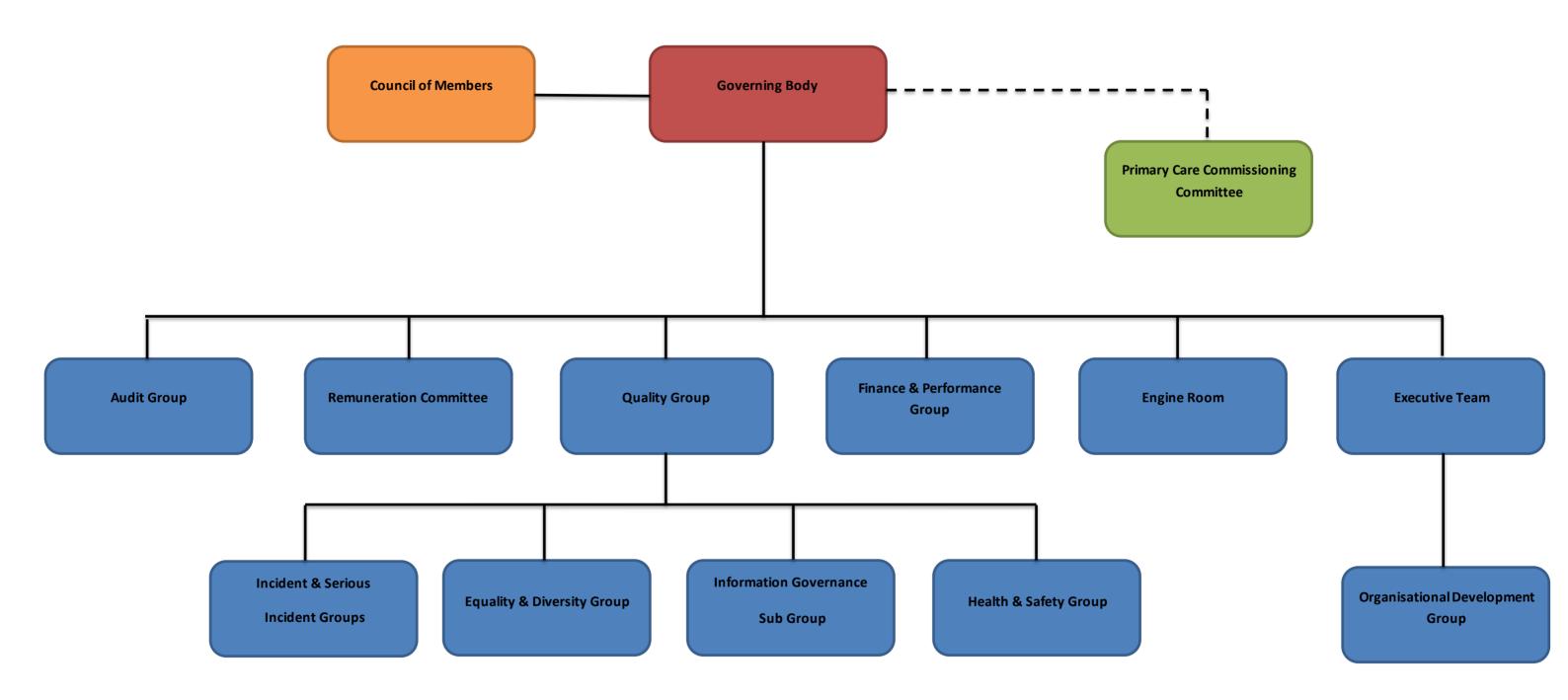
Deter	14 th December 2017		Domont Title				
Date:			Report Title:				
Meeting: Item Number:	Governing Body 8.5		Governance Framework GB Structures				
Public/Private:	Public ⊠ Private □		dovernance rianiework db 3ti actares				
Public/Filvate.	Fublic A Filvate		Decisions to be made:				
Author:	I.ili a Marana		Decisions to be made:				
(Name, Title)	Julie Warren		For a parameter implement Fobruary 2010				
	Turnaround Director		For approval to implement February 2018				
GB Lead:	Julie Warren						
(Name, Title)	Turnaround Director _						
Director	(Ellers)						
approval/signature	Ocharen						
(MUST BE SIGNED) Date:	01/12/17						
Date:	,,						
Continue to improv	e the quality of services		Improve patient experience				
Reduced unwarrant	Reduced unwarranted variations in services		Reduce the inequalities gap in North Lincolnshire	\boxtimes			
Deliver the best ou	tcomes for every patient	\boxtimes	Statutory/Regulatory	\boxtimes			
	,,		,. 0 ,				
Executive Summary (Question, Options, Recommendations):							
and committees to edirectly to the Gover recommendations to committees and when the attached papers revised structure with committee attached new committee's rediscussion with the Collins proposed to add	nsure effective decision matring Body has been underto adopt the new structure. En this work is completed it identify current Governing th proposed name changes lis the CCG Governance Frasponsibilities. Revised Term Chairs.	king. aken a Phase will be Body (version me wo s of Re	A full review of all the current committees reporting sphase 1 and these findings are presented today was a will be a review of the sub committees reporting brought back for discussion. The reporting structures (version 1.0) and the proposed on 3.0). In order to clarify the role/remit of each ork and Financial Regulations (version 6.0) to explain efference for all the committees have been drafted any 2018 to ensure discussions can be held with each wed in April 2018 against the strategic objectives.	ng vith g to the d in each for			
Equality Impact	Yes □ No □						
Equality IIIIpact	IES 🗆 INO 🖂						
Sustainability	Yes □ No □						
Risk	Yes ⊠ No □						
Legal	Yes □ No □						
Finance	Yes □ No □						



Patient, Public, Clinical and Stakeholder Engagement to date									
	N/A	Y	N	Date		N/A	Y	N	Date
Patient:					Clinical:				
Public:					Other:				

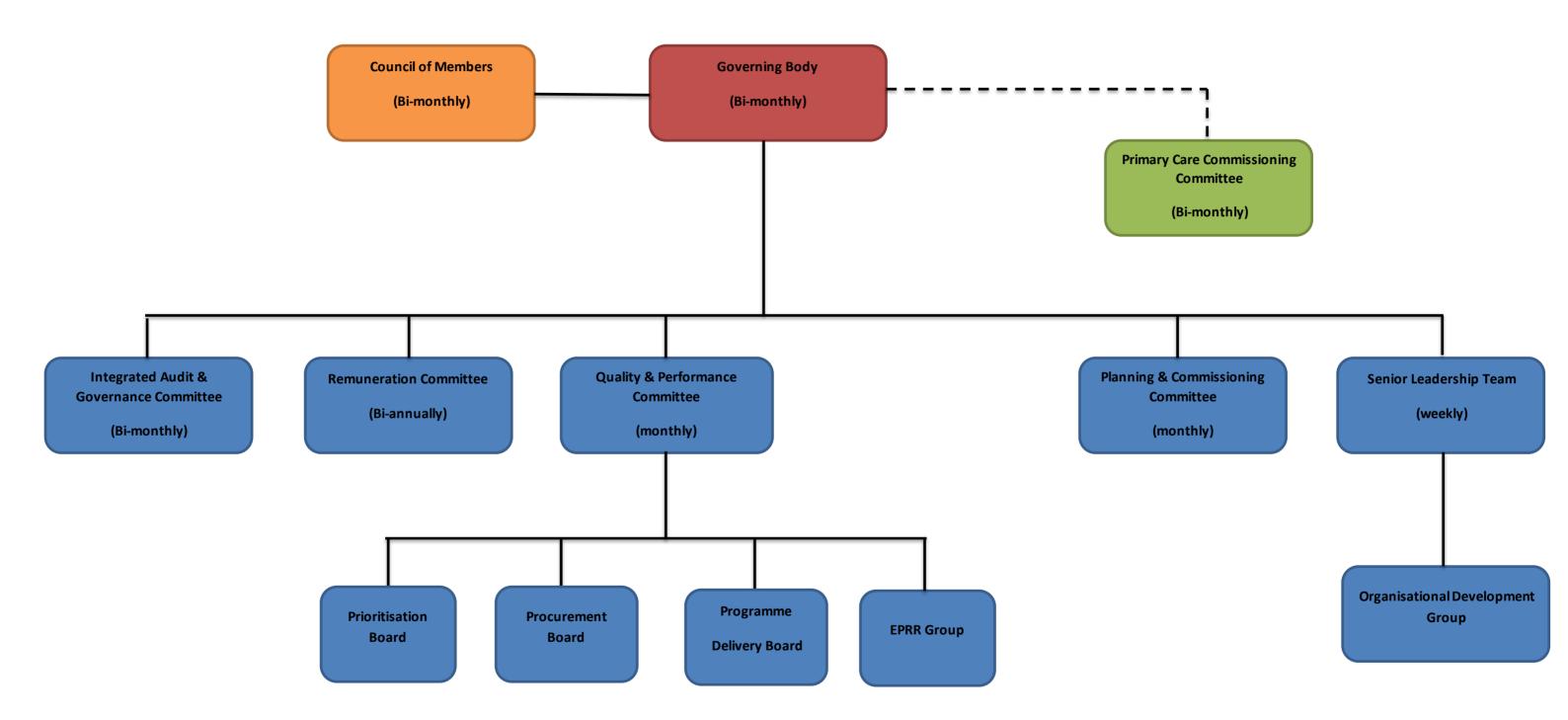


NLCCG GOVERNING BODY REPORTING STRUCTURE v 1.0





NLCCG GOVERNING BODY REPORTING STRUCTURE v 3.0





Delegated Authority	Business Case	Contract Awards
Accountable Officer / Chairs Action (with Signature from Accountable Officer or Chief Finance Office)	Up to £50,000 (w here the Business Case value is w ithin the limit of CCG budget)	Up to £50,000 (where the contract value is within the limit of CCG budget)
Governing Body	Over £50,000 (w here the Business Case value is w ithin the limit of CCG budget)	Over £50,000 (w here the contract value is w ithin the limit of CCG budget)

Council of Members (Bi-Monthly)

- · Final (highest) level of authority for all CCG business
- · CCG Constitution
- · Vision, values and overall strategic direction
- · Commissioning Strategy / Annual Commissioning Plan
- · Election of GP members of CCG Board
- Ratification of lay members, registered nurse and secondary care doctor appointments to the CCG Board.

Clinical Commissioning Group Board (Bi-monthly)

- Assurance with regards to delivery of strategic priorities
- Strategic quality, planning and performance management
- Commissioning strategy / Annual Commissioning Plan (draft)
- HR policies (approval)
- Equality & Diversity Objectives / Plans (approval)
- Assurance and Risk Management (approval)

Senior Leadership Team (weekly)

- General consideration of strategy and policy / operational plans
- Risk Register
- Governance
- Organisational Development & HR
- Communication
- Operational Health and Safety
- CSU Interface (Monthly)
- Senior Managers Interface (Monthly)
- HR policies (draft)
- Equality & Diversity Objectives / Plans (draft)

Planning & Commissioning Committee (Monthly)

- Service redesign
- Procurement
- Joint Commissioning Engagement]
- CCG Commissioning
- programmes
- Financial Strategy Commissioning policies
- Engagement strategies
- Planning

Quality & Performance Committee (Monthly)

- Financial management
- · Contract management
- · Performance management
- Value for money
- Quality improvement including safeguarding
- Patient experience
- Equality & Diversity • IFR
- · Actions from PWC external review
- Actions from Deloittes QIPP review
- · Financial special measures
- Financial recovery plan
- Quality
- Safeguarding
- Performance
- Clinical governance
- Financial Recovery

Primary Care Commissioning Committee (Bi-monthly)

- GMS, PMS and APMS contracts
- New ly designed enhanced services.
- Local incentive schemes
- Decision making on establishment of new GP practices
- Practice mergers
- Discretionary payments
- Extended primary care medical services
- New ly designed services to be commissioned from primary care
 - Temporary closure of practice lists

Integrated Audit & Governance Committee (Bi-monthly)

- Independent assurance
- Governance, systems and control · Internal control and audit
- Declarations / conflicts of interest
- Standards or business conduct
- Legal compliance
- Health and safety
- Information governance
- Governance
- Risk management (draft)
- Assurance (draft)

Remuneration Committee (Bi-annually)

- Remuneration and Terms of Service of VSM and Board Members
- Performance review of VSMs
- VSM remuneration / Terms of Service Policies

