


Date:	12 th April 2018
Meeting:	Governing Body
Item Number:	Item 9.2
Public/Private:	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>

Report Title:
CCG Committee Effectiveness & Sub Committee Review
Decisions to be made:
<ul style="list-style-type: none"> To review the attached paper and agree the sub- committee structure To review the effectiveness review questions for the new committee review To approve the establishment of the Programme Delivery Board and the Terms of Reference

Author: <i>(Name, Title)</i>	Julie Warren Turnaround Director
GB Lead: <i>(Name, Title)</i>	Julie Warren Turnaround Director
Director approval	Julie Warren Turnaround Director
Director Signature	

Continue to improve the quality of services	<input checked="" type="checkbox"/>	Improve patient experience	<input checked="" type="checkbox"/>	
Reduced unwarranted variations in services	<input checked="" type="checkbox"/>	Reduce the inequalities gap in North Lincolnshire	<input checked="" type="checkbox"/>	
Deliver the best outcomes for every patient	<input checked="" type="checkbox"/>	Statutory/Regulatory	<input checked="" type="checkbox"/>	
Purpose (tick one only)	Approval <input checked="" type="checkbox"/>	Information <input type="checkbox"/>	To note <input type="checkbox"/>	Decision <input type="checkbox"/>

Executive Summary (Question, Options, Recommendations):	
<p>The attached paper includes:</p> <p>1 Review of existing/proposed sub-committee structure for the CCG</p> <p>2 Proposed approach to the review of three CCG Committees; Commissioning & Planning; Quality Performance & Finance and Senior Leadership Team.</p> <p>Appendix 1 outline questions that will form the basis for the committee review</p> <p>Appendix 2 identifies current/proposed sub-committee structure</p> <p>The Governing Body is asked to review both the proposed approach to committee effectiveness and agree the CCG sub-committee structure.</p>	
Recommendations	1 To approve the sub-committee structure for the CCG 2 To approve the Terms of reference for the Programme Delivery Board 3 To approve the internal audit committee effectiveness process
Report history	
Equality Impact	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Sustainability	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Risk	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Legal	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Finance	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

<i>Patient, Public, Clinical and Stakeholder Engagement to date</i>									
	<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>		<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>
Patient:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Clinical:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Public:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

1 CCG Committee Evaluation

The CCG's external governance review made a number of recommendations concerning internal structures and effective decision making. In response to the recommendations a significant amount of work has been completed including the formation of three new Governing Body Committees: Quality, Performance & Finance (QPF); Planning & Commissioning (P&C) and Senior Leadership Team (SLT).

Whilst the three committees have only recently been formed it was decided to undertake an early review to help ensure that they are fit for purpose and can effectively support the delivery of the CCG's strategic intentions. The committee assessments will be conducted by Internal Audit utilising a (slightly amended) series of questions previously developed to review committee effectiveness at a local CCG.

The questions are attached as Appendix 1

It is planned to hold workshops at the respective committee meetings on the following dates:

Senior Leadership Team 10th April

Planning and Commissioning 19th April

Quality Performance & Finance 5th April

The assessment should identify any issues in relation to the committees: remit, membership, conduct of business and any developmental needs in addition to identifying areas of good practice. Note: it is expected that each CCG Governing Body committee will also undertake an annual review of its effectiveness.

2 Sub Committee Review

As part of the governance actions a review of CCG sub-committees has also been conducted.

As part of this review the CCG Turnaround Director has met with the Heads of Service to consider the current structures. Meetings have also been held with the respective executive officer leads for Planning & Commissioning and Quality, Performance & Finance Committees.

The broad remit of the sub-committee review included:

Identifying if the sub-committee fulfilled a necessary/statutory function or the work could be mainstreamed and conducted as part of 'day to day' business.

Determining if each sub-committee was reporting into the most appropriate committee - given the re-structuring of the CCG Governing Body Committees

Identifying if there was an opportunity for one or more committees/functions to be merged

Determining if the frequency of meetings was appropriate

Identifying any opportunity for sub-committee meetings to be held consecutively – given the small number of staff

As a result of the review and feedback received a number of suggestions have been proposed and are highlighted below for consideration:

Senior Leadership Team

It is suggested that Communications & Engagement and Organisational Development sub-committees could report into the Senior Leadership Team

Planning & Commissioning Committee

To establish the following new sub-committees:

Programme delivery Board

Procurement Board

Quality Finance & Performance Committee

To establish a Risk & Quality Operational Sub-Committee – this would enable QFP Committee to focus on strategic work and enable more in depth analysis of key issues

To establish a formal Safeguarding Group

The Quality & Inclusion Group to be reviewed by June 2018 with a view to 'mainstream' its work

Recommendation

1. That the Governing Body review Appendix 2, consider the attached feedback/suggestions and agree upon the CCG sub-committee structure subject to no further work being identified.
2. Agree questions for review of the three CCG committees
3. Agree the establishment of the Programme Delivery Board and the terms of reference

Julie Warren
Turnaround Director
March 2018

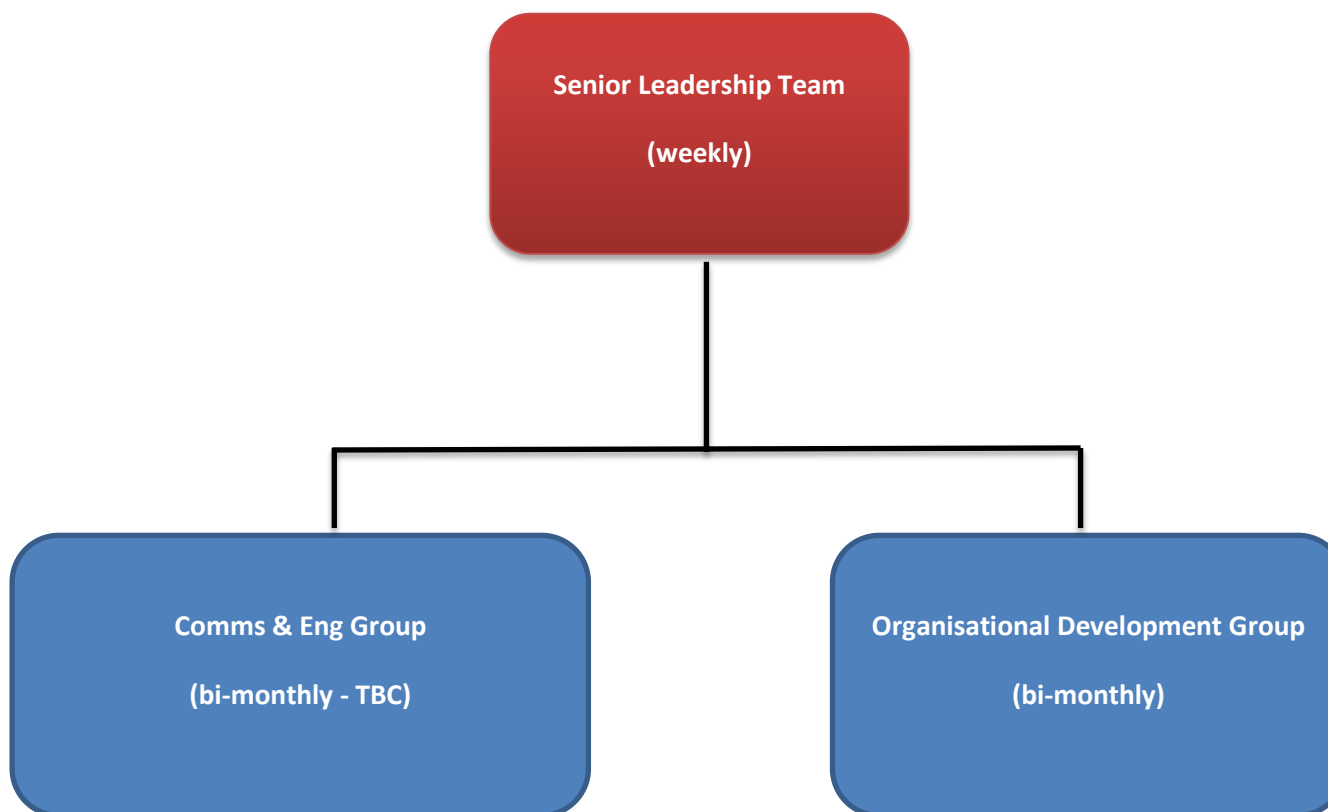
CCG Committee Review Questions

Internal audit will send these questions out prior to the committee meetings and there will be a review/discussion regarding the results at the respective meetings.

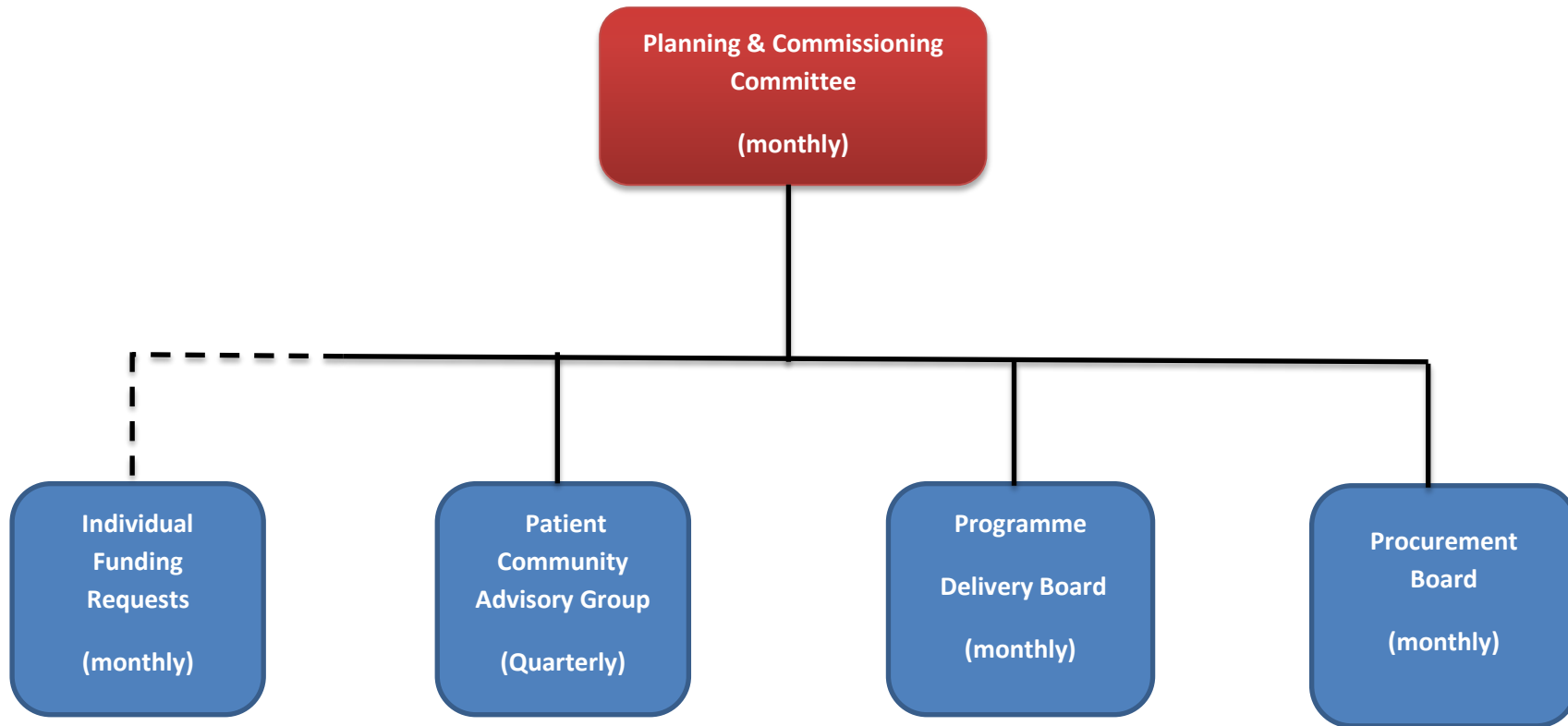
1. Agendas and papers are circulated early enough for me to have sufficient time to consider them properly and seek further advice if required
2. Papers/Reports content are of sufficient quality for me to effectively participate in debate and make decisions
3. I fully understand the role of the Committee
4. I fully understand my duties as a member of the Committee
5. I fully understand the Committee's work plan
6. I understand how the Committee links with other CCG Groups and Committees
7. I feel I am able to fully participate in and contribute to the meetings
8. The frequency and duration of Committee meetings is appropriate
9. I believe the Committee fulfils its remit fully and effectively
10. Are there any additional areas which the Committee should get involved in?
11. Are there any areas which the Committee should not get involved in?
12. What do you consider to be the key areas of development for the Committee?
13. Do you have any other comments?

Sub Committee Structure

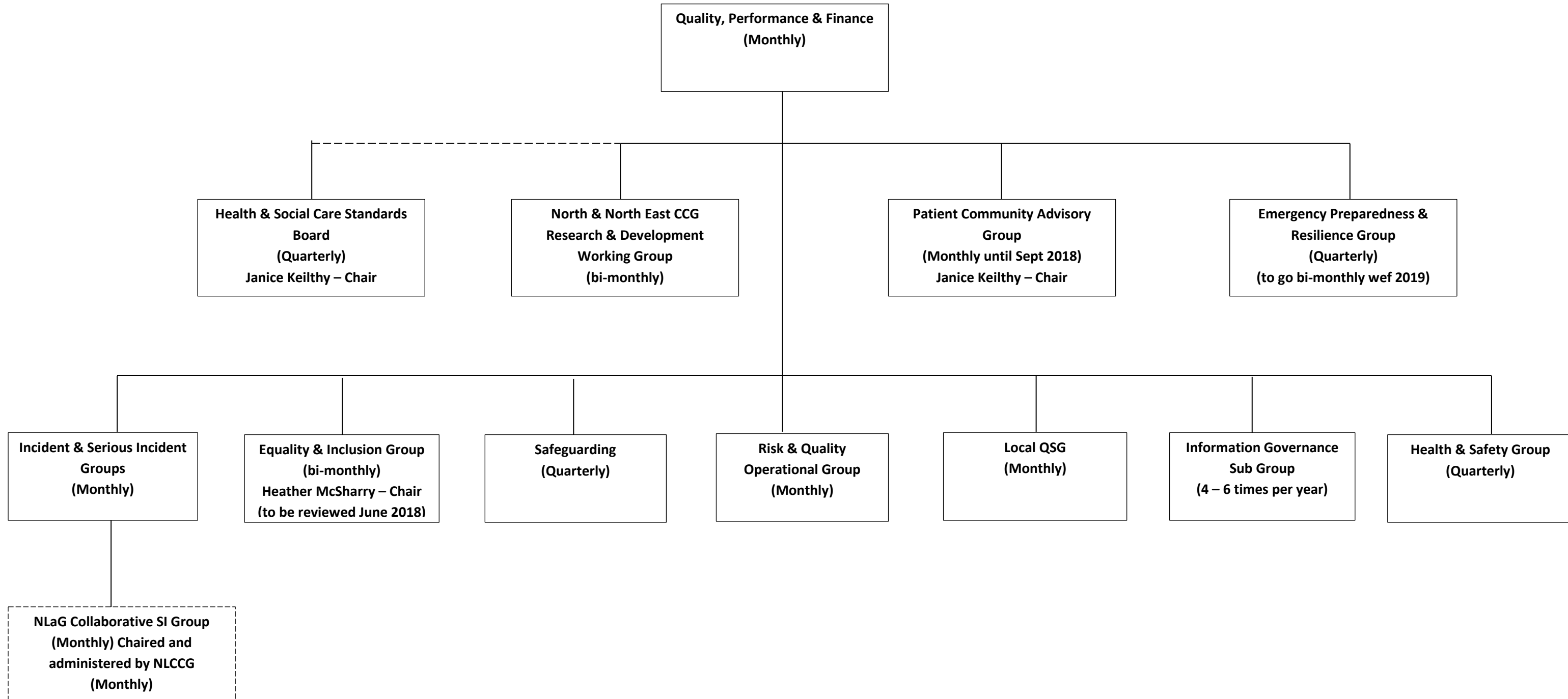
NLCCG Senior Leadership Team V5.0



NLCCG Planning & Commissioning Committee V5.0



NLCCG Quality, Performance & Finance Structure V4.0



Programme Delivery Board

Terms of Reference

Version	Action/Amend	Author/Editor	Date
V1	Inaugural draft ToR	J Warren	21/03/18

Review date: not less than annually after initial approval

**NHS North Lincolnshire CCG
Programme Delivery Board
Terms of Reference**

1. Purpose

- 1.1 The CCG Programme Delivery Board will agree priorities and monitor progress against a programme of work to deliver the CCG Commissioning Strategy and Operational Plan.

The Board will review and scrutinise progress and programme delivery against the agreed strategic objectives and the outputs of the associated workstreams. This will include performance; finance and outcomes measures determined under each programme area. In particular the Board will confirm and challenge the adequacy and timeliness of remedial action in underperforming areas. Where necessary, it will effect further action.

2. Links and inter-dependencies

- 2.1 The Programme Delivery Board has the following links and inter-dependencies:

2.1.1 Planning and Commissioning Committee (accountable);

2.1.2 Senior Leadership Team (monthly updates); and

2.1.3 CCG Commissioning Plan Operational Workstreams and other key CCG programmes of work (accountable to PDB).

3. Authority

- 3.1 The Programme Delivery Board is authorised by the Planning & Commissioning Committee 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 request they receive.
- 3.2 Subject to such directions as may be given by the Planning & Commissioning Committee, it may establish sub-groups or task and finish groups as appropriate and determine the membership and terms of reference of such. The Standing Orders and Prime Financial Policies of the CCG, as far as they are applicable, shall apply to the Programme Delivery Board and its sub-groups.

4. Reporting arrangements

- 4.1 All meetings shall be summarised in the form of action notes and a record kept of all reports/documents considered.
- 4.2 The reporting arrangements to the Planning & Commissioning Committee shall be through the submission of a quarterly written report as to the progress against workstream delivery plans and an opinion of the robustness of the sources of assurance for the plans.
- 4.3 The Programme Delivery Board will also report against delivery of its remit to the Senior Leadership Team on a monthly basis*.
- 4.4 The senior officer with responsibility for corporate governance will be responsible for ensuring that Freedom of Information requirements in relation to the Board's action notes and reports are met. The chair of the Programme Development Board will seek the advice of the senior officer with responsibility for corporate governance in relation to any matters where an exemption as defined within the Freedom of Information Act 2000 is believed to apply.

* The requirement of this report will be reviewed in the light of the review of the membership of the Programme Delivery Board following three months of operation.

5. Membership

- 5.1 The initial Membership of the Programme Delivery Board shall be as follows:

- Turnaround Director (to Chair first meeting only)
- Chief Finance Officer
- Director of Commissioning (Vice Chair)
- Head of Strategic Commissioning
- Performance and Information Manager
- Deputy Chief Finance Officer
- Head of Governance
- Quality Lead
- Head of Nursing

- Director of Primary Care
- Programme Manager New Models of Care
- Associate Director/Vulnerable People
- Medical Director
- SRO/Project Managers to attend

5.2 The membership of the Programme Delivery Board shall be reviewed following 3 months of operation. Any changes to the membership or Terms of Reference of the Programme Delivery Board must be approved by the Planning & Commissioning Committee.

6. Quoracy

6.1 The quorum for meetings shall be not less than one third of the total membership (6 members) and shall include the following:

- Chair or vice-chair;
- One member from performance & information;
- One member from commissioning; and
- One member from quality / clinical governance.

6.2 If a quorum has not been reached, then the meeting may proceed if those attending agree but no formal decisions may be taken by the non-quorate meeting.

7. Meeting arrangements

7.1 Meetings of the Programme Development Board shall be held monthly for the first three months, following which the frequency shall be reviewed.

7.2 Meetings shall be administered in accordance with the CCG Constitution, Standing Orders and Prime Financial Policies.

7.3 The Director of Commissioning will ensure the meeting is supported administratively, and will oversee the following:

7.3.1 Agreement of agenda with the Chair and attendees and the collation/circulation of papers;

7.3.2 Taking the action notes and keeping a record of matters arising and issues to be carried forward; and

7.3.3 An Annual Schedule of Meetings shall be agreed at, or before, the last meeting each year in order to circulate the schedule for the following year.

8. Confidentiality

8.1 All Members are expected to adhere to the CCG Constitution and Standards of Business Conduct and Conflicts of Interest Arrangements.

9. Remit

9.1 Scrutinise progress against critical milestones for each workstream within the Annual Commissioning Operational Plan. Confirm and challenge the adequacy and timeliness of remedial steps in underperforming areas, effecting further action where necessary.

9.2 Undertake a rolling programme of detailed review of the Operational Plan workstreams and other core programmes of CCG work in order to report on their cohesiveness and sufficiency to the Planning & Commissioning Committee.

9.3 Identify and oversee risks to the delivery of work programmes and ensure these are reflected in the Corporate Risk Register or Board Assurance Framework, where appropriate. Assess the adequacy of identified mitigations.