

Date:	23 rd August 2018					
Meeting:	Joint Primary Care Commissioning Committee					
Item Number:						
Public/Private:	Public ⊠ Private □					

Author: (Name, Title)	Erica Ellerington, Primary Care Contract Manager				
GB Lead: (Name, Title)	Geoff Day Interim Director of Primary Care				
Director approval (Name)	Geoff Day				
Director Signature (MUST BE SIGNED)	Capady				

Report Title:
Terms of Reference
Decisions to be made:
Approve final changes to terms of reference

Link to a Strategic Objective?	
Link to a Strategic Risk	

Continue to improve the quality of services	\boxtimes	Impr	\boxtimes				
Reduced unwarranted variations in services	\boxtimes	Redu Linc	\boxtimes				
Deliver the best outcomes for every patient	\boxtimes	Statu	\boxtimes				
Purpose (tick one only)		roval ⊠	Information	To note □	Decision	As	ssurance

Executive Summary (Question, Options, Recommendations):

At the last meeting, the Committee agreed the final terms of reference which including the addition of having a GP present to be quorate.

The Committee are requested to discuss this decision further and make any final amendments to the Terms of Reference.

Recommendations	The Committee are recommended to review the Terms of Reference
Report history	April 2018

Equality Impact	Yes ⊠	No □	
Sustainability	Yes ⊠	No □	
Risk	Yes ⊠	No □	
Legal	Yes ⊠	No □	
Finance	Yes ⊠	No □	

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





Terms of reference – Joint Primary Care Commissioning Committee including scheme of delegation NHS England and North Lincolnshire CCG

April 2018

Terms of reference for Joint Primary Care Commissioning Committee including scheme of delegation

Introduction

 The NHS England and North Lincolnshire CCG (NLCCG) Joint Primary Care Commissioning Committee is a joint committee with the primary purpose of jointly commissioning primary medical services for the people of North Lincolnshire.

Statutory Framework

- 2. The National Health Service Act 2006 (as amended) ("NHS Act") provides, at section 13Z, that NHS England's functions may be exercised jointly with a CCG, and that functions exercised jointly in accordance with that section may be exercised by a joint committee of NHS England and the CCG. Section 13Z of the NHS Act further provides that arrangements made under that section may be on such terms and conditions as may be agreed between NHS England and the CCG.
- 3. Section 14Z9 of the NHS Act 2006 (as amended) provides the statutory provisions used to jointly exercise CCG functions, and which may be delegated by the CCG to the joint committee. The draft delegation is set out as Schedule 1 to this document.
- 4. Section 14Z9 of the NHS Act was amended by Legislative Reform Order (2014/2436) ("LRO") to enable the joint exercise by NHS England and a CCG of any of the CCGs commissioning functions and any other functions of the CCG which are related to the exercise of those functions. Where such arrangements are made, the LRO enabled them to be exercised by a joint committee established between the parties.

Role of the Joint Committee

5. The role of the Joint Primary Care Commissioning Committee shall be to carry out the functions relating to the commissioning of primary medical services under section 83 of the NHS Act.

This excludes:

 Those relating to individual GP performance management, which have been reserved to NHS England.

This includes the following activities:

- GMS, PMS and APMS contracts (including the design of PMS and APMS contracts, monitoring of contracts, taking contractual action such as issuing branch/remedial notices, and removing a contract);
- Newly designed enhanced services ("Local Enhanced Services" and "Directed Enhanced Services");
- Design of local incentive schemes as an alternative to the Quality
 Outcomes Framework (QOF);
- Decision making on whether to establish new GP practices in an area;
- Approving practice mergers; and
- Making decisions on "discretionary" payment (e.g., returner/retainer schemes).
- 6. In performing its role the Joint Primary Care Commissioning Committee will exercise its management of the functions in accordance with the agreement entered into between NHS England and North Lincolnshire CCG, which will sit alongside the delegation and terms of reference.
 - This agreement may include but not be limited to such matters as information sharing, resource sharing, contractual mechanisms for service delivery (and ownership) and interplay between contractual and performance list management.

Geographical coverage

7. The Joint Primary Care Commissioning Committee will comprise NHS England Yorkshire and the Humber sub region and the North Lincolnshire CCG. It will

undertake the function of jointly commissioning primary medical services for North Lincolnshire CCG.

Membership

- 8. The Joint Committee shall consist of:
 - a) From North Lincolnshire CCG Governing Body
 - CCG Lay member (Chair)
 - CCG Lay member (Vice Chair)
 - CCG Accountable Officer/Chief Officer
 - CCG Director of Primary Care
 - CCG Chief Financial Officer
 - **CCG Medical Director**
 - **CCG** Director of Commissioning
 - CCG Executive Nurse/Director of Quality & Risk
 - Secondary Care Doctor CCG Governing body
 - 3 x GPs including (GP lead for primary Care and Chair of Governing Body
 - 4 Director of Public Health
 - b) NHS England regional representative(s)
- The membership will meet the requirements of North Lincolnshire CCG"s constitution.
- 10. The Chair of the Joint Committee shall be a CCG lay member
- 11. The Vice Chair of the Joint Committee shall be a CCG Lay member
- 12. Non-voting attendees:
 - A representative of Healthwatch North Lincolnshire
 - A representative of Humberside Local Medical Committee
 - Health and Well-Being Board elected member

Meetings and Voting

13. The Joint Committee shall adopt the Standing Orders of North

Lincolnshire CCG insofar as they relate to the:

- a) Notice of meetings;
- b) Handling of meetings;
- c) Agendas;
- d) Circulation of papers; and e)

Conflicts of interest

14. In voting matters, NHS England and NLCCG will have equal voting rights.

Where a casting vote is required, NLCCG will have the casting vote on any decision pertaining to one of the CCG"s statutory functions. NHS England will have the casting vote on any decision pertaining to one of

NHS England's statutory functions.

- 15. A meeting will be quorate when a minimum of four members are present.

 There must be one member from NHS England present and one member from NLCCG. The member from NLCCG must be one of the two lay members of the committee. A GP must be present.
- 16. The frequency of the meeting will be as necessary but a minimum of four times a year.
- 17. Meetings of the Joint Primary Care Commissioning Committee:
 - a. Shall, subject to the application of 7(b), be held in public.
 - b. The Joint Primary Care Commissioning Committee may resolve to exclude the public from a meeting that is open to the public (whether during the whole or part of the proceedings) whenever publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted or for other special reasons stated in the resolution and arising from the nature of that business or of the proceedings or for any other reason permitted by the Public Bodies (Admission to Meetings) Act 1960 as amended or succeeded from time to time.

- 18. Members of the Joint Primary Care Commissioning Committee have a collective responsibility for the operation of the Joint Primary Care Commissioning Committee. They will participate in discussion, review evidence and provide objective expert input to the best of their knowledge and ability, and endeavor to reach a collective view.
- 19. The Joint Primary Care Commissioning Committee may call additional experts to attend meetings on an ad hoc basis to inform discussions.
- 20. Members of the Joint Primary Care Commissioning Committee shall respect confidentiality requirements as set out in the Standing Orders referred to above unless separate confidentiality requirements are set out for the joint committee in which event these shall be observed.
- 21. Secretariat to be provided by North Lincolnshire CCG
- 22. The secretariat to the Joint Committee will:
 - i) Circulate the minutes and action notes of the committee within 10 working days of the meeting to all members.
 - ii) Present the minutes and action notes to Yorkshire and the Humber sub region of NHS England and the governing body of North Lincolnshire CCG.
- 23. These Terms of Reference will be reviewed annually, reflecting experience of the Joint Primary Care Commissioning Committee in fulfilling its functions and the wider experience of NHS England and CCGs in primary medical services cocommissioning.

Decisions

- 24. The Joint Primary Care Commissioning Committee will make decisions within the bounds of its remit.
- 25. The decisions of the Joint Primary Care Commissioning Committee shall be binding on NHS England and North Lincolnshire CCG.
- 26. Decisions will be published by both NHS England and North Lincolnshire

CCG(s), including via the CCG Intranet and Internet sites.

27. The secretariat will produce an executive summary report which will presented to the Yorkshire and Humber sub region of NHS England and the governing body of North Lincolnshire CCG each quarter for information.

Key Responsibilities

The key responsibilities of the joint committee include:

- Coordinating needs assessment
- Setting the strategic direction and annual priorities for primary medical services in North Lincolnshire
- Providing oversight of the effective utilisation of the total North Lincolnshire primary medical services commissioned resource through the "aligned" budgets including priorities for investment, disinvestment and reinvestment.
- Existing and newly designed enhanced services ("Local Enhanced Services" and "Directed Enhanced Services")
- Local incentive and quality improvement schemes, potentially as an alternative to the Quality Outcomes Framework (QOF)
 - Market management, including decision making on whether to establish new GP practices in an area and approving practice mergers;
- Decisions on "discretionary" payments (e.g., returner/retainer schemes);

Review of Terms of Reference

28. These terms of reference will be formally reviewed by the Yorkshire and the Humber sub region of NHS England and North Lincolnshire CCG in April of each year, following the year in which the Joint Primary Care Commissioning Committee is created, and may be amended by mutual agreement between Yorkshire and the Humber sub region of NHS England and North Lincolnshire CCG at any time to reflect changes in circumstances which may arise.

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