

**AGENDA ITEM: 10**

# ***Governing Body***

# **REPORT**

<b>Subject:</b>	Bedfordshire, Luton & Milton Keynes Committee in Common
<b>Date:</b>	6 July 2017
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**Executive Summary**

Bedfordshire, Luton and Milton Keynes CCG have been working together through the Joint Commissioning Executive (JCE) since December 2016. The JCE has been an effective mechanism for joint working and discussions across the three local health systems and has provided the opportunity to provider greater alignment across the Bedfordshire, Luton and Milton Keynes (BLMK) – Sustainable Transformation Partnership. However, the JCE was not established as a decision-making vehicle through which collaborative-decisions could be undertaken.

Members of the three CCGs and the JCE have concluded that now is an appropriate point at which to establish a more formal decision-making structure to allow collaborative-decisions to be undertaken across the three health systems. The creation of a Committee in Common (CIC) would allow common decisions to be undertaken, but with each of the three CCGs retaining their own independent sovereignty. All three CCGs remain solely responsible for their statutory obligations and duties.

The CIC Terms of Reference sets out the mechanism by which each of the three CCGs would form a committee of its Governing Body and make decisions in common. The Terms of Reference provides a detailed description, including scope, functions and membership. The Terms of Reference also describes the post of a ‘Revolving Chair’, that would be responsible for bringing together the three CCGs and facilitating the discussions as well as the individual CCG decision-making.

**Recommendation**

**The Governing Body is asked to:**

- a. **APPROVE the creation of a Committee in Common between Bedfordshire CCG, Luton CCG and Milton Keynes CCG, and,**
- b. **APPROVE the Terms of Reference to support the Committee in Common**

**Links to the business and risks**

**Relevant Strategic Priorities (please mark in bold)**

1. Systematically implementing prevention, early diagnosis and early intervention
2. Commissioning services that deliver evidence-based care, in the right place and at the right time, including promoting self-care and empowering patients to manage their own conditions.

3. Making sure that care is high quality, safe and sustainable, that it improves health outcomes and wellbeing and provides a good patient experience.
4. Using the statutory framework with best practice governance and transparency principles to be fully accountable to our population in commissioning and operating as a part of the wider health system
5. Ensure that the CCG commissions and operates in a financial manner consistent with the regulatory framework, long terms sustainability and best use of public money.
6. We will work in close partnership with all the organisations who commission or provide care for our population, to integrate services where it makes sense and to achieve seamless transitions of care for patients where services remain separate.
7. Embedding member, public, patient, carer, staff and other stakeholders' views through meaningful engagement into decision-making processes and commissioning intentions.

<b>Links to Board Assurance Framework / Corporate Risk Register</b>	Via the strategic objectives set out above
<b>Details of additional risks associated with this paper (may include NHS England Assurance Framework / NHS Constitution)</b>	<p>The BLMK CIC brings together the Bedfordshire, Luton and Milton Keynes to make decisions in common. This proposal does not change the individual organisations responsibilities, duties or functions, as it would be a function that is delegated from each of the Governing Bodies.</p> <p>The risks associated with the work of the BLMK CIC will be identified within each of the papers presented.</p>
<b>Financial Implications / impact</b>	There is no financial implications or impact beyond the work of the BLMK CIC.
<b>Legal Implications / impact</b>	<p>Each of the BLMK CCG's constitutions have been reviewed and have been validated that they can establish a Committee in Common. The development of the BLMK CIC does not delegate to any external body any form of decision-making.</p> <p>The BLMK CIC – Terms of Reference has been reviewed by the Head of Governance for Bedfordshire and Milton Keynes CCG.</p>
<b>Partnership work / public engagement implications / impact</b>	The recommendation to establish a BMK CIC strongly supports partnership working across the three CCGs.
<b>Committees / groups where this has been discussed before</b>	The development of a Committee in Common has been discussed, both within CCG Board and at Executive Level between CCGs.
<b>Other options available and their pros and cons</b>	In developing the proposal for a Committee in Common, both the JCE and the CCGs have considered establishing a Joint Committee. This option was considered to be less favourable, as pooling the decision-making within this form of governance framework would have diluted CCG sovereignty. Whilst the development of a Joint Committee has not been rejected as a longer terms aspiration, the development of a Committee in Common was considered to be a more appropriate mechanism as an initial first step.

<b>Background papers</b>	N/A

## **BLMK CCGs - Committee in Common**

### **Terms of Reference**

In the event of contradiction or dispute, this document should be seen as the authoritative document in respect of the Bedfordshire, Luton and Milton Keynes CCGs' Committees in Common functions.

#### **1 Context**

- 1.1 The three Clinical Commissioning Groups (CCGs) in Bedfordshire, Luton and Milton Keynes (BLMK) agreed at their meetings in July 2017 to propose the establishment of a Committee in Common for the purpose of strategic decision making, with particular reference to support to the Bedfordshire, Luton and Milton Keynes Strategic Transformation Partnership and Plan, as agreed by the CCGs. The Governing Body of each of the CCGs has resolved to participate (through its nominated members) in a committee to be known as the Committee in Common. This Agreement sets out the membership and terms of reference for the Committee in Common, which is a prime committee of each CCG's Governing Body.

#### **2 Introduction**

- 2.1 Under paragraph 3(3) of Schedule 1A of the National Health Service Act 2006 (inserted by the Health and Social Care Act 2012) CCGs' constitutions may provide for their functions to be exercised by any members or employees of the CCG. Each of the CCGs provides in its constitution that its functions in relation to decisions taken on its behalf at meetings of the Committee in Common are delegated to the majority of such of its members of the committee as attend the meeting of the committee at which the relevant decision is taken and vote on the decision, provided further that to be binding on a CCG the decision must be unanimously agreed by all of the CCGs.
- 2.2 Individual CCGs will still always remain accountable for meeting their statutory duties and regulations in terms of membership and chairmanship of CCG Governing Bodies, and other statutory committees such as audit committees and remuneration committees. The aim of creating a Committee in Common is to encourage the development of strong collaborative and integrated relationships and decision-making between partners.
- 2.3 The Committee in Common ('CIC') is a collaborative committee of:
  - a. Bedfordshire CCG;
  - b. Luton CCG; and
  - c. Milton Keynes CCG.

### 3 Functions of the Committee

- 3.1 As members of the BLMK Sustainability and Transformation Partnership, the Health leaders across the BLMK have collectively committed to change the way certain elements of health care are provided to the local population to deliver the highest quality of care possible within the resources available. The work of the CIC is designed to deliver key work programmes consistently across the BLMK footprint so that all people receive the highest possible care and best outcomes.
- 3.2 Each BLMK CIC member will perform the functions delegated to it by its Governing Body. The BLMK CIC has the following authority, role and primary purposes:
- a. Support the Bedfordshire, Luton and Milton Keynes - Strategic Transformation Partnership and delivery of the Plan, as required;
  - b. Agree the planning assumptions that will be used to underpin financial, workforce, access and activity modelling as part of the BLMK Sustainability and Transformation Partnership Accountable Care System (ACS);
  - c. Agree the scope of change required across the BLMK footprint, including the associated Case for Change;
  - d. Develop potential models of care for future healthcare provision for consultation;
  - e. Determine the method and scope of the consultation process;
  - f. Determine any changes to way in which commissioning responsibilities are discharged across BLMK at scale (BLMK) and place (CCG or Local Authority footprint) in relation to any future strategic commissioner responsibilities; and
  - g. Oversee the development of any strategic commissioning, system integration and accountable care provision proposals and the relevant implementation arrangements, with particular reference to the impact on:
    - i. Discharging the CCGs' statutory role and functions;
    - ii. The membership of the CCGs; and
    - iii. The employees of the CCGs.
- 3.3 In discharging its responsibilities the BLMK CIC will also:
- a. Oversee the development of proposals for the range, scale and location of healthcare services as models, options and proposals are developed;
  - b. Ensure that the redesign process identifies those areas that require formal public consultation;
  - c. Ensure that the redesign process identifies any proposal for a substantial development of the health service in the area of the relevant local authority or any substantial variation in the provision of such service that will trigger the requirement for the CCG to consult with the relevant local authority;
  - d. Receive and or review recommendations from the Bedfordshire, Luton and Milton Keynes - Strategic Transformation Partnership and decide on a model for future healthcare provision that is safe, sustainable and financially viable; and

- e. Oversee stakeholder engagement and consultation on those areas of service change that will impact on service users.

#### **4 Geographical coverage**

- 4.1 The CIC will comprise those CCGs listed above in Section 2 and cover the Bedfordshire, Luton and Milton Keynes region.
- 4.2 NHS England Specialised Commissioning will, if required, be involved through a collaborative commissioning arrangement.

#### **5 'Revolving Chair'**

- 5.1 A 'Revolving Chair' will manage the discussions in the meeting and shall support the BLMK CIC in trying to reach a consensus for each decision. The 'Revolving Chair' will be a voting member of the BLMK CIC.
- 5.2 The 'Revolving Chair' will be appointed on a three month term. The Chair arrangements for the BLMK CIC will be reviewed between 6 and 9 months from the date of the first meeting.
- 5.3 The 'Revolving Chair' shall support the BLMK CIC to reach a consensus for each decision. He/she facilitates the wider discussions to inform the decisions and work towards achieving consensus, keeps the discussions on task etc but will not participate in individual CCGs' debate to reach their final decisions.
- 5.4 The 'Revolving Chair' shall take on the responsibilities usual functions normally associated with the Chair of an NHS statutory committee.

#### **6 Membership**

- 6.1 The members of each BLMK CIC shall comprise of five voting Governing Body members from each of the BLMK CCGs (though it is noted that there will not be voting as part of the BLMK CIC except to determine the views of each CCG Committee and whether a consensus has been reached).
- 6.2 The nominated Governing Body members for each BLMK CIC are listed in the table below and also detailed in the separate addendum for the CCGs. However, the following positions will be common across all three BLMK CCGs
  - a. Chair;
  - b. Accountable Officer;
  - c. GP Governing Body Member;

- d. Lay Member; and
  - e. CCG Executive Member.
- 6.3 The membership for each CCG CIC will have a majority of clinical membership.
- 6.4 Where a CCG Governing Body has opted to delegate decision-making authority to a BLMK CIC deputy, the deputy can only be voting Governing Body member and agreed with Chair of each Governing Body as part of delegated responsibilities.
- 6.5 Members of the transition team shall attend the Committees as needed to provide information.
- 6.6 Deputies should inform the 'Revoling Chair', prior to any meeting of the BLMK CIC and communicated their attendance to the other CCGs involved in the BLMK CIC.

Name	Role	Exec	Clinical	Lay
Bedfordshire CCG				
Luton CCG				
Milton Keynes CCG				

## 7 Meetings

- 7.1 The BLMK CIC shall adopt the standing orders of Milton Keynes 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.

## **8 Voting**

- 8.1 The three BLMK CCGs will seek to make decisions by consensus wherever possible both within the CCG and between the CCGs. However, each CCG may decide to make a decision by voting and each decision will need to be carried by a majority (e.g. >50%) of its representatives for its own CCG.
- 8.2 Each of the three CCG will take a decision in rotation.

## **9 Quorum**

- 9.1 The Chair and Accountable Officer from each of the three BLMK CCGs should be present, as a minimum for the meeting to be quorate.

## **10 Frequency of meetings**

- 10.1 Frequency of meetings will meet as agreed through discussions between the three BLMK CCGs as appropriate to transacting business, supported by the Transition Team.

## **11 Meetings of the BLMK CIC**

- 11.1 Meetings of the BLMK CIC shall be held in Part A Public and Part B Private.
- 11.2 The BLMK CIC should consider what would not be in the public interest to permit members of the public to attend Part A. The CIC may resolve to exclude the public from a meeting that is open to the public (Part B) 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.
- 11.3 Members of the BLMK CIC have a collective responsibility for the operation of the BLMK CIC. They will participate in discussion, review evidence and provide objective expert input to the best of the knowledge and ability, and endeavor to reach a collective view.
- 11.4 The BLMK CIC may call additional experts to attend meetings on an ad-hoc basis to inform discussions.
- 11.5 The BLMK CIC has the power to establish sub-groups and working groups and any such groups will be accountable directly to the BLMK CIC, while reserving delegated decision making.
- 11.6 Members of the BLMK CIC shall respect confidentiality requirements as set out in the Standing Orders referred to above unless separate confidentiality requirements are set out for the individual Governing Bodies in which event these shall be observed

## **12 Secretariat provisions - to be provided by the Transition Team.**

12.1 The secretariat to the BLMK CIC will:

- a. Circulate the minutes of the BLMK CIC within three working days of the meeting to all members; and
- b. Present the minutes and action notes to the Governing Bodies of the CCGs set out in Section 4.

### **13 Reporting to CCGs**

13.1 The BLMK CIC will produce a note, including the minutes of each meeting, which will be shared with each CCG Governing Body.

### **14 Decisions**

14.1 The BLMK CIC will make decisions within the bounds to the scope of the functions agreed.

14.2 The decisions of the BLMK CIC shall be binding on all member CCGs, which are:

- a. Bedfordshire CCG;
- b. Luton CCG; and
- c. Milton Keynes CCG.

14.3 All decisions undertaken by the BLMK CIC will be published by the individual CCGs.

### **15 Review of Terms of Reference**

15.1 These terms of reference will be formally reviewed by BLMK CCG annually, taking the date of the first meeting, following the date which the BLMK CIC is created and may be amended by mutual agreement between the BLMK CCGs at any time to reflect changes in circumstances as they may arise.

### **16 Withdrawal from the Commissioning Executive**

16.1 Should this BLMK CIC arrangement prove to be unsatisfactory, the Governing Body of any of the member BLMK CIC can decide to withdraw from the arrangement, but has to give six months' notice to partners, with new arrangements starting from the beginning of the next new financial year.

### **17 Signatures**

17.1 Signed by .....on behalf of Bedfordshire CCGs

17.2 Signed by.....on behalf of Luton CCG

17.3 Signed by .....on behalf of Milton Keynes CCGs

17.4 This agreement is dated .....2017

**Committee in Common (*Commissioning Executive*)**

**Terms of Reference**

**Schedule 1 - List of Committee Members from each Constituent CCG**

**Bedfordshire CCG**

[To complete and insert]

**Luton CCG**

[To complete and insert]

**Milton Keynes CCG**

[To complete and insert]