

Governing Body (public) meeting

DATE: 28th November 2013

Title	Terms of Reference – South East London CCGs Clinical Strategy Committee	
Recommended action for the Governing Body	<p>That the Governing Body:</p> <p>Note the attached Terms Of Reference for the South East London CCGs Clinical Strategy Committee.</p>	
Executive summary	<p>As part of the wider governance arrangements in South East London, the CCGs within the South East London have established a collaborative Clinical Strategy Committee (CSC) (formerly CSG) to discuss and lead thinking on pan borough strategic clinical issues across CCGs and to advise and make recommendations to the relevant CCG decision making body.</p> <p>The key role of this committee includes:</p> <ul style="list-style-type: none"> • Oversight of the SE London Commissioning Strategy • Aligning CCG Commissioning intentions to the wider Community Care based strategy • Address strategic issues in provider markets • To act as a formal (joint) committee of relevant CCG Governing Bodies <p>For full details of the dimensions of work of CSC please refer to the TOR attached.</p>	
Which objective does this paper support?	Patients: Improve the health and wellbeing of people in Bexley in partnership with our key stakeholders	✓
	People: Empower our staff to make NHS Bexley CCG the most successful CCG in (south) London	✓
	Pounds: Delivering on all of our statutory duties and become an effective, efficient and economical organisation	✓
	Process: Commission safe, sustainable and	✓

Clinical Commissioning Group

	equitable services in line with the operating framework and which improves outcomes and patient experience	
Organisational implications	Key risks (corporate and/or clinical)	N/A
	Equality and diversity	N/A
	Patient impact	N/A
	Financial	N/A
	Legal issues	N/A
	NHS constitution	In line with the working together and in partnership agenda
Consultation (public, member or other)	N/A	
Audit (considered/approved by other committees/groups)	N/A	
Communications plan	Minutes of the meetings will be presented to this Governing Body	
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Date	11 November 2013	



TERMS OF REFERENCE

SOUTH EAST LONDON CCGs CLINICAL STRATEGY COMMITTEE (formerly Clinical Strategy Group)

Constitution

The CCGs within South East London establish a collaborative Clinical Strategy Committee (CSC) (formerly CSG) to discuss and lead thinking on pan borough strategic clinical issues across CCGs and to advise and make recommendations to the relevant CCG decision making body.

Purpose of the Committee

1. Develop, agree and oversee commissioning strategy at the SE London level, that improves health outcomes and increases quality (safety, effectiveness and experience) of services within available resources
2. Align CCG wide priorities e.g. commissioning intentions and service re-design priorities with the SE London Community Based Care strategy
3. Address strategic issues in the provider market – mergers and acquisitions, reconfiguration and service change, foundation trust applications, receivership – affecting the whole of South East London, where acting at scale is necessary to ensure the CCGs' interests are promoted effectively
4. Liaise on behalf of SE London CCGs with the NHS England regional specialist commissioning hub
5. Advise, receive and consider the work of, the SE London CCG Stakeholder Reference Group to ensure
 - strengthened public and patient engagement
 - consistency with patient choice
6. Share CCG strategies for clinical engagement, and patient and public engagement, in order to promote synergies and avoid any unnecessary inconsistencies
7. Co-ordinate strategies and plans with SE London clinical networks
8. Determine, oversee and review any pan-SE London management arrangements
9. Determine, oversee and review any pan-SE London CCG contingency funding and risk management arrangements
10. Act as an escalation point
11. Hold each other to account
12. In addition, the Clinical Strategy Committee will:

- Provide a space for discussing clinical issues with providers that will have an impact on services across South East London and supporting the engagement of primary care clinicians in that clinical redesign
- Provide an opportunity for GP commissioners to be engaged with and accelerate the benefits arising from the Academic Health Sciences Centre and the Health Innovation and Education Cluster
- Provide a forum for discussion, learning and development between the clinical commissioners in Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark.
- Provide an opportunity to refer areas of concerns to the appropriate CCG quality and safety committee and the contract Committees that focus on quality.
- Be the conduit between regional and pan London clinical networks and CCGs

Governance

13. The SE London Clinical Strategy Committee will be a formal (joint) committee of each relevant Governing Body, and its members will be mandated by their Governing Body to take decisions on the CCG's behalf
14. The Clinical Strategy Committee is a collaborative arrangement and reports on its deliberations and recommendations to the CCGs from which its membership is drawn through the CSC chair (a CCG member selected from amongst its membership). The SE London CCG Stakeholder Reference Group reports to the SE London Clinical Strategy Committee and will provide support to the Committee in meeting two of the four tests for reconfiguration (Engagement and Choice).

SE London CCG Stakeholder Reference Group

The group will have a formal link to the SE London CCG Stakeholder Reference Group (and other stakeholder engagement arrangements) and will send one member of the SE London Clinical Strategy Committee to the SRG meeting. The independent chair of the SRG or SLCSU Communications, Governance and Marketing Director will provide formal feedback to the group as required.

15. The SE London Clinical Strategy Committee Chair will ensure that minutes are taken and are available to Clinical Commissioners on request.

Membership and attendance

16. Membership shall be:

- CCG Chairs
- CCG Chief Officers
- Clinical Lead for CBC
- Chair of Stakeholder Reference Group
- NHS England Clinical Lead
- Clinical Network Leads
- PMO Director

17. A quorum shall be **six** members.

18. Clinical commissioner members shall be nominated by the CCG body, which retains decision making responsibility, from amongst their membership; the SE London Clinical Strategy Committee will elect a Chair from within its membership.

19. Each member will agree a nominated deputy and will notify the chair of their name.

20. Relevant stakeholders or advisors will be invited to attend the meeting as required.

Meetings

21. It is envisaged that the Clinical Strategy Committee will meet until March 31st 2014 when the terms of reference will be reviewed.

22. The Clinical Strategy Committee will normally meet bi-monthly.

Reporting arrangements into the Clinical Strategy Committee from task and finish programmes and working Committees

23. The Clinical Strategy Committee will establish task and finish programmes and working Committees as required to carry out its duties.

24. The Clinical Strategy Committee has established a SEL CCG Stakeholder Reference Group that will provide minutes to the Committee

25. The Clinical Strategy Committee will provide, where appropriate, assurance to CCG Audit Committees that there are adequate arrangements for meeting the four reconfiguration tests for service change.

Duties

26. The Clinical Strategy Committee will agree and review a forward a programme of work

27. Responsibilities of members:

- To act in accordance with the ethical duty to deliver the greatest good for the greatest number of local residents, interpreted at individual, local borough and across borough levels.
- To actively seek to improve the quality of local healthcare through effective, consistent and transparent working processes.

28. Share expertise into local and nationally driven clinical re/design

- To bring knowledge of local circumstance, e.g. demographics, estate and knowledge of local people.
- To understand and promote leadership throughout the clinical community.
- To use resources allocated to the leadership role effectively and appropriately.
- To work within national professional guidelines.
- To actively monitor and signal any conflicts of interest and to ensure that the highest standards of probity are maintained.
- To be personally accountable for the delivery of leadership and promotion of the clinical strategy
- To present the results of the Clinical Strategy Committee's work to other key stakeholders

Risk management and mitigation

29. The Committee will ensure that risks identified are logged and passed to the relevant CCG's corporate affairs team for inclusion in the relevant register.
30. Risks that are escalated to the Committee from working groups will be discussed and passed to the relevant CCG or CCGs corporate affairs team for inclusion in the relevant register
31. The Committee will identify mitigating actions and report on these at every meeting

Resources and support

32. The Committee will be supported by the SE London PMO
33. Meeting dates will be agreed on an annual basis and will not be changed without the permission of the chair.
34. The support team is responsible for ensuring that minutes are taken, checked for accuracy and distributed to members within five working days of the meeting.

Minutes will be distributed to Committee members and attendees of the meeting within one week of the meeting dates.

35. Agendas for the meeting will be distributed no less than seven days before the meeting.
36. Papers for the meeting will be distributed no less than five days before the meeting.
37. Any exceptions to this will require written notification to the chair, and subsequent agreement on distribution arrangements.

Open governance

38. Minutes of the meetings will be shared with CCGs to make public, except for those relating to any meetings or parts of meetings held in private.