

**NHS Northern, Eastern and Western and South Devon and Torbay
Clinical Commissioning Groups
Joint Strategic Leadership Committee
Terms of Reference (v1.01 July 2018)**

1 Constitutional Obligations

1.1 The Clinical Commissioning Group's Governing Body hereby resolve to establish a Committee of the Governing Body known as the Strategic Leadership Committee which will meet jointly and fulfil the delegations described in each organisations constitution of the NHS NEW Devon CCG Executive Committee and the NHS South Devon and Torbay CCG Senior Leadership Team.

1.2 With this recognition of the joining together of the two existing committees the Strategic Leadership Committee is established in accordance with Northern, Eastern and Western Clinical Commissioning Group's Constitution, Standing Orders and Scheme of Delegation and South Devon and Torbay Clinical Commissioning Group's Constitution, Standing Orders and Scheme of Delegation.

ii. These terms of reference set out the membership, remit, responsibilities and reporting arrangements of the Committee and shall have effect as if incorporated into each CCG's constitution and standing orders.

iii. As per the CCG's constitution, in the interest of partnership working, this Committee will operate as a joint committee with representatives from both CCG's as per each CCG constitution, the accountability and decision making of the Committee shall remain the responsibility of the individual CCG and its Governing Body.

1.3 The Strategic Leadership Committee of 'the CCGs' is a **decision making** committee of the Governing Bodies and have the ability to execute any powers assigned to them by the Governing Bodies and those specifically delegated in these terms of reference and/or through 'the CCGs' constitutional scheme of delegations or any mandates.

2. Purpose

2.1 The Strategic Leadership Committee's core purpose is to support the CCG's Governing Bodies in its decision making to deliver its statutory duties as a commissioner and in doing so ensure that high quality safe care is available to meet the healthcare needs of the population of Devon within the available resources.

2.2 In order to deliver the core purpose and support the Governing Bodies in setting and delivering the organisations strategic direction and priorities the Committee will co-ordinate the commissioning activity of the CCG ensuring clinical engagement and appropriate oversight of:

- Strategy and Strategic change programmes

NHS organisations involved:

Northern, Eastern and Western Devon Clinical Commissioning Group
South Devon and Torbay Clinical Commissioning Group

- Operational and strategic delivery of commissioning intentions
- Assurance Framework and high level risk management
- It will also adhere to any delegations from the Governing Body

2.3 It is the responsibility of the Committee to make recommendations to the Governing Body of each CCG on determinations about the decisions it has made or received for each CCG, and this will be articulated through the Accountable/Chief officer.

2.4 It shall support the objectives of the Governing Bodies as outlined in their operational plans, and provide recommendations to the Governing Bodies and Audit and Assurance Committees that these are being met and considered.

2.5 It will promote a whole system culture of continuous improvement, ensuring that any decisions made consider all aspects of health and social care locally, whether provided by NHS or non-NHS providers.

2.6 It will provide assurance to the Governing Bodies that the CCG is fulfilling its statutory duties as set out in these terms of reference and under the relevant Acts, and current national guidance through a regular report to the Governing Bodies.

2.7 It will seek assurance through the relevant assurance committees of the governing body before any decisions are made that the commissioning strategy for the CCGs fully reflects all elements of the CCGs statutory obligations, stakeholder involvement, relevant programme workflow requirements and business intentions, keeping in mind that the strategy and response may need to change and adapt.

2.8 The senior officers of the Strategic Leadership Committee will oversee and make decisions following procurement discussions in a confidential Part 2 meeting where procurement decisions are required. Under the guidance of the NHSE (procurement, patient choice and competition) No2 regulations 2013, Regulation 6 it states that commissioners are prohibited from awarding a contract for NHS Healthcare Services where conflicts, or potential conflicts, between the interests involved in commissioning such services and the interests in providing them affect or appear to affect the integrity of the award of that contract. In such circumstances all members of the Committee will be asked to declare any interests in accordance with the CCG's Joint Standards of Business Conduct policy which are supported by the NHSE Conflict of Interest revised statutory guidance 2017. These interests include:

- Direct financial interest
- Indirect financial interests
- Non financial personal interests
- Professional duties or responsibilities
- General interests

2.9 Any interests declared will be considered on their merit and recorded – in

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such cases that a member is conflicted and is required to 'step down' from any discussion and decision making quoracy may be affected, therefore clinical members such as the Chief Nursing Officer, Secondary Care Consultant or another member of the GB who may not be conflicted may be asked to attend for this section of the meeting

2.10 Where the Committee receives directions from the Governing Bodies it will ensure actions are carried out through the relevant accountable lead and relevant forum.

2.11 The Governing Bodies remain accountable and where it is not assured that the Committee is discharging its delegated duties, functions and responsibilities efficiently, effectively and economically either Governing Body reserves the right to take back to itself any or all such duties, functions and / or responsibilities, or take other action as it reasonably considers appropriate.

2.12 The Committee will report to the Governing Bodies through the Chief Officer's report on a monthly basis. Programmes of work and assurances will be received from the following in accordance with the forward planner:

- Northern, Eastern, and Western Devon localities and South Devon & Torbay
- Integrated Commissioning Programme Boards
- Clinical Policies Committee
- Executive Team Leads (example CCG wide financial position, performance, corporate governance arrangements, risk assurance)
- Clinical Effectiveness and Medicines Optimisation Programme Leads

3. Responsibilities

3.1 The Committee will support the CCG Governing Bodies to deliver its statutory duties as a commissioner and in doing so ensure that high quality safe NHS care is available to meet the healthcare needs of the population of both CCGs within the resources available. In conducting its functions the committee will ensure that the care and safety of patients remains the highest priority. The Strategic Leadership Committee will achieve this purpose by undertaking the following overarching functions:

3.1 Strategic Planning and Strategic Commissioning:

- Work together on strategic matters to a common purpose – assuring and advising the Governing bodies that commissioning decisions are consistent with the overall strategies set by them and informing them of the development of commissioning strategies, strategic priorities and relevant day to day clinical commissioning issues;
- Oversee the achievement and management of the CCG's strategic priorities and operational plan as defined and approved by the Governing Bodies;
- Agree on the steps of the planning and commissioning process which are common to all localities;

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- Act as the forum for discussion and agreement for CCG-wide functions. This will from time to time include task and finish groups on behalf of the CCGs
- Acknowledge constraints and freedom of manoeuvre in strategic matters
- Make recommendations to the Governing Bodies about issues of strategic concern or on those issues sitting outside its scope of decision making and limits of authority.
- Make clinical commissioning decisions on behalf of the Governing Bodies, within the agreed scope of decision-making and financial delegated limits of authority
- Report to the Governing Bodies management of procurement discussions and decisions in a Part 2 meeting where these are required and adhere to these terms of reference.
- Management of procurement processes

3.2 Clinical engagement & Leadership

- Working actively to promote the CCG's membership model and the voice and influence of member practices and patients.
- To act as an interface between the Governing Bodies and the Commissioning Localities.
- Ensure that the commissioning localities:
 - meet all contractual, legal and regulatory requirements
 - have robust operational clinical / management requirements in place to ensure high quality governance and financial sustainability
 - have in place systems & processes to manage operational and strategic risks

3.3 Performance Management

- To monitor ongoing compliance with statutory duties, standards, targets and other obligations, and agree actions and responsibilities to address shortcomings or development requirements identified
- To ensure the CCGs continue to comply with the authorisation domains for its CCG status, and agree to monitor action plans to address weaknesses in compliance or assurance
- To work with relevant forums in the respective CCGs, to agree actions and responsibilities in relation to key performance issues escalated from assurance meetings locally or nationally.
- Maintain oversight of the performance of main providers.
- Maintain oversight of the organisations financial position.
- Ensure the organisation has access to the capacity and capability it needs to deliver its functions. This will include the management of the contract for commissioning support services.

3.4 Corporate Governance

- To develop and own the assurance framework and action plan, providing updates to the Governing Bodies in line with the forward planner and other appropriate forums.
- To seek update and assurances from the relevant director in relation to corporate and governance functions:

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- Corporate calendar
- GB and Committee Forward planners
- Assurance Framework
- EPRR, incident response business continuity
- CCG Policy status
- Legal framework and claims
- Information governance toolkit and associated acts
- Equality delivery plan *overseen by Nursing and Quality team
- Sustainability plans * overseen by finance/primary care
- Development and implementation of the accommodation strategy * overseen by primary care

3.5 Human Resources

- Ensure the CCGs have access to the capacity and capability it needs to deliver its functions
- To oversee development & implementation of the organisational development plan
- To monitor compliance with the policy on staff appraisal and ensure that effective actions are being taken to meet corporate objectives.
- To oversee the work of the HR sub-groups

3.6 Communications and patient experience

- To oversee the development & implementation of the communication and engagement strategy
- To ensure compliance with section 14Z of the Health and Social Care Act 2012
- To work with relevant CCG forums to develop draft consultation documents for final approval from the Governing Bodies.

3.7 Information Management and Technology (IM&T)

To seek update and assurances from the relevant director in relation to IM&T in line with the forward planner:

- Development and implementation of IM&T policies and IT continuity plans
- Regular reports with regards general IM&T, GPIT and digital roadmap
- To keep the CCGs informed of any changes in relation to IT security legislation, NHS Mail or Cyber security

4. Membership

The membership of the Strategic Leadership Committee shall be:

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| <ul style="list-style-type: none"> ▪ Accountable Officer, CCGs (Chair) ▪ Deputy Accountable Officer / Director of Commissioning, CCGs ▪ Chief Finance Officer, CCGs ▪ Chief Nursing Officer, CCGs |
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- Director of Strategy, CCGs
 - Directors with responsibility for Governance, IM&T, HR and Communications
 - Clinical Chair, NEW Devon CCG
 - Clinical Chair, SDTCCG
 - Locality GB GP Lead – South Devon and Torbay , SDTCCG
 - Clinical Locality Chair - Northern Locality, NEW Devon CCG
 - Clinical Locality Chair - Eastern Locality, NEW Devon CCG
 - Clinical Locality Chair - Western Locality, NEW Devon CCG
 - Strategic Director for People, Plymouth City Council*
 - Director of Adult Services, Torbay Council*
 - Chief Officer for Adult Care & Health, Devon County Council*
- * - *joint commissioning role*

Note: When a committee member is unable to attend, a nominated formal deputy with sufficient authority must attend in their place. Deputies will have the decision making and voting rights of the person he/she is representing.

Other senior officers, both internal or external to the CCGs, will be invited as determined by the agenda, and will be attendees without any voting right.

5. Quorum

A quorum will be the Accountable Officer or in their absence the deputising chair; 2 clinical members and 2 Executive Directors.

If the Committee Chair is absent then the members of the Committee will select a chair for that meeting from the Members present – this decision must be overseen with governance considerations, of particular note the Chair needs to be representative of both CCGs.

A decision put to a vote at the meeting shall be determined by a majority of the votes of members present. In the case of an equal vote, the Chair of the Committee shall have a second and casting vote.

Invited members, or those in attendance to the Committee do not have the right to vote.

6. Frequency of Meetings

The Committee will meet no less than monthly.

The Committee has agreed that in the interest of expediency or when there is a need of an extraordinary meeting, and/or few items are to be discussed, that business of the committee can be conducted by e-mail and the actions/decision will be recorded by the Administrator for purposes of transparency and recording. Where a discussion is required, all members must respond, and the administrator

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will oversee this to ensure that all members are accounted for.

7. Reporting arrangements

The Committee shall report formally to the CCGs Governing Body Meetings in Common on its proceedings after each approved meeting on all matters within its duties and responsibilities. The report shall be presented to the public meeting of each of 'the CCGs' Governing Body Meetings in common. The Committee shall make recommendations to 'the CCGs' Governing Body Meetings in Common on any area within its remit where action or improvement is needed.

Minutes and reports of the meetings will be produced and held by the Administrator of the Committee, accessible to the Chair and governance. Extracts from Minutes will be made public as appropriate under the Freedom of Information Act.

8. Conduct of the Committee

The Committee shall conduct its business in accordance with national guidance, relevant codes of practice including the Nolan Principles.

Members of the committee will review their declaration of interests as presented in the papers, and the administrator will record any conflicts or updates in the minutes. Should any conflicts be presented on the day of the committee, it will be for the Chair to make a formal decision as to whether that committee member or attendee can participate in discussion, but not vote, or whether they leave the meeting for that item. If a member feels compromised by any agenda item they should declare a conflict of interest and leave for that agenda item.

The membership shall observe the highest standards of propriety involving impartiality, integrity and objectivity in relation to the stewardship of public funds and the management of the bodies concerned.

The membership shall maximise value for money through ensuring that services are delivered in the most efficient and economical way, within available resources, and with independent validation of performance achieved wherever practicable.

9. Risk Reporting

Where timeliness is of the essence in managing a significant risk or issue, the Chair of the Committee will be informed of an issue by the quickest possible means (e.g. verbally) and this will be acted upon in accordance with the risk management escalation process of each of 'the CCGs'.

10. Statutory Functions, Committee Oversight and KPIs (Internal

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Monitoring)

The Committee shall act in accordance with each of 'the CCGs' scheme of reservation and delegation to ensure constitutional compliance, any deviation from this must be brought to the attention of the governance team.

11. Administration

The Committee will be formally minuted and a Chairs summary report presented to the Governing Body through the Accountable/Chief Officer. Agendas and papers will be available five working days before the meeting is scheduled to take place. A formal attendance and action and decisions log will be held and reported to each meeting.

12. Review

An annual effectiveness review will be undertaken by the Head of Governance as good governance practice and to ensure compliance with the annual governance statement of internal control.

These Terms of Reference will be reviewed on an annual basis or sooner if required through the Head of Governance with recommendations made to each of 'the CCGs' Governing Bodies for approval.

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