

Terms of reference – NHS Stockport CCG Primary Care Commissioning Committee

Introduction

1. Simon Stevens, the Chief Executive of NHS England, announced on 1 May 2014 that NHS England was inviting CCGs to expand their role in primary care commissioning and to submit expressions of interest setting out the CCG's preference for how it would like to exercise expanded primary medical care commissioning functions. One option available was that NHS England would delegate the exercise of certain specified primary care commissioning functions to a CCG.
2. In accordance with its statutory powers under section 13Z of the National Health Service Act 2006 (as amended), NHS England has delegated the exercise of the functions specified in Schedule 2 to these Terms of Reference to NHS Stockport CCG. The delegation is set out in Schedule 1.
3. The CCG has established the NHS Stockport CCG Primary Care Commissioning Committee ("Committee"). The Committee will function as a corporate decision-making body for the management of the delegated functions and the exercise of the delegated powers.
4. It is a committee comprising representatives of the following organisations:
 - NHS Stockport Clinical Commissioning Group
 - Stockport Healthwatch -non-voting
 - Stockport Metropolitan Borough Council (via Health and Wellbeing Board) – non voting
 - NHS England – non voting

Statutory Framework

5. NHS England has delegated to the CCG authority to exercise the primary care commissioning functions set out in Schedule 2 in accordance with section 13Z of the NHS Act.
6. Arrangements made under section 13Z may be on such terms and conditions (including terms as to payment) as may be agreed between the Board and the CCG.

7. Arrangements made under section 13Z do not affect the liability of NHS England for the exercise of any of its functions. However, the CCG acknowledges that in exercising its functions (including those delegated to it), it must comply with the statutory duties set out in Chapter A2 of the NHS Act and including:
 - a) Management of conflicts of interest (section 14O);
 - b) Duty to promote the NHS Constitution (section 14P);
 - c) Duty to exercise its functions effectively, efficiently and economically (section 14Q);
 - d) Duty as to improvement in quality of services (section 14R);
 - e) Duty in relation to quality of primary medical services (section 14S);
 - f) Duties as to reducing inequalities (section 14T);
 - g) Duty to promote the involvement of each patient (section 14U);
 - h) Duty as to patient choice (section 14V);
 - i) Duty as to promoting integration (section 14Z1);
 - j) Public involvement and consultation (section 14Z2).

8. The CCG will also need to specifically, in respect of the delegated functions from NHS England, exercise those in accordance with the relevant provisions of section 13 of the NHS Act
 - Duty to have regard to impact on services in certain areas (Section 13O)
 - Duty as respects variation in provision of health services (Section 13P)

9. The Committee is established as a committee of the Governing Body of NHS Stockport CCG in accordance with Schedule 1A of the “NHS Act”.

10. The members acknowledge that the Committee is subject to any directions made by NHS England or by the Secretary of State.

Role of the Committee

11. The Committee has been established in accordance with the above statutory provisions to enable the members to make collective decisions on the review, planning and procurement of primary care services in Stockport, under delegated authority from NHS England.
12. In performing its role the Committee will exercise its management of the functions in accordance with the agreement entered into between NHS England and NHS Stockport CCG, which will sit alongside the delegation and terms of reference.
13. The functions of the Committee are undertaken in the context of a desire to promote increased co-commissioning to increase quality, efficiency, productivity and value for money and to remove administrative barriers.
14. The role of the Committee shall be to carry out the functions relating to the commissioning of primary medical services under section 83 of the NHS Act.
15. This includes the following:
 - 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).
16. The CCG will also carry out the following activities:

- a) To plan, including needs assessment, primary [medical] care services in Stockport
- b) To undertake reviews of primary [medical] care services in Stockport
- c) To co-ordinate a common approach to the commissioning of primary care services generally;
- d) To manage the budget for commissioning of primary [medical] care services in Stockport
- e) To coordinate and oversee a common approach to the management of primary care estates

Geographical Coverage

17. The Committee will comprise the area covered by NHS Stockport CCG as defined within its Constitution.

Membership

18. The Committee shall consist of:

- The Lay Member with responsibility for Patient and Public Participation
- The Lay Member for Primary Care
- The Nurse Member of the Governing Body
- The Chief Operating Officer
- The Chief Finance Officer
- A Locality Council Committee Chair or Vice-chair
- Deputy Director of Public Health
- Chief Clinical Officer
- Clinical Director General Practice Development

19. The Chair of the Committee shall be the Lay Member for Primary Care

20. The Vice Chair of the Committee shall be the Lay Member With responsibility for Patient and Public Participation.

21. **The following will have a standing invitation to attend the meetings of this Committee in a non-voting capacity:**

- A Representative of the Stockport HealthWatch
- A Representative of the Stockport Health and Wellbeing Board on behalf the Local Authority
- A representative of NHS England

Meetings and Voting

22. The Committee will operate in accordance with the CCG's Standing Orders. The Board Secretary and Head of Governance to the Committee will be responsible for giving notice of meetings. This will be accompanied by an agenda and supporting papers and sent to each member representative no later than 7 days before the date of the meeting. When the Chair of the Committee deems it necessary in light of the urgent circumstances to call a meeting at short notice, the notice period shall be such as s/he shall specify.
23. GPs appointed to the Committee should not have voting rights in order to ensure conflicts of interest are managed effectively. This does not preclude GPs on the Committee from taking part in strategic discussions on primary care provided that conflicts of interest are appropriately managed.
24. Each remaining member of the Committee shall have one vote. The Committee shall reach decisions by a simple majority of members present, but with the Chair having a second and casting vote, if necessary. However, the aim of the Committee will be to achieve consensus decision-making wherever possible.
25. Where an urgent decision is required the provisions existing within the Constitution will be applied in order to discharge the functions of the Committee.

Quorum

24. The quorum for the Committee shall be one third of the Committee Membership and must include one Lay Member and one Clinical Member of the Committee.
25. If the meeting is not quorate within thirty minutes of its planned start, the Chair of the meeting must decide to adjourn the meeting or to proceed and ensure all decisions are ratified at the next meeting.

Frequency of meetings

26. The Committee shall meet no less than four times a year. A meeting of the Committee can be called by any member in liaison with the Chair, with seven days' notice given. Papers will be distributed to members no later than seven days before the meeting.
27. Meetings of the Committee shall:
 - a) be held in public, subject to the application of 23(b);
 - b) the 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.

28. Members of the Committee have a collective responsibility for the operation of the Committee. They will participate in discussion, review evidence and provide objective expert input to the best of their knowledge and ability, and endeavour to reach a collective view.
29. The Committee may delegate tasks to such individuals, sub-committees or individual members as it shall see fit, provided that any such delegations are consistent with the parties' relevant governance arrangements, are recorded in a scheme of delegation, are governed by terms of reference as appropriate and reflect appropriate arrangements for the management of conflicts of interest..
30. The Committee may call additional experts to attend meetings on an ad hoc basis to inform discussions.
31. Members of the Committee shall respect confidentiality requirements as set out in the CCG's Constitution.
32. The Committee will present its minutes to the Greater Manchester Area Team of NHS England and report to the governing body of NHS Stockport CCG each month quarterly for information, including the minutes of any sub-committees to which responsibilities are delegated under paragraph 27 above.
33. The CCG will also comply with any reporting requirements set out in its constitution.
34. It is envisaged that these Terms of Reference will be reviewed from time to time, reflecting experience of the Committee in fulfilling its functions. NHS England may also issue revised model terms of reference from time to time.

Accountability of the Committee

35. The membership of the CCG has established a Governing Body in order to discharge its statutory functions. The Committee is accountable to the Governing Body. Membership of the Governing Body is representative of the membership through the elected Locality Chairs and through the appointment of Clinical Executive Directors and the Accountable Officer.
36. Appropriate consultation with patients and the general public is undertaken through the CCG's Patient Panel and in line with the national and locally adopted guidance

Procurement of Agreed Services

37. The CCG will make procurement decisions as relevant to the exercise of its delegated authority and in accordance with the detailed arrangements regarding procurement set out in the delegation agreement.

Decisions

38. The Committee will make decisions within the bounds of its remit.

39.The decisions of the Committee shall be binding on NHS England and NHS Stockport CCG.

40.The Committee will produce an executive summary report which will be presented to the Greater Manchester Team of NHS England and the governing body of NHS Stockport CCG quarterly for information.

Schedule 1 – Delegation as listed within the Body of the Terms of Reference

Schedule 2 - List of Members as included in the Body of the Terms of Reference.