



Bristol, North Somerset and South Gloucestershire
Clinical Commissioning Group
Commissioning Executive
Terms of Reference

Version Control		
Version	Date	Consultation
v1	11/04/2019	Commissioning Executive
v2	07/05/2019	Governing Body

Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group

Commissioning Executive

Terms of Reference

1. Introduction

The Commissioning Executive is a Committee of the Bristol, North Somerset and South Gloucestershire (BNSSG) Clinical Commissioning Group (CCG) and is established in accordance with the constitution, scheme of delegation, standing orders and prime financial policies of the group. These terms of reference set out the membership, remit, authority, responsibilities and reporting arrangements of the Committee.

This Committee has no executive powers other than those specifically delegated in these Terms of Reference.

The Committee is authorised by the Governing Body to act within its terms of reference. All members and employees of the group are directed to co-operate with any request made by the Committee.

2. Remit and Responsibilities of the Committee

The Committee shall carry out the following duties on behalf of the Governing Body:

- Development of the CCG's Commissioning Strategy and recommendation to the Governing Body
- Development of the CCG's Operational Commissioning Plan and recommendation to the Governing Body
- Development of the Digital Transformation Strategy and recommendation to the Governing Body
- Recommends to Governing Body the implementation plan to deliver the Digital Transformation Strategy in line with the local digital roadmap agreed through the Sustainability and Transformation Plan (STP)
- Considers the annual procurement strategy and plans for the procurement of new services and disinvestment from existing services arising from the commissioning plan, making recommendations to the Governing Body where necessary
- Recommends savings and investment plans arising in year to the Governing Body where these exceed delegated limits.
- Recommends to Governing Body commissioning intentions.
- Approval of commissioning policies, recommending these to the Governing Body where these might be contentious.
- Recommends to Governing Body individual funding policies and procedures
- Reviews provider performance against contracts taking action where required and monitoring improvement

- Considers new contracting models to deliver the CCG's ambition and that of the STP, in line with the Five Year Forward View.

3. Membership

The Committee will comprise:

- Clinical Chair
- Clinical Commissioning Area Leads (3)
- Clinical Corporate Leads for:
 - Quality
 - Prescribing
 - Contracts and Finance
 - Primary Care Provider Development
 - Digital
- Clinical Care Pathway Leads for;
 - Children's and Maternity
 - Planned Care
 - Unplanned Care
 - Integrated Care
 - Specialised Care
 - Mental Health
- Chief Executive Officer
- Chief Finance Officer
- Director of Nursing & Quality
- Director of Commissioning
- Director of Transformation
- Medical Director – Commissioning and Primary Care
- Medical Director - Clinical Effectiveness
- Area Director (North Somerset)
- Area Director (Bristol)
- Area Director (South Gloucestershire)
- Clinical Leadership Development Lead
- Independent Secondary Care Clinician
- A representative Director of Social Care to be identified by the Local Authorities
- A representative Director of Public Health to be identified by the Local Authorities

Members of the Committee can send a nominated deputy to the meeting. These individuals must be able to operate with full authority over any issue arising at the meeting.

Other persons may be invited to attend to enable the Committee to discharge its functions effectively. The Committee may also invite guests to attend to present information and/or provide the expertise necessary for the Committee to fulfil its responsibilities.

Chairs of the BNSSG Quality Committee and BNSSG Strategic Finance Committee to receive the committee meeting papers.

4. Chair

The meeting will be chaired by the Clinical Chair. A Vice Chair will be selected on an annual basis by the Committee from the clinical members.

5. Quorum and Voting

The meeting will be quorate with the attendance of the following persons:

- 5 clinical members
- Four other members to include either the Chief Executive Officer or the Chief Financial Officer (or their deputies)

The aim will be to reach consensus without the need to resort to a vote. 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.

6. Administration

A named administrator will be responsible for the provision of administrative support to the Committee and they will ensure that minutes of the meeting are accurately produced and agreed with members.

The Director of Commissioning will be responsible for supporting the Chair in the management of the Committee and in drafting the agenda, forward planner and specifying content of reports. They will work closely with the Director of Transformation to ensure that there is a balance of strategic and operational commissioning agenda items.

Except in the event of urgent meetings, a minimum of ten days' notice of a meeting of the Committee will normally be provided confirming the venue, time and date together with an agenda of items to be discussed. Supporting papers will normally be issued 5 working days before the meeting.

All members or attendees at the Committee are required to declare any potential or actual conflict of interest before items are discussed. There will be a standing agenda item at the beginning of each meeting for this purpose. Even if an interest has been recorded in the register of interests, it must still be declared in meetings where matters relating to that interest are discussed. Declarations of interest will be recorded in minutes of meetings.

The Chair of the meeting, with support of the Director of Commissioning and, if required, the Corporate Secretary and/or Conflicts of Interest Guardian, will proactively consider ahead of meetings what conflicts are likely to arise and how they should be managed, including taking steps to ensure that supporting papers for particular agenda items of private sessions/meetings are not sent to conflicted individuals in advance of the meeting where relevant.

The Committee is authorised by the Governing Body to investigate any activity within its terms of reference.

7. Frequency and notice of meetings

The Committee shall meet at least 10 times per year. Any two members of the Committee can request an additional meeting which should be convened within 21 days.

8. Reporting arrangements

The minutes of meetings of the Committee shall be formally recorded and submitted to the Governing Body. These minutes should be supported by a summary of decisions made and recommendations from the Committee. The Chair of the Committee shall draw to the attention of the Governing Body issues that require disclosure or which require Executive action.

The following groups will report to this Committee:

- The Area/Locality Leadership Groups (through the Clinical Commissioning area leads)
- Clinical Policy Review Group
- Prescribing Medicines Optimisation Committee (AMOC) which receives reports from BNSSG Formulary Groups

The Committee will receive reports relevant to its responsibilities from any other group or working group as appropriate.

9. Review of the Committee's Performance

The Committee will undertake a review of its effectiveness on an annual basis and report this to the Governing Body. It will use this exercise to inform the review of its Terms of Reference.

10. Approval and Review

These terms of reference will be reviewed on an annual basis or sooner if required with recommendations made to BNSSG Governing Body for approval.

Review History

Version	Reviewed and Approved by:	Date Approved	Review date
v1	Governing Body	May 2018	May 2019