

Governance Handbook 2020-21

FINAL DRAFT
4 March 2020

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Review date:	April 2022
Supersedes:	Governance Handbook Version 22.02
Description:	The handbook has been developed to reflect the legal requirements, responsibilities, accountabilities and duties for all South East London CCG members, Governing Body and committee members and employees.
Audience:	All members, Governing Body and committee members and employees of NHS South East London CCG

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1. Introduction

Clinical Commissioning Groups were established under the Health and Social Care Act 2012 (“the 2012 Act”). CCGs are statutory bodies which have the function of commissioning certain health services for their local communities under the National Health Service Act 2006. The duties of CCGs to commission certain health services are set out in section 3 of the 2006 Act, as amended by section 13 of the 2012 Act, and the regulations made under that provision.

CCGs are clinically led membership organisations. The NHS South East London CCG is constituted of the general practices within the London boroughs of Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark.

Under the provision of the above referenced Acts, members of the CCG are responsible for determining the governance arrangements of the organisation and these are set out in detail in the [CCG’s constitution](#). The CCG’s constitution was approved by the membership and by NHS England / Improvement on 1st April 2020.

This governance handbook should be read alongside the CCG’s constitution. Care has been taken not to duplicate the contents of the constitution in the handbook and key sections are referenced for clarity.

1.1 Purpose

The governance handbook sets out full details of the governance arrangements for the CCG where they are not included within the CCG’s constitution. The handbook includes details of the CCG’s governance structure; membership; key committee terms of reference, details of governance processes and protocols. These processes and policies have been established within the CCG to ensure that the organisation complies with statutory and corporate obligations in an efficient and effective way.

The content of the handbook is based on the requirements included in the [supporting guidance](#) issued by NHS England on the New CCG Model Constitution.

1.2 Accountability and Authority

The CCG is accountable to NHS England for the exercise of its statutory functions. In this undertaking the membership may grant authority to act on its behalf to any of the following:

- Its member practices
- Its Governing Body
- Its employees
- Any prime committee or sub-committee of the organisation.

The extent of the authority to act by the respective bodies and individuals depends on the powers delegated to them by the membership as expressed through:

- The CCG’s Scheme of Reservation and Delegation (SoRD)
- The CCG Standing Financial Instructions
- The CCG’s Standing Orders
- The CCG Schedule of Matters Delegated to Officers.

2. The CCG's governance structure

The CCG's governance structure is designed to facilitate the clear and effective management of the organisation and to enable the CCG to achieve the delivery of both mandatory and elective objectives. The CCG's governance arrangements set out the way the organisation is directed and controlled. It makes clear where and by whom decisions can be considered and made and sets out the arrangements for scrutiny and oversight of those decisions.

Although the CCG is constituted as a membership organisation of its member practices, the CCG's constitution specifies that the Governing Body should act as the organisation's board and take responsibility for the full remit of statutory requirements and operational activities of the CCG.

In line with the constitution, the membership has in effect elected to mandate a Governing Body (to which it elects representatives to serve as clinical leaders) to lead the organisation. The membership holds the Governing Body to account for delivery of its mandate via the Council of Members' forum.

The Governing Body has established several prime and sub-committees, each with a particular area of responsibility, set of objectives and delegated authority to undertake actions and make decisions as per the CCG's SoRD. A number of committees of the CCG are required under statute (Remuneration, Audit and Primary Care Commissioning) with others set-up by the Governing Body for the purpose of ensuring the CCG's business is completed in an efficient and effective way with the right individuals able to input to specified activities.

The CCG's governance structure is appended to this document; see Appendix 1.

2.1. Council of Members

The Council of Members is constituted of healthcare professionals from each of the CCG's member practices. Members choose one healthcare professional per practice (and a deputy) as outlined in the CCG's constitution and this person will represent their member practice at Council of Members' meetings.

The membership have reserved the following areas, shown in section 3.3 of the [CCG's constitution](#), to themselves, with the remainder delegated to the CCG's Governing Body, committees or individuals as outlined in the SORD:

- Approval of the group's overarching scheme of reservation and delegation.
- Consideration and approval of applications to NHS England on any matter concerning changes to the CCG's constitution, including terms of reference for the CCG's governing body the overarching scheme of reservation and delegated powers, arrangements for taking urgent decisions, standing orders and standing financial instructions.
- Agreeing new additions to membership or removals from the membership of the CCG and expanding the area covered by the CCG.
- Approving any changes to the CCG's prime committee structure as defined in this constitution.
- Approving the arrangements for: identifying practice members to represent practices in matters concerning the work of the CCG; and appointing GP leaders to represent the CCG's membership on the governing body through selection/election.
- Agreeing the vision, values and overall strategic direction of the CCG.

- Approving any changes to the CCG's operating structure that require sharing across STP / ICS boundaries.
- Receiving the annual operating plan, confirming its adherence to national and local mandates and operating frameworks
- Confirming the annual commissioning plan is consistent with:
 - SEL and Borough commissioning intentions
 - Nationally mandated requirements of the CCG
 - The budget available for the CCG and NHS business rules

In addition to the meeting as a single Council of Members for south east London, member practices in each borough will be invited to join borough membership divisional fora which will be run with the aim of engaging practices and enabling members in a borough to review and discuss items of business of the SEL Council of Members in advance of any decisions required of it. The borough-based fora do not form part of the organisation's SoRD and are not decision making.

Full details on the role of the Council of Members; its membership and the process for convening meetings is detailed in the CCG's Constitution.

The list of CCG member practices and their nominated representatives and deputy representatives to the CCG's Council of Members is included as Appendix 2 of this handbook].

2.2. The Governing Body

The CCG's Governing Body has statutory responsibility for ensuring that the CCG has appropriate arrangements in place to exercise its functions effectively, efficiently and economically and in accordance with the CCG's principles of good governance. It also assumes a specific responsibility for determining the remuneration, fees and other allowances payable to employees or other persons providing services to the CCG and the allowances payable under any pension scheme established. (with recommendation from the remuneration committee as appropriate).

The CCG's membership has delegated additional functions to the Governing Body, which are detailed in the CCG's Scheme of Reservation and Delegation, Appendix 5 of the CCG's constitution.

Full details of the structure and membership of the CCG's Governing Body as well as its detailed procedures are set out in sections 5.4 to 5.7 of the CCG's constitution; the Standing Orders (Appendix 3 of the constitution) and Standing Financial Instructions (Appendix 4 of the constitution).

2.3. CCG Governing Body Prime Committees

The CCG operates with six prime committees. The Audit Committee, Primary Care Commissioning Committee and Remuneration Committee are required under statute and their terms of reference are incorporated directly into the CCG's constitution. The three other prime committees: the Integrated Governance & Performance Committee, the Commissioning Strategy Committee and the Borough Based Boards (one in each borough) have been established by the Governing Body to enable it to undertake its roles in respect of internal assurance; strategic planning and development and borough involvement & engagement.

A summary of the role and purpose of all the CCG's committees is provided below with terms of reference included as appendices where these are not already included as part of the CCG's constitution.

2.3.1. Integrated Governance and Performance Committee

The overarching duty of the committee is to act to oversee governance in an integrated way, where all aspects of commissioning and provider activities are scrutinised using an approach that considers finance, quality, safety, QIPP, programme delivery and performance together.

The committee undertakes assurance of the CCG and its main contracted providers. In this the committee is responsible for the review of the CCG's arrangements and operational activities relating to emergency planning and business continuity; safeguarding; information governance; health and safety and equality and diversity management.

It assumes a further responsibility for monitoring of the CCG's risk management and Board Assurance Framework and is also responsible for the approval of organisational policies related both to commissioning and corporate activities.

The committee reports regularly on its assessment on these activities to the Governing Body and will escalate any high-risk issues and concerns and instances where insufficient assurance has been received.

The IG&P Committee terms of reference are attached as Appendix 3.

2.3.2. Commissioning Strategy Committee (CSC)

The committee oversees the development and implementation of the CCG's strategic plans and commissioning intentions, taking into account information received from borough-based boards and the CCG's Council of Members on commissioning strategy and priorities. They will also review and approve business cases in line with delegated authority from the Governing Body.

The committee plays a role in scrutinising the on-going efficacy of commissioned services and where service developments are identified will work with borough-based boards and member practices to implement plans and undertake designated actions in localities. The committee receives reports from strategic programme boards charged with overseeing major commissioning programmes.

The CSC Committee terms of reference are attached as Appendix 4.

2.3.3. Borough Based Boards

These boards will operate with delegated responsibility from the CCG Governing Body for delivery of local system transformation and the commissioning and on-going management of delegated areas of the CCG's business where this is best suited to local management and delivery.

The borough-based boards terms of reference are attached as Appendix 5.

2.3.4. Primary Care Commissioning Committee

The Primary Care Commissioning Committee makes collective decisions on the review, planning and procurement of primary care services in south east London, under delegated authority from NHS England & NHS Improvement.

The PCCC terms of reference are incorporated within the CCG's Constitution.

2.3.5. Remuneration Committee

The committee shall determine the remuneration, fees and allowances payable to the employees of the clinical commissioning group or to other persons providing services to it. It will make recommendations to a private session of the Governing Body regarding the adoption of standard NHS pay and remuneration frameworks and will additionally advise the Governing Body about appropriate remuneration, the appointment, termination and terms and conditions of the Accountable Officer, Executive Directors, Clinical Leads and other senior managers with locally determined contracts described by the NHS Very Senior Managers Pay Framework.

The Remuneration Committee terms of reference are incorporated within the CCG's Constitution

2.3.6. Audit Committee

The Audit Committee provides the Governing Body with an independent and objective view of the CCG's financial systems, financial information and compliance with laws, regulations and directions governing the CCG in so far as they relate to finance, and assurance on risk and fraud issues;

The Audit Committee terms of reference are incorporated within the CCG's Constitution

2.4. Other Committees of the CCG Governing Body

2.4.1. Engagement Assurance Committee

It is good practice for the CCG's Governing Body to be routinely appraised of the efficacy of the CCG's patient engagement work. To do this the Engagement Assurance Committee has been established as a committee of the Governing Body.

The committee is responsible for monitoring, advising and providing assurance on patient engagement ensuring statutory duties are met. The committee works with partners to ensure the CCG contributes to the development of local good practice in the field of patient engagement.

The committee reports directly to the CCG Governing Body on progress in implementing the CCG's engagement plan and will act in an advisory role to highlight any major deviation from the organisation's engagement plans.

The Engagement Assurance Committee terms of reference are attached as Appendix 6.

2.5. Sub-Committees of CCG prime committees

The CCG has established several sub-committees that each report into prime committees (with the exception of the Patient Engagement Assurance Committee, which reports into the Governing Body).

Sub-committees are designed to be smaller expert-led groups each with a narrower remit around a specialist area of CCG business. The sub-committees mainly undertake a

coordinating role to ensure that operational activities within its remit are completed effectively and assurance on these activities are provided via the prime committees to the Governing Body.

Sub-committees complete a regular committee report into a CCG prime committee for the purpose of escalating issues; recommending decisions in-line with the CCG's schedule of matters delegated to officers and scheme of reservation and delegation and/or providing assurance on its activities.

2.5.1. Quality and Safety Sub-Committee

This committee provides the CCG with the assurance that quality and safety is maintained and continually improved within service providers and provides input into service specifications. The sub-committee will receive and review reports of trust CQRG meetings and provide assurance to the IG&P committee on the efficacy of quality and safety monitoring processes.

The Quality and Safety Sub-Committee terms of reference are attached as Appendix 7.

2.5.2. Medicines Optimisation Sub-Committee

This committee has responsibility for providing clinically led expert advice and decisions under delegation for matters related to drugs and prescribing on behalf of the CCG. The sub-committee will agree prescribing guidelines and protocols and support the CCG finance team on planning annual prescribing budgets

The Medicines Optimisation Sub-Committee terms of reference are attached as Appendix 8.

2.5.3. Information Governance Sub-Committee

This committee is responsible for ensuring that information held and / or processed by the CCG is efficiently managed in line with legal requirements and best practice. The sub-committee will ensure that appropriate policies and procedures are in place and adhered to and that the CCG operates a robust governance framework for information management.

The Information Governance Sub-Committee terms of reference are attached as Appendix 9

2.5.4. Safeguarding Sub-Committee

The purpose of the safeguarding sub-committee is:

- To ensure that the CCG fulfils its statutory responsibilities as outlined in the Care Act 2014; Mental Capacity Act 2005; Children Act 2004; and Working Together to Safeguard Children 2013; Children and Social Work Act 2017, and publication of Working Together to Safeguard Children 2018.
- Promoting the safety and welfare of adults and children with care and support needs across all commissioned and contracted services.
- Promoting the health and wellbeing of looked after children in accordance with statutory guidance.
- To provide representation on multi-agency safeguarding boards and partnerships across south east London boroughs.

- To monitor resulting actions following serious case reviews, independent management reviews and other relevant safeguarding incidents and to promote the dissemination of learning.
- To develop, review and approve policies and procedures relating to safeguarding practice.

The Safeguarding Sub-Committee terms of reference are attached as Appendix 10.

2.5.5. Auditor Panel

The Local Audit and Accountability Act 2014 specifies that all local public bodies covered by the legislation must have auditor panels to advise on the selection, appointment and removal of external auditors, and on maintaining an independent relationship with them.

The auditor panel's key role is to check that:

- The procurement and selection of external auditors are appropriate
- The relationship and communications with the external auditors are professional
- Conflicts of interest are effectively dealt with.
- Establishing and monitoring the CCG's policy on the awarding of non-audit services.

The Auditor Panel terms of reference are attached as Appendix 11.

2.5.6. Conflicts of Interest Panel

The panel will consider all issues related to the identification and management of conflicts of interest in the course of the business of the CCG. The panel's role is to:

- Ensure that any actual or perceived conflict of interest to the business of the CCG is managed effectively in an open and transparent way
- Recommend to the relevant committee the most appropriate manner by which to manage the decision-making process where a conflict has been identified. Responsibility for implementing the decision remains with the relevant committee.

The Conflict of Interest Panel terms of reference are attached as Appendix 12.

3. Operational management of the governance structure

3.1. Delegation of authority under the SoRD

The CCG will act in accordance with the principle of transparency in respect of all its decisions. All decisions, whether taken in a committee under delegation or by the CCG Governing Body, will be reported in public and included in Governing Body committee reports or other papers.

The part of the CCG's governance structure responsible for decision-making within the organisation is set out in the CCG's scheme of reservation and delegation (SORD). The

SoRD establishes the decisions that are reserved for the membership as a whole and those that are the responsibility of the Governing Body and its committees; individual members and specified postholders and employees.

The CCG's Scheme of Reservation and Delegation is included as Appendix 5 of the CCG's Constitution.

3.2. Standing Orders

The CCG's Standing Orders sets out the arrangements for CCG meetings and the selection and appointment processes for practice member healthcare representatives.

The Standing Orders describe the operational processes in place that govern the CCG's conduct of business through its governance structure. The Standing Orders include procedures for the conduct of CCG business, the appointment to key roles including Governing Body members and procedures to run CCG committee meetings within the CCG.

The CCG's Standing Orders are included as Appendix 3 of the CCG's Constitution.

3.3. Reporting on the activities of prime and sub-committees

All CCG prime committees will report on their activities to the CCG Governing Body.

To do this the designated officer responsible for the administration of the committee will, together with the committee Chair, complete one section of the CCG's prime committee report template to highlight to the Governing Body any actions or decisions taken under delegation; any recommendations on items being proposed for Governing Body decision; and a summary of further activities which the committee has undertaken and the Governing Body should note.

The purpose of this approach is to ensure that decisions are taken in line with the CCG's SoRD, to enable all decisions to be discussed and noted in a transparent way in a public meeting and so that the Governing Body is able to maintain an overview of the activities it has tasked its committees with enacting on its behalf.

The same approach to reporting between sub-committees and prime committees will also operate.

3.4. Conflicts of Interest including gifts and hospitality

CCGs manage conflicts of interest as part of their day-to-day activities. Effective handling of conflicts of interest is crucial to give confidence to patients, taxpayers, healthcare providers and Parliament that CCG commissioning decisions are robust, fair and transparent and offer value for money. An effective approach to identifying and managing conflicts of interest is essential in order to protect healthcare professionals and maintain public trust in the NHS.

The CCG recognises that conflicts of interest are inevitable in commissioning and that it is how we manage them that matters. Section 140 of the National Health Service Act 2006 (as amended by the Health and Social Care Act 2012) sets out the minimum requirements of what CCGs must do in terms of managing conflicts of interest.

The CCG has a policy in place which sets out how the CCG will manage conflicts of interest. It is based on NHS England's guidance [Managing conflicts of interest: revised statutory guidance for CCGs](#) - June 2017.

The policy covers the detailed process and procedures related to the management of conflicts of interests at the CCG; the process for the appropriate declaration of interests, the management of conflicts at CCG meetings, gifts and hospitality and the roles of the CCG Conflict of Interest Panel and duties of the Conflict of Interest Guardian. It also includes the requirements for mandatory training on Col for various post-holders working for the CCG.

The CCG's Conflict of Interest Policy is attached as Appendix 13.

3.5. Risk management

Commissioning health services involves risk. The aim of the CCG's activities in respect of this is not to seek to create a risk-free environment, but rather to create an environment in which risks are considered as a matter of course and appropriately identified and controlled or managed.

The CCG is committed to making risk management a core organisational process and ensuring it becomes an integral part of the CCG's practices and business planning. This is set out in full detail in the CCG's Risk Framework.

A key objective of the framework is to ensure that systems and processes are in place to ensure all risks relating to CCG business are identified and managed through a robust Board Assurance Framework (BAF). BAF items will include corporate, strategic, operational, clinical, financial, information and reputational risks. In addition, the framework is designed to ensure the CCG's audit committee, IG&P committee, CCG Governing Body and any delegated prime committees are kept suitably informed of significant risks facing SEL CCG and their associated mitigation plans.

The CCG Risk Framework describes risk definitions, committee and individual roles and responsibilities, the processes for the management of risk, recording and monitoring arrangements, the reporting of risks through the governance structure and the matrices to be used for risk-assessment.

The CCG Risk Framework is attached as Appendix 14.

3.6. Financial governance

The CCG's Scheme of Delegation, Standing Orders, Standing Financial Instructions, Schedule of Matters Delegated to Officers and Budget Holders' Handbook set out the detailed financial responsibilities, policies and procedures adopted by the CCG in relation to the management of its finances and governance arrangements. These are each designed to ensure that the management of CCG finances is carried out in accordance with the law, policy and best practice and in order to achieve probity; accuracy; and maximise financial efficiency and value for money.

Compliance with the CCG's Standing Financial Instructions and the above referenced policies is a requirement of all CCG staff and is led on behalf of the organisation by the Chief Finance Officer and overseen by the Audit Committee on behalf of the Governing Body. Any instances of non-compliance with the CCG's financial policies shall be reported to the Chief Finance Officer and considered and recorded at the Audit Committee.

The CCG's Governing Body will approve the organisation's budgetary framework ahead of the new financial year. The budgetary framework sets out the planned use of the CCG resources to cover recurrent and non-recurrent expenditure; cost-pressures; inflation; developments and investments and QIPP.

The Integrated Governance and Performance Committee are responsible for the in-year monitoring of financial performance; value-for-money achieved from investments; and the assurance on the delivery and impact of QIPP programmes. The Chief Financial Officer may also be tasked with reviewing business case proposals before recommending them to the Commissioning Strategy Committee for decision.

The Chief Operating Officer and Chief Finance Officer are responsible for producing the CCG's Annual Report and Annual Accounts respectively, which are to be presented to the Audit Committee for review and approval. Both documents will be published on the CCG's website.

The CCG's Schedule of Matters Delegated to Officers and Budget Holders' Handbook are attached as Appendix 15 and Appendix 16.

3.7. Operating with transparency

The CCG is always committed to operating in an open and transparent way. As such, the CCG will undertake the following activities:

- To run an efficient approach to responding to requests for information, including that covered by Freedom of Information legislation. The CCG aims to respond to 100% of FOI requests within the 20 working days required time period. The Information Governance sub-committee will routinely oversee performance.
- To hold CCG Governing Body, Prime Care Commissioning Committee and Borough Based Board meetings in public. Dates and times of these meetings will be advertised a minimum of one month prior to the meeting, wherever possible, and papers will be made publicly available via the CCG's website. The CCG will allocate time at each Governing Body and Borough Based Board meeting for questions from members of the public.
- Hold an Annual General Meeting for the organisation as an open public meeting. The meeting will review the CCG's achievements and consider the Annual Report and Annual Accounts for the specified year.
- Commit to all employees to abiding by the seven [Nolan Principles of Public Life](#).
- To employ one of its Lay Members as a Freedom to Speak Up Guardian.

3.8. Management of CCG meetings

The CCG's corporate team are responsible for the administration and business support of CCG meetings. Effective operation of the CCG's committees and sub-committees is a critical part of ensuring that the CCG can carry out its business activities in an efficient and effective manner.

The CCG's corporate team will undertake the following activities:

- Developing and maintaining a CCG corporate meetings calendar
- Maintaining a meetings' agenda forward planner / workplan' and lead business planning meetings with the designated directors on a weekly basis
- Book venues and schedule meetings in attendees' diaries
- Complete reviews of draft meeting agendas with meeting chairs prior to the distribution of papers

- Collate and distribute papers and publish online (as required) a minimum of five working days in advance of the meeting.
- Publish papers via the CCG's electronic meeting software.
- Prepare declaration of interest documents for the appropriate meetings and discuss any conflicts with the Chair in advance to agree any proposed action.
- Prepare a list of apologies for absence for the meeting Chair.
- Take minutes of the meeting and have available to the meeting Chair for approval within 2 working days hours. Distribute final draft minutes with the chair's approvals within 5 working days of the meeting.

Team / individuals outside of the CCG corporate team may be required to undertake the above activities for designated CCG meetings as instructed by their director.

3.9. CCG corporate policies

The CCG has several policies and processes in place which govern the way the organisation operates and provide clear guidance to employees to aide them in the completion of their roles and duties. The purpose of CCG policies is to enable the CCG to manage its affairs effectively, efficiently, equitably and in keeping with the requirements of statute and national guidance.

CCG policies are developed and managed by the CCG's corporate, governance and assurance teams, which are led by the Chief Operating Officer. CCG policies are typically approved by the Integrated Governance & Performance Committee, although they may be reviewed by a sub-committee, constituted of experts in the policy area, before IG&P approval (e.g. the Safeguarding Sub-Committee would recommend the Safeguarding Policy).

The process for policy development and approval is outlined in the CCG's Policy and Procedures Management guidance document at Appendix 17, which also includes the template for policies.