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| Meeting Title: Governing Body |  |
| Meeting Date: 28 November 2018 | |
| Report's Sponsoring Governing Body Member: Philip Hewitson | Report Author: Corporate Services Manager |
| 1. Title of Paper: New Model Constitution for Clinical Commissioning Groups | |
| 2. Strategic Objectives supported by this paper: | |
| To create a viable & sustainable organisation, whilst facilitating the development of a different, more innovative culture. | <input checked="" type="checkbox"/> |
| To commission high quality services which will improve the health & wellbeing of the people in Scarborough & Ryedale. | <input type="checkbox"/> |
| To build strong effective relationships with all stakeholders and deliver through effectively engaging with our partners. | <input type="checkbox"/> |
| To support people within the local community by enabling a system of choice & integrated care. | <input type="checkbox"/> |
| To deliver against all national & local priorities including QIPP and work within our financial resources. | <input type="checkbox"/> |
| <p>Executive Summary:</p> <p>Whilst the CCG has updated its own constitution, the model constitution from NHS England has not be revised since CCG's were established Since then a number of changes to the health and social care landscape have taken place.</p> <p>The new model takes in to account the legislative changes and recognises that the pace of change is increasing in many areas and CCGs are finding the task of keeping everything in their constitution up to date to be onerous.</p> <p>The attached report outlines NHS England's expectations in terms of adopting the new constitution and a summary of the main changes.</p> | |
| <p>3. Risks relating to proposals in this paper:</p> <p>None identified</p> | |

4. Summary of any finance / resource implications:

None Identified

5. Any statutory / regulatory / legal / NHS Constitution implications:

Legislation requires that CCGs publish a Constitution containing specific information. The model constitution sets out the minimum requirements that constitutions must contain according to the legislation, as well as including reference to matters that NHS England will expect to see included by way of good practice in governance.

6. Equality Impact Assessment Completed? (Yes/No/Not Relevant):

Not relevant

7. Quality Impact Assessment Completed? (Yes/No/Not Relevant):

Not relevant

8. Any related work with stakeholders or communications plan:

The Council of Clinical Reps will be updated on the New Model Constitution at the December meeting and asked to consider the option to delegate defined amendments (non-material) to the CCG Governing Body for approval.

It is anticipated that any work completed in updating the CCG's Constitution will be done in conjunction with the other two North Yorkshire CCG's to ensure consistency across the area.

9. Recommendations / Action Required

Governing Body to note the briefing regarding the updated constitution

10. Assurance

The Governing Body is responsible for assuring the Council of Clinical Reps that the Constitution is adhered to by the CCG and they are supported in this by the CCG Committees.

Any changes to the constitution will be approved by the Council of Clinical Reps.

For further information please contact:

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New Model Constitution for Clinical Commissioning Groups Briefing

1 Introduction

Legislation requires that CCGs publish a Constitution containing specific information. The model constitution sets out the minimum requirements that constitutions must contain according to the legislation, as well as including reference to matters that NHS England will expect to see included by way of good practice in governance.

The model constitution has not been revised since CCGs were established. Since then a number of changes to the health and social care landscape have taken place.

The new model takes into account the legislative changes and recognises that the pace of change is increasing in many areas and CCGs are finding the task of keeping everything in their constitution up to date to be onerous.

2 Implementation

NHS England is not expecting CCGs to submit any applications to amend their constitution solely as a result of the new model constitution. However NHS England (NHSE) has suggested that CCGs check their constitution against the new model and in particular CCGs working in joint arrangements may wish to compare their arrangements with the new model.

3 Summary of main changes

- Simpler - sections have been removed which were duplications of information elsewhere and other sections have been simplified
- More optional clauses for CCGs to consider if relevant for their own organisation
- Consider publication of a 'Committee's Handbook' which includes Committee Terms of Reference
- Easier to navigate – removal of duplication and more intuitive
- Simpler and faster to update and the process simplified
- Model wording included for legally permitted joint working arrangements

4 Changes relevant to Member Practices

Some changes in the new constitution are particularly relevant for member practices:

- NHS England no longer requires signatures of all member practices, although the CCG will be expected to demonstrate member engagement
- Suggested that only changes which are 'material' will be referred to the whole membership of the CCG for support and internal approval delegated for minor changes to the constitution. This requires agreement from member practices including defining what would be considered 'material' changes. IN these changes CCG's would satisfy themselves annually that members continue to be in support of the constitution.

5 Recommendations

- The Council of Clinical Reps to consider NHSE's new model constitution and summary of amendments provided in this briefing.
- The Council of Clinical Reps to consider the option to delegate defined amendments (non-material) to the CCG Governing Body for approval.