

Title of Report	Governing Body – Committees in Common - with NHS North West Surrey CCG and NHS Surrey Downs CCG	
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Finance Lead sign off	No financial implication	
Conflict of Interest	None	
Governance and reporting- at which other meeting has this paper been discussed	Joint Governing Body OD Workshop (with NHS NW Surrey CCG and NHS Surrey Downs CCG) held on the 15.09.17	Recommendation to move forward with a Governing Bodies “committees in common” governance arrangement.
Freedom of Information	Author considers that no exemption applies:	<input checked="" type="checkbox"/>

Executive Summary:

Key drivers for change have prompted the three Governing Bodies to think about how they can operate more effectively together, whilst ensuring a continued focus on the local priorities which include delivering the ambition of place based integrated care.

The key emerging changes which are having an impact on the commissioning landscape and governance architecture include: the establishment of joint management arrangements; Devolution; the Surrey Heartlands’ Partnership and delivery of the Sustainability and Transformation Plan; and the development of local accountable care systems and partnerships.

A joint Governing Body workshop in September provided the opportunity to revisit the rationale for joint working and to think through the options for streamlining governance arrangements. A preferred recommendation for the three Governing Bodies to meet as a “committees in common” going forward was reached.

This paper seeks formal approval of the preferred option, with a proposed a timeline for implementation which takes into account the requirements for engagement with Membership Councils and application to NHS England for Constitutional amendment, and wider stakeholder engagement. Subject to formal approval being received, the next steps will be to work through the detail of how this arrangement might work in practice (Terms of Reference) and a further workshop in January 2018 is proposed to do this.

Implications:

Health/ CCG strategic objectives	This is in line with the CCGs’ strategic objectives to work in partnership to achieve quality health outcomes for the populations of Surrey Heartlands’ CCGs, underpinned with good governance.
Financial/ Resource	No financial implication, however the direction of travel is to rationalise committee governance arrangements to streamline decision making and thereby release resource capacity across the Surrey Heartlands’ CCG Partnership.
Legal/ Compliance	Health and Social Care Act 2012; Legislative Reform Order which amend section 14Z3 and 14Z9 of the NHS Act 2006 (as amended by the Health and Social Care Act 2012). CCG Constitution.

	Terms of Reference – each Governing Body will be required to delegate powers to the Governing Body committees in common. Legal assurance will be sought on the Terms of Reference.
Equality Analysis	The impact will be assessed for equality considerations.
Patient and Public Engagement	Plan to be developed for Membership and public engagement
Risk (including reputational) and rating	The inherent risk involved in organisational change and transition is being assessed for inclusion on the GBAF.

Recommendation(s):

- (1) **TO APPROVE** the preferred option for the Governing Bodies of NHS Guildford and Waverley CCG, NHS North West Surrey CCG and NHS Surrey Downs CCGs to meet as a “committees in common” from 1st April 2018.
- (2) **Subject to approval, to hold** a further joint Governing Body workshop in January 2018 to take this forward.
- (3) **TO NOTE** the proposed timeline, taking into account the requirements for membership and public engagement, and approval for an application to be made to NHS England for Constitutional amendment.

Next Steps:

Subject to approval of the recommendations:

- (1) To plan for a January 2018 Governing Body workshop.
- (2) Membership engagement and application to NHS England for Constitutional amendment.
- (3) To undertake Equality analysis and wider stakeholder/patient and public engagement
- (4) Points (1) - (3) to inform the drafting of Terms of Reference to describe how this arrangement will work in practice

This paper will also be presented to Governing Bodies of North West Surrey and Surrey Downs CCGs

1. Introduction

- 1.1 The three Surrey Heartlands' CCG Governing Bodies have been considering how they can operate more effectively together, with a careful balance achieved between the areas it makes sense to do together, whilst ensuring continued focus on the delivery of local priorities – in particular, accountable care systems and place based integrated care. This is in the context of significant change taking place across the commissioning landscape and governance architecture

2. Key Drivers and Context for the Proposed Change

- 2.1 The key drivers and context for the proposed change are as follows:

- (i) **Joint management arrangements**, which came into effect in June 2017 with the appointment of a Joint Accountable Officer, Matthew Tait, across the three Surrey Heartlands' CCGs. This has been followed with the establishment of a joint executive leadership team, to take effect from the 1st November 2017.
- (ii) **Surrey Heartlands Devolution Proposal** – which creates the opportunity to support full integration of health and social care across the Surrey Heartlands footprint for the benefit of local residents. It represents a crucial vehicle to deliver the scale and pace of change set out in a five year sustainability and transformation plan, allowing greater accountability in terms of decision making, resource allocation, better public value and delivery of our ambitions to improve health outcomes more quickly. This is underpinned with a signed Trilateral Memorandum of Understanding (by local and national health and care organisations). A Joint Committee (comprising CCG, Surrey County Council and national body representatives) will operate in shadow form up to 1st April 2018 - to allow for the development of robust governance structures and delegated responsibility as the single point of accountability for integrated commissioning. It met for the first time in October 2017.
- (iii) **Surrey Heartlands Partnership** – comprising 12 system partners who are committed to working together to a set of principles and delivery of 13 work-streams (7 clinical; 5 enabling) contained within the Sustainability and Transformation Plan, with £15m transformation funding now released for investment in this financial year.
- (iv) **Development of Accountable Care Systems/partnerships** – due to a strong Surrey Heartlands' Partnership being in place and moving forward with Devolution, Guildford and Waverley CCG is participating in a national programme with nine other systems at an advanced stage of development. In effect, this will involve developing new models of integrated working across a range of providers to provide joined up and better coordinated care, with new forms of contracting to support this. It is clear that these models will be the platform for local system , planning, engagement, clinical leadership and decision making and it is anticipated that these will operate in shadow form from April 2018.

3. Revisiting the Rationale for Joint Working and Consideration of Options

- 3.1 A joint workshop took place on the 15th September, providing the opportunity for the members of the three Governing Bodies to revisit the rationale for joint working, the direction of travel and the options for rationalising current governance arrangements. In revisiting the rationale for joint working, the following principles were endorsed:

- Better for patients and the public

- Safeguards quality and safety
 - Clear accountability for decision making
 - Value for money/ rationalisation/ “doing once on behalf of”
 - CCG accountability for delivery of statutory duties remains
 - Safeguards clinical/professional leadership
- 3.2 A number of options were considered in detail, together with the pros and cons, from maintaining the status quo of current individual Governing Body arrangements to a merger of the three CCGs. The former was not considered to be sustainable or responsive to the emerging changes in commissioning landscape and architecture; the latter, whilst simplifying the governance arrangements, would not maintain local focus, nor was it considered to be in the interests of local populations, at least until nascent local accountable care systems were in place and there was confidence in a more strategic system leadership of commissioning alongside. The timeline for achieving any merger would also be protracted and detract from the priority areas for delivery.
- 3.3 The Governing Body “committees in common” option was considered, alongside a variation of this which incorporated the Joint (integrated commissioning) Committee (referred under Para. 2.1 (ii) above) as the main vehicle to take forward devolution and delivery of the Sustainability and Transformation Plan.
- 3.4 The Governing Body ‘committees in common model’ was preferred for the following reasons:
- (i) It is a tried and tested model, already adopted to support Surrey wide collaborative commissioning decision making – for example, to award contracts following procurement for children’s community health and child and adolescent mental health services; to determine the West Surrey stroke model of care; and to sign off the Sustainability and Transformation Plan.
 - (ii) It was seen to have the benefit of allowing trusted working relationships to mature across the three CCGs – a key tenet for successful transformation – and an opportunity to work through together the delegation of decision making to the Joint Committee, operating in shadow up to next April 2018. This would in parallel shape the operation of the Governing Body Committees in common model – in particular, clarifying the accountability for decision making and the distinction between strategic and local determination.
 - (iii) The timing would coincide with an important check point around the development of local, shadow Accountable Care Systems (ACS) in April 2018, working alongside wave one ACS areas in a national programme to maximise this transition.
 - (iv) This option would also allow the future direction for East Surrey CCG to be taken into account.
- 3.5 The preferred option for the three CCG Governing Bodies is therefore to meet as a “committees in common” going forward. To do this, each CCG will need to agree to operate a single Governing Body Committees in Common (CiC) to which it delegates the power to develop the strategic direction of the CCGs, provide assurance and conduct the overall management of the CCGs, having taken account of all relevant statutory requirements and DoH and NHS England guidance. The Governing Body CiC will ensure there is quality and value for money for commissioned services for the population within its geography. The Governing Body CiC will operate as a separate, but parallel, entity with the Joint Committee, with Surrey County Council and NHS England, which is the primary vehicle to take forward devolution and delivery of the Sustainability and Transformation Plan.

4. Recommended Approach to Implementation

- 4.1 The proposed timeline for implementation is from the 1st April 2018. This is in parallel with the Joint Committee operating in shadow form, and will allow the single leadership executive team to embed. More importantly, it will give sufficient time for engagement with membership practices, to demonstrate a commitment to build on work currently underway to strengthen the localities and build this from a 'bottom up' approach; with the wider stakeholder audience; and for an application for Constitutional amendment to be approved, submitted and ratified by NHS England.
- 4.2 Subject to formal approval being received, the next steps will be to work through the detail of how this arrangement might work with a workshop in January 2018 to take this forward: (a) how this might work in practice/ drafting Terms of Reference (b) what is best determined at a strategic system level distinct from what is best determined locally - with the required delegation of authority to enable this to happen.
- 4.3 Priorities for November – December 2017
- Plan and delivery of Membership engagement;
 - Plan and delivery of wider stakeholder/patient and public engagement
 - Complete equality analysis
 - Seek legal assurance of operating model
 - Application for Constitutional amendment – drafted and submitted to NHS E
 - Plan Joint GB OD Workshop
 - Provisional plan for logistics (forward plan of dates/room bookings)/agenda planning
- 4.4 Priorities for January – March 2018
- Joint Governing Body OD Workshop – to develop Terms of Reference for Governing Body Committees in Common and Scheme of Delegation
 - Continue Membership and wider stakeholder engagement
 - Ratification from NHS E of Constitutional amendment
 - Finalise ToR and Schemes of Delegation

Appendix 1

Key Dates:

Practice Council (PC)/Council of Members (CoM)

GB in public (unless seminar indicated):

2017	NHS Guildford and Waverley CCG	NHS North West Surrey CCG	NHS Surrey Downs CCG
October	4 th October 2017 – 1 st Joint Committee		
	31 October – GB	11 October – Council of Members (CoM) verbal item on the agenda 30 October – GB	
November	1 st November 2017 – Joint leadership executive team takes effect		
	15 November - PC	27 November – GB	24 November - GB
December	18 December – GB seminar (safeguarding training)	18 December – GB seminar (safeguarding training)	15 December – GB
2018			
January	January 2018 Joint GB OD workshop		
	23 January GB 17 January – PC	22 January – GB	26 January – GB
February	February 2018 - 2 nd Joint Committee		
	GB seminar	26 February (GB seminar)	23 February - GB
March	21 March – PC	14 March (CofM) 26 March - GB	23 March - GB
April	April - Inaugural Governing Body Committees in Common		