



GOVERNING BODY

Agenda Item No.	18
Reference No.	IESCCG 19-73
Date.	26 November 2019

Title	Joint CCG Collaborative Group Terms of Reference
Lead Chief Officer	Amanda Lyes, Chief Corporate Services Officer
Author(s)	Jo Mael, Corporate Governance Officer
Purpose	To present revised terms of reference for the Joint CCG Collaborative Group, for approval.

Applicable CCG Clinical Priorities:

1.	To promote self care	
2.	To ensure high quality local services where possible	
3.	To improve the health of those most in need	
4.	To improve health & educational attainment for children and young people	
5.	To improve access to mental health services	
6.	To improve outcomes for patients with diabetes to above national averages	
7.	To improve care for frail elderly individuals	
8.	To allow patients to die with dignity and compassion and to choose their place of death where appropriate	
9.	To ensure that the CCG operates within agreed budgets	

Action required by Governing Body:

At a meeting held on 8 October 2019, the Joint CCG Collaborative Group proposed to revise its terms of reference to include North East Essex CCG. Those revised terms of reference are now presented to the Governing Body for approval.

JOINT CCG COLLABORATIVE GROUP

TERMS OF REFERENCE

1. PURPOSE OF THE GROUP

The Joint CCG Collaboration Group exists to:

- Oversee and manage Ipswich and East Suffolk, North East Essex and West Suffolk CCGs shared management arrangements.
- Oversee and manage written agreements detailing the scope of collaboration between the CCGs, with clear lines of accountability and decision-making processes.
- Supporting necessary mechanisms for the CCGs to collaborate with each other where circumstances necessitate this.

2. KEY FUNCTIONS OF THE GROUP

The key functions of the Group are to:

- Provide a medium for sharing expertise and good practice in clinical commissioning.
- Oversee the development and performance of the CCG shared management support arrangements
- Support collaborative working between CCGs to ensure efficient and effective health care provision across Suffolk and north east Essex, particularly for those services that would benefit from commissioning on a larger footprint.
- Provide a medium in which individual CCGs can negotiate and agree shared positions regarding individual commissioning decisions.

3. RELATIONSHIP WITH THE GOVERNING BODIES

The Group has authority from the NHS Ipswich and East Suffolk, North East Essex and NHS West Suffolk CCGs to execute its key functions and is accountable to the respective Governing Bodies operating within agreed delegated powers.

4. REPORTING PROCEDURES AND MEETINGS

The Group will meet bi-monthly, or as required. Reports of its meetings will be presented to the next available meetings of the NHS Ipswich and East Suffolk, North East Essex and West Suffolk CCG Governing Bodies.

The agenda and supporting papers will be sent out at least 5 days in advance of the meetings to allow time for due consideration of issues.

Meetings will be timetabled and agreed in advance.

5. MEMBERSHIP, QUORUM AND VOTING

Membership of the Group will include:

- Chairman (appointment agreed by CCGs)
- CCG Governing Body Chairs *
- CCG Governing Body Lay Members with Responsibility for Governance *
- CCG Accountable Officer

A quorum will require at least **four** members, including at least one GP from each CCG to be present.

Should any of the CCG Governing Body Chairs be unable to attend, they may nominate another GP from their Governing Body to represent them.

Those Group members marked * are voting members. Where voting is required and in the event of an equal vote, the Chair of the Group will have the casting vote.

In the event of the Chair being unable to attend all or part of a Committee meeting, he or she will nominate a replacement from within the membership to deputise for that meeting.

6. SECRETARY

The Governing Body Secretary shall be secretary to the Group and he/she, or their nominee, shall attend to take minutes. The Governing Body Secretary shall provide appropriate support to the Chair and Group members by drawing their attention to best practice, national guidance and other relevant issues as appropriate.

7. CONDUCT OF THE GROUP

The Group will review on an annual basis, or as appropriate, its own performance and effectiveness including running costs and membership and terms of reference. The Clinical Commissioning Group Governing Bodies will approve any resulting changes to the terms of reference or membership.

8. AUTHOR

Colin Boakes
Governance Advisor

Date Approved:	September 2012
Last Review:	November 2019
Next Review:	November 2020