

AGENDA
PRIMARY CARE COMMISSIONING COMMITTEE – VIRTUAL MEETING

The meeting will be held via MS Teams Meeting and a diary invite will have been sent to you prior to the meeting

Date: 8th October 2020

Time: 12.00pm to 12.50pm

| Item No. | Time | Duration | Subject | Paper/Verbal for Approval, Discussion or information | By Whom |
|----------|---------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|----------------------------------------|
| 1. | 12.00pm | | Apologies for Absence. | Verbal | All |
| 2. | 12.00pm | | Declarations of Interest. | Verbal | All |
| 3. | 12.00pm | 5 mins | Minutes and Verbal Updates: <ul style="list-style-type: none"> Minutes from the meeting held on 13th August 2020. Update on virtual decision taken on 9th September 2020 to approve the 6 month programme to re-start primary care. | Paper – for approval Verbal – for noting | Alan Stephenson Alan Stephenson |
| 4. | 12.05pm | 10 mins | Draft Annual Report and Updated Terms of Reference. | Papers – for approval | Alan Stephenson |
| 5. | 12.15pm | 15 mins | Quarterly Update on Health Check Governance Processes. | Verbal – for discussion | Lynda Helsby |
| 6. | 12.30pm | 10 mins | Estates Update. | Verbal – for discussion | Kathryn Oddi |
| 7. | 12.40pm | 5 mins | Any Other Business. | Verbal | All |
| 8. | 12.45pm | 5 mins | Chair reflection on significant decisions/actions/risks that may need reporting to the Board through these minutes. | Verbal | All |
| 9. | 12.50pm | | Time & Date of Next Meeting: Dates for future meetings 2020 – to take place from 12 noon on:- <ul style="list-style-type: none"> 10th December | Verbal | All |

MINUTES

Primary Care Commissioning Committee – Virtual Meeting

Date: 13th August 2020

Time: 12.00pm

Present:

| | |
|-----------------|----------------------------------------------------------|
| Alan Stephenson | CCG Lay Member (Committee Chair) |
| Su Long | CCG Chief Officer |
| Lynda Helsby | CCG Associate Director Primary Care & Health Improvement |
| Kathryn Oddi | CCG Head of Primary Care Contracting |
| Ian Boyle | CCG Chief Finance Officer |
| Kelly Knowles | CCG Deputy Chief Finance Officer |
| Susan Baines | Bolton Council Elected Member |
| Stacey Walsh | Local Practice Manager representative |
| Jim Fawcett | Health Watch representative |
| Kerry Porter | GM H&SCP Primary Care Team representative |

Minutes by:

| | |
|--------------------|--------------|
| Joanne Meaney (JM) | Corporate PA |
|--------------------|--------------|

| Minute No. | Topic |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 39/20 | <p>Apologies for Absence Apologies for absence were received from:-</p> <ul style="list-style-type: none"> • Stephen Liversedge, Clinical Director Primary Care & Health Improvement. • Steven Whittaker, Local GP representative. • Lynn Donkin, Bolton Council Public Health representative. • Councillor Andrew Morgan, Bolton Council Elected Member • Ann Gough, GM H&SCP Primary Care Team |
| 40/20 | <p>Declarations of Interest Stacey Walsh declared an interest in all the items on the agenda relating to primary care, due to potential financial conflicts of interest.</p> <p>The Chair agreed that for each item, views would be taken on the potential conflicts of interest to confirm if these members could take part in any voting or decisions taken.</p> <p>The Chair reminded members of their obligation to declare any interest they may have on any issues arising at meetings which might conflict with the business of the committee. It was noted that declarations declared by members of the committee are listed in the CCG's Register of Interest. The Register is available either via the CCG Board Secretary or the CCG's website at the following link: http://www.boltonccg.nhs.uk/about-us/declarations-of-interest</p> |
| 41/20 | <p>Minutes from the Meeting held on 11th June 2020 The Minutes were approved as a correct record.</p> |

| | |
|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 42/20 | <p><u>Bolton Quality Contract (BQC) 2020/21:</u></p> <p><u>BQC Quarter 4 KPI Member Engagement Adjustments</u> The report outlined the decision taken by the Committee Chair to adjust requirements for the BQC membership engagement standard, to inform end of year achievement.</p> <p>Following discussions, the Committee Chair agreed that the CCG should not be penalising practices on end of year delivery when their ability to achieve has been impacted by a major pandemic and their main focus has been on providing urgent care safely during this time.</p> <p>The Committee reviewed the report and decision taken by the Committee Chair.</p> <p>The Committee approved the decision taken by the Committee Chair.</p> <p><u>BQC 2020/21 6 month programme for re-setting primary care</u> The Committee received a presentation on the proposals to re-set the standards and KPIs in the BQC for the coming 6 months. The proposals had been discussed with the Executive and feedback received from the GP membership prior to presenting the final proposals to the Committee. A summary of the consultation process was attached to the presentation and reviewed by the Committee. This included feedback and comments from the Executive, GP practices and the Local Medical Committee.</p> <p>The Committee reviewed the current BQC standards and the proposed revisions to each standard. It was noted that a final proposal will be developed by the CCG Executive and sent for virtual approval to this Committee with a review to reporting the final decision to the Board in September.</p> <p>The Committee approved the proposals, in principle, pending the final proposal being received for approval prior to final ratification by the Board on 11th September. It was agreed to commence with these changes to the BQC from 1st October 2020.</p> |
| 43/20 | <p><u>BQC 2019/20 End of Year Report</u> The report detailed the end of year achievements for the 2019/20 Bolton Quality Contract. The Committee undertook a full review of each standard and key performance indicators. The Chair acknowledged the achievement by practices.</p> <p>The Committee noted the key outcomes and achievements of the BQC for 2019/20 and recommended the continuation of the BQC to the CCG Board at the September meeting.</p> |
| 44/20 | <p><u>Multi-Contract Providers– Attendance at CCG Events/Meetings</u> The Committee received an update on multiple contract holders with a view to reviewing a previous decision that would allow attendance by one GP, who would then disseminate the information to the contracted practices.</p> <p>This was further to a request which had been received from a contract holder who has taken on an additional contract, asking if this decision would continue to apply to these practices.</p> <p>A discussion took place on the nature of the BQC and the impact on practices of various list sizes. It was agreed that the BQC is a practice based contract and therefore the original decision should be rescinded and there should be a requirement that a representative from each practice should attend meetings as per the condition of the BQC.</p> |

| | |
|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | <p>The Committee agreed to rescind the decision currently in place and agreed that there should one representative from each practice in attendance at events/meetings to ensure a consistent approach.</p> |
| 45/20 | <p><u>Estates Update</u> Stacey Walsh declared an interest in relation to the Kearsley update but, as no decision is being taken, it was agreed she should remain in the meeting but would not partake in any of the discussions relating to this item.</p> <p>The Committee received an update on the current estates developments. It was noted that the CCG is working with practices to ensure premises remain Covid safe through the provision of screens, signage, hand sanitisers etc.</p> <p><u>Little Lever</u> – this is now at the sign off stage. The design has had input from all 3 practices, Bolton FT and the Council Library and is on track for building works to commence in September.</p> <p><u>Kearsley</u> – there has been a slight change to the practice design and the smaller design will mean less impact on the surrounding area in terms of parking. The changed design will need to be reviewed and re-approved. It was noted that the consultation undertaken at practice level meets the practice’s additional capacity requirements.</p> <p><u>Unsworth Group</u> – the original business case was over budget and the CCG have met with the practice to sign off a new design.</p> <p><u>Horwich</u> - more detail is awaited in relation to the business case. It was reported that a meeting is due to be held next week with Council colleagues to update on the scheme.</p> <p>The Committee noted the updates.</p> |
| 46/20 | <p><u>Any Other Business</u> There was no further business discussed.</p> |
| 47/20 | <p><u>Chair reflection on significant decisions/actions/risks that may need reporting to the Board through these minutes</u> The main points highlighted were:-</p> <ul style="list-style-type: none"> • the BQC updates in relation to the End of Year report and reset of the programme. |
| 48/20 | <p><u>Time and Date of Next Meeting</u> It was agreed that the next meeting would be held on Thursday 8th October 2020 at 12 noon.</p> |
| 49/20 | <p><u>Future Agenda Items</u> Noted as:-</p> <ul style="list-style-type: none"> • Update on Health Check governance processes (quarterly). • Primary Care Investment Agreement (quarterly). |
| 50/20 | <p><u>Exclusion of the Public</u> “That publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted, and that the public be excluded”.</p> |

Primary Care Commissioning Committee



AGENDA ITEM NO:4.....

Date of Meeting:8th October 2020.....

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|---|
| TITLE OF REPORT: | Draft Annual Report and Updated Terms of Reference | |
| AUTHOR: | Joanne Taylor, Board Secretary | |
| PRESENTED BY: | Alan Stephenson, Committee Chair | |
| PURPOSE OF PAPER: (Please be clear e.g. decision(s) required, a discussion, for noting) | | |
| <p>For review and comment. The purpose of this report is to provide a summary of the Committee’s activities, in order to demonstrate how the Committee has discharged its responsibilities and terms of reference.</p> <p>The Committee is asked to approve subject to review and comment on the draft report prior to the final document being presented to a future CCG governing body meeting.</p> <p>A review of the Terms of Reference is also undertaken at the same time. Members are asked to review the attached terms of reference which include updates to the membership highlighted in red.</p> <p>If these changes are approved, the Chief Officer and Acting Chief Finance Officer will be asked to confirm a new deputy to attend meetings in their absence, to ensure quoracy at each meeting.</p> | | |
| LINKS TO CORPORATE OBJECTIVES (tick relevant boxes): | Deliver the outcomes in the Bolton Joint Health and Care Plan. | |
| | Ensure compliance with the NHS statutory duties and NHS Constitution. | ✓ |
| | Deliver financial balance. | |
| | Regulatory Requirement. | |
| | Standing Item. | |
| FINANCIAL IMPLICATIONS [discussed with Chief Financial Officer]: | | |
| None | | |
| COMMITTEES/GROUPS PREVIOUSLY CONSULTED: | | |
| None | | |
| REVIEW OF CONFLICTS OF INTEREST: | | |
| N/A | | |

RECOMMENDATION(s)

The Committee is asked to approve subject to review and comment on the draft report and updated terms of reference prior to the final document being presented to a future CCG governing body meeting.

Primary Care Commissioning Committee

Annual Report 2019-20

1. Introduction

The purpose of this report is to provide a summary of the Primary Care Commissioning Committee (the Committee) activities, in order to demonstrate compliance with the Committee's terms of reference, effectiveness and impact of the Committee.

The Committee is established as a Sub-Committee of the governing body in accordance with NHS Bolton Clinical Commissioning Group (CCG) governing body's constitution.

The terms of reference setting out the membership, remit, responsibilities and reporting arrangements of the Committee were reviewed and amended in October 2019.

2. Membership

The membership of the Committee during 2019-20 was as follows:

- Alan Stephenson, Lay Member and Chair of the Committee.
- Jack Firth, Health Watch representative and Vice Chair of the Committee (to July 2019).
- Jim Fawcett, Health Watch representative (from August 2019).
- Su Long, CCG Chief Officer.
- Ian Boyle, CCG Chief Finance Officer.
- Stephen Liversedge, Clinical Director Primary Care & Health Improvement.
- Lynda Helsby, Associate Director Primary Care & Health Improvement.
- Bolton Council Senior Officer representative.
- Bolton Council Elected Member representative.
- NHS England Primary Care Commissioning representative.
- Steven Whittaker, local GP representative.
- Stacey Walsh, local practice manager representative.

3. Attendance

From April 2019 to March 2020, the Committee met seven times and was quorate at each meeting.

The schedule of attendance is as follows:

| | 11/4/19 | 13/6/19 | 2/7/19 | 8/8/19 | 10/10/19 | 12/12/19 | 13/2/20 |
|-----------------------------------------------|---------|---------|--------|--------|----------|----------|---------|
| Alan Stephenson | √ | √ | √ | √ | X | √ | √ |
| Jack Firth/ Jim Fawcett | √ | √ | √ | X | X | X | X |
| Su Long | X | √ | √ | X | √ | X | √ |
| Ian Boyle | √ | √ | √ | √ | √ | √ | X |
| Stephen Liversedge | √ | √ | X | X | √ | √ | √ |
| Lynda Helsby | √ | √ | X | √ | √ | √ | √ |
| Bolton Council Senior Officer | X | √ | √ | √ | X | √ | X |
| Bolton Council Elected Members | √ | √ | √ | √ | X (1) | X | X (1) |
| NHS England Primary Care representative | X | √ | X | X | √ | √ | √ |
| Steven Whittaker | X | √ | √ | √ | √ | √ | X |
| Stacey Walsh | √ | √ | √ | √ | √ | √ | √ |

4. Conflicts of Interest

There were several declarations of interest reported dependent on the item for discussion. These were recorded in the minutes. The Chair agreed that for each item, views would be taken on the potential conflicts of interest to confirm if these members could take part in any voting or decisions taken.

For some items requiring decision, the members concerned asked not to take part in the discussions and were requested to leave the meeting when these items were being discussed.

5. Remit and responsibilities of the Committee

The Committee's remit is to:

- Make collective decisions on the review, planning and procurement of primary care services in the borough of Bolton, under delegated authority from NHS England.
- In performing its role the Committee will exercise its management of the functions in accordance with the agreement entered into between NHS England and NHS Bolton CCG, which will sit alongside the delegation and terms of reference.

- The functions of the Committee are undertaken in the context of a desire to promote increased co-commissioning to increase quality, efficiency, productivity and value for money and to remove administrative barriers.
- The role of the Committee shall be to carry out the functions relating to the commissioning of primary medical services under section 83 of the NHS Act, except those relating to individual GP performance management, which have been reserved to NHS England.
- This includes the following:
 - GMS, PMS and APMS contracts (including the design of PMS and APMS contracts, monitoring of contracts, taking contractual action such as issuing breach/remedial notices and removing a contract);
 - Newly designed enhanced services (“Local Enhanced Services” and “Directed Enhanced Services”);
 - Design of local incentive schemes as an alternative to the Quality Outcomes Framework (QOF);
 - Decision making on whether to establish new GP practices in an area;
 - Approving practice mergers; and
 - Making decisions on ‘discretionary’ payment (eg. Returner/retainer schemes).
- The Committee’s aim is to deliver the following benefits:
 - Improved provision of out-of hospital services for the benefit of patients and local populations;
 - a more integrated healthcare system that is affordable, high quality and which better meets local needs;
 - more optimal decisions to be made about how primary care resources are deployed;
 - greater consistency between outcome measures and incentives used in primary care services and wider out-of-hospital services; and
 - a more collaborative approach to designing local solutions for workforce, premises and IM&T challenges.
- In performing its role the Committee will exercise its management of the functions in accordance with the agreement entered into between NHS England and NHS Bolton CCG, which will sit alongside the delegation and terms of reference.

6. Policy and best practice

The Committee applied best practice in its deliberations and decision making processes. It conducted its business in accordance with national guidance and relevant codes of conduct and good governance practice.

7. Conduct of the Committee

The Committee reviewed its performance, membership and terms of reference and any changes to the terms of reference or membership were approved by the Governing Body.

Meetings of the Committee were conducted in accordance with the provisions of Standing Orders, Reservation and Delegation of Powers and Prime Financial Policies approved by the Governing Body and reviewed from time to time.

The Board Secretary minuted the proceedings of all meetings of the Committee, including recording the names of those present and in attendance and the minutes of the Committee meetings were circulated promptly to all attendees of the Committee for approval.

The Committee reported to the Governing Body after each meeting via its minutes.

8. Key Areas Reviewed

Throughout the year, the Committee reviewed the following areas:-

- GP Contract Reform – Primary Care Network DES.
- General Practice to undertake Test of Cure Smears at 6 months following discharge from Colposcopy.
- Regular updates on the development of the primary care estate.
- Regular updates from the work of the primary care operational group.
- Quarterly updates on the Primary Care Investment Agreement.
- Quarterly updates on the Health Check Governance processes.
- Review of the Access Audit.
- Options for Year 5 Payments under the Bolton Quality Contract (2019/20).
- Review of the Internal Audit Report – Primary Medical Care Contracting and Commissioning.
- Various contractual changes and contractual issues.
- The Bolton Quality Contract 2019/20:
 - End of Year Report including KPI achievements.
 - Prescribing payment adjustments.
 - 2020/21 Plans.
- The new GM Primary Care Strategy and Standards.
- Opportunities for Direct Commissioning.
- The Minor Surgery DES.
- Primary Care budget review.
- 2020/21 Primary Care Commissioning Intentions.
- Expected Dementia Prevalence for a decision regarding setting amended targets based on NHS Digital Methodology.
- GM General Practice Retention Scheme Fund.
- Annual Review of Locally Commissioned Services.
- Directly Enhanced Services (DES) Specifications and Initial Outcome of the Consultation.

The Terms of Reference attached were reviewed and amended in October 2019.

Alan Stephenson
Primary Care Commissioning Committee Chair

October 2020

Primary Care Commissioning Committee

Terms of Reference

1. Introduction

- 1.1. Simon Stevens, the Chief Executive of NHS England, announced on 1 May 2014 that NHS England was inviting Clinical Commissioning Groups (CCGs) to expand their role in primary care commissioning and to submit expressions of interest setting out the CCG's preference for how it would like to exercise expanded primary medical care commissioning functions. One option available was that NHS England would delegate the exercise of certain specified primary care commissioning functions to a CCG.
- 1.2. In accordance with its statutory powers under section 13Z of the National Health Service Act 2006 (as amended), NHS England has delegated the exercise of the functions specified in Schedule 2 to these Terms of Reference to NHS Bolton CCG. The delegation is set out in Schedule 1.
- 1.3. The CCG has established the NHS Bolton CCG Primary Care Commissioning Committee ("the Committee"). The Committee will function as a corporate decision-making body for the management of the delegated functions and the exercise of the delegated powers.
- 1.4. It is a committee comprising representatives of the following organisations:
 - NHS Bolton CCG;
 - Healthwatch Bolton;
 - GP not practising in Bolton;
 - Member representatives: Local GP, Practice Manager;
 - NHS England representatives including public health commissioning representative;
 - Local Council senior officer.
 - Local Council elected members.
- 1.2. The NHS England and Bolton CCG Primary Care Commissioning Committee is a committee with the primary purpose of jointly commissioning primary medical services for the people of Bolton.

- 1.3. The NHS Bolton CCG Primary Care Commissioning Committee is established in accordance with NHS Bolton Clinical Commissioning Group's Constitution, Standing Orders and Scheme of Delegation.

These terms of reference set out the membership, remit, responsibilities and reporting arrangements of the Committee and shall have effect as if incorporated into the Clinical Commissioning Group's Constitution and Standing Orders.

2. Statutory Framework

- 2.1. NHS England has delegated to the CCG authority to exercise the primary care commissioning functions set out in Schedule 2 in accordance with section 13Z of the NHS Act.

The National Health Service Act 2006 (as amended) ("NHS Act") provides, at section 13Z, that NHS England's functions may be exercised jointly with a CCG, and that functions exercised jointly in accordance with that section may be exercised by a committee of NHS England and the CCG. Section 13Z of the NHS Act further provides that arrangements made under that section may be on such terms and conditions as may be agreed between NHS England and the CCG.

- 2.2. Arrangements made under section 13Z may be on such terms and conditions (including terms as to payment) as may be agreed between the Board and the CCG.
- 2.3. Arrangements made under section 13Z do not affect the liability of NHS England for the exercise of any of its functions. However, the CCG acknowledges that in exercising its functions (including those delegated to it), it must comply with the statutory duties set out in Chapter A2 of the NHS Act and including:
 - 2.3.1. Management of conflicts of interest (section 140);
 - 2.3.2. Duty to promote the NHS Constitution (section 14P);
 - 2.3.3. Duty to exercise its functions effectively, efficiently and economically (section 14Q);
 - 2.3.4. Duty as to improvement in quality of services (section 14R);
 - 2.3.5. Duty in relation to quality of primary medical services (section 14S);
 - 2.3.6. Duties as to reducing inequalities (section 14T);
 - 2.3.7. Duty to promote the involvement of each patient (section 14U);
 - 2.3.8. Duty as to patient choice (section 14V);
 - 2.3.9. Duty as to promoting integration (section 14Z1);
 - 2.3.10 Public involvement and consultation (section 14Z2).
- 2.4. The CCG will also need to specifically, in respect of the delegated functions from NHS England, exercise those in accordance with the relevant provisions of section 13 of the NHS Act as set out below:

- Duty to have regard to impact on services in certain areas (section 13O);
- Duty as respects variation in provision of health services (section 13P).

2.5 The Committee is established as a committee of the Governing Body of NHS Bolton CCG in accordance with Schedule 1A of the “NHS Act”.

2.6 The members acknowledge that the Committee is subject to any directions made by NHS England or by the Secretary of State.

3. Role of the Committee

3.1 The Committee has been established in accordance with the above statutory provisions to enable the members to make collective decisions on the review, planning and procurement of primary care services in the borough of Bolton, under delegated authority from NHS England.

3.2 In performing its role the Committee will exercise its management of the functions in accordance with the agreement entered into between NHS England and NHS Bolton CCG, which will sit alongside the delegation and terms of reference.

3.3 The functions of the Committee are undertaken in the context of a desire to promote increased co-commissioning to increase quality, efficiency, productivity and value for money and to remove administrative barriers.

3.4 The role of the Committee shall be to carry out the functions relating to the commissioning of primary medical services under section 83 of the NHS Act, except those relating to individual GP performance management, which have been reserved to NHS England.

3.5 This includes the following:

- GMS, PMS and APMS contracts (including the design of PMS and APMS contracts, monitoring of contracts, taking contractual action such as issuing breach/remedial notices and removing a contract);
- Newly designed enhanced services (“Local Enhanced Services” and “Directed Enhanced Services”);
- Design of local incentive schemes as an alternative to the Quality Outcomes Framework (QOF);
- Decision making on whether to establish new GP practices in an area;
- Approving practice mergers; and
- Making decisions on ‘discretionary’ payment (eg. Returner/retainer schemes).

- 3.6 The CCG will also carry out the following activities:
- Plan, including needs assessment, primary medical care services in Bolton borough;
 - Undertake reviews of primary medical services in Bolton borough;
 - Co-ordinate a common approach to the commissioning of primary care services generally;
 - Manage the budget for commissioning of primary medical care services in Bolton borough.
- 3.7 The Committee will aim to deliver the following benefits:
- Improved provision of out-of hospital services for the benefit of patients and local populations;
 - a more integrated healthcare system that is affordable, high quality and which better meets local needs;
 - more optimal decisions to be made about how primary care resources are deployed;
 - greater consistency between outcome measures and incentives used in primary care services and wider out-of-hospital services; and
 - a more collaborative approach to designing local solutions for workforce, premises and IM&T challenges.
- 3.7.1 In performing its role the Committee will exercise its management of the functions in accordance with the agreement entered into between NHS England and NHS Bolton CCG, which will sit alongside the delegation and terms of reference.

4. Geographical Coverage

- 4.1 The Committee's responsibilities will cover the same geographical area as those of NHS Bolton CCG.

5. Membership

- 5.1. The Committee will comprise of the following members:-

| Members (Designation) |
|-----------------------------------------------------------------------|
| CCG Governing Body Lay Member (Chair of the Group) (Voting) |
| Healthwatch Representative (Voting) |
| CCG Chief Officer (Voting) (or their deputy) |
| CCG Chief Finance Officer (Voting) (or their deputy) |
| CCG Clinical Director Primary Care & Health Improvement (Voting) |
| CCG Director of Strategic Commissioning (Voting) |
| CCG AD Primary Care & Health Improvement (Non-Voting – In Attendance) |

| |
|-----------------------------------------------------------------------------------|
| Bolton Council Senior Officer (or their deputy) (Voting) |
| 2 Bolton Council Elected Members (Voting) (Susan Baines appointed as Vice-Chair). |
| NHS England Primary Care Commissioning (or their deputy) (Voting) |
| GP not practising in Bolton (Voting) |
| Local GP (Voting) |
| Local Practice Manager (Voting) |

A CCG Lay Member will Chair the Group, in accordance with national guidelines. In the absence of the Chair of the Committee, a lay chairman shall be nominated by other members attending that meeting.

The Committee has agreed that the CCG Chief Officer and Chief Finance Officer can appoint deputies to attend meetings on their behalf. The deputies are:

- Chief Officer – Director of Strategic Commissioning – TBC.
- Chief Finance Officer – Deputy Chief Finance Officer – TBC.

6. Meetings and Voting

- 6.1 The Committee will operate in accordance with the CCG's Standing Orders. The Board Secretary will be responsible for giving notice of meetings. This will be accompanied by an agenda and supporting papers and sent to each member representative no later than 7 days before the date of the meeting. When the chair of the committee deems it necessary, in light of the urgent circumstances, to call a meeting at short notice, the notice period shall be such as s/he shall specify.
- 6.2 Each member of the Committee shall have one vote except those indicated in schedule 1 as non-voting. The Committee shall reach decisions by a simple majority of members present, but with the Chair having a second and deciding vote, if necessary. However, the aim of the Committee will be to achieve consensus decision-making wherever possible.
- 6.3 Meetings of the Committee shall:
- (a) Be held in public, subject to the application of point (b) below;
 - (b) The Committee may resolve to exclude the public from a meeting that is open to the public (whether during the whole or part of the proceedings) whenever publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted or for other special reasons stated in the resolution and arising from the nature of that business or of the proceedings or for any other reason permitted by the Public

Bodies (Admissions to Meetings) Act 1960 as amended or succeeded from time to time.

- 6.4 NHS England, Bolton CCG and Bolton Council have the right and responsibility to designate alternates of their own choosing to ensure they attend all meetings.
- 6.5 Members of the Committee have a collective responsibility for the operation of the Committee. They will participate in discussion, review evidence and provide objective expert input to the best of their knowledge and ability, and endeavor to reach a collective view.
- 6.6 The Committee may delegate tasks to such individuals, sub-committees or individual members as it shall see fit, provided that any such delegations are consistent with the parties' relevant governance arrangements, are recorded in a scheme of delegation, are governed by terms of reference as appropriate and reflect appropriate arrangements for the management of conflicts of interest.
- 6.7 The Committee may call additional experts to attend meetings on an ad hoc basis to inform discussions.
- 6.8 Members of the Committee shall respect confidentiality requirements as set out in the CCG's Constitution.
- 6.9 The Committee will present its minutes to Governing Body of NHS Bolton CCG for information, including the minutes of any sub-committees to which responsibilities are delegated under section 8.4
- 6.10 The CCG will also comply with any reporting requirements set out in its Constitution.
- 6.11 Terms of Reference will be reviewed annually, reflecting experience of the Committee in fulfilling its functions. NHS England may also issue revised model terms of reference from time to time.
- 6.12 The Committee will also report to the governing body annually setting out how it has discharged its responsibilities and its terms of reference.

7. Quorum

- 7.1 Two thirds of voting members represents a quorum. This should include a majority of lay and executive members in attendance with eligibility to vote.

8. Handling Conflicts of Interest

- 8.1 As defined in the CCG's Conflicts of Interest Policy, where this Committee is taking a decision where a member of the Committee has a conflict of interest, the member/s will be excluded from the relevant parts of the meeting and clearly and demonstrably take no part in the decision-making process.

9. Frequency of Meetings

- 9.1 The Committee will meet once every two months.
- 9.2 For any urgent interim decisions that are required. The process to follow is detailed below:
- Recommendation by the Operational Group.
 - Notified to the Joint Commissioning Committee Chair in the first instance.
 - Recommendation to the Joint Commissioning Committee for a "virtual" decision.
 - Reported and recorded at the next meetings of the Joint Commissioning Committee and Operational Group.
 - Reported to NHSE.

10. Secretary

- 10.1 The NHS Bolton CCG Board Secretary will provide administrative support to the Committee. The Board Secretary will be responsible for:
- Circulation of the minutes and action notes of the committee within 1 week of the meeting to all members.
 - Supporting the chair in the management of business.
 - Drawing the committee's attention to best practice, national guidance and other relevant documents, as appropriate.
 - Present the minutes and action notes to the governing body of NHS Bolton CCG.
- 10.2 Unless otherwise agreed, notice of each meeting confirming the venue, time and date together with an agenda of items to be discussed, shall be forwarded to each member of the committee, and other persons required to attend no later than five working days before the date of the meeting. Supporting papers shall be sent to committee members and other attendees as appropriate, at the same time. These timescales can be amended by express agreement of the Chair of the Committee. Urgent items can be added to the agenda at short notice, only with the express agreement of the Chair of the Committee.

11. Policy and Best Practice

- 11.1 The Committee will apply best practice in its deliberations and in the decision making processes. It will conduct its business in accordance with national guidance and relevant codes of conduct and good governance practice.

Date Terms of Reference Agreed:

October 2020

Review Date:

October 2021