

Surrey Health and Social Care

SURREY COMMISSIONING COMMITTEES IN COMMON

AGENDA

Members of the public are welcome to attend and observe meetings of the Committees in Common - which although are being held in public, are not public meetings. In line with current Government guidelines, this meeting will be held virtually. We ask that any members of the public wishing to attend the meeting, email sdccg.governance.surreyheartlands@nhs.net to receive joining instructions.

Questions from the public are welcome and should be emailed to the Surrey Heartlands CCG Governance Team in advance of the meeting so a response can be provided: sdccg.governance.surreyheartlands@nhs.net

Committees in Common between the following CCGs and Surrey County Council

NHS North East Hants and Farnham CCG	✓
NHS Surrey Heartlands CCG	✓
NHS Surrey Heath CCG	✓
Surrey County Council	✓

Date	30 September 2020	Time	9:30 - 10:05
Venue	Virtual- Teams		

Members/ Attendees:

Name	Title/ Role	Attendance (✓)/ Apologies (A)			
		Surrey Heartlands CCG	North East Hants and Farnham CCG	Surrey Heath CCG	Surrey County Council
Convener					
Dr Charlotte Canniff (CC)	Clinical Chair, Surrey Heartlands CCG	✓			
Members					
Dr Charlotte Canniff (CC)	Clinical Chair, Surrey Heartlands CCG	✓			
Jacqui Burke (JB)	Lay Member Audit, Surrey Heartlands CCG	✓			
Jonathan Perkins (JP)	Lay Member Finance, Surrey Heartlands CCG	✓			

Name	Title/ Role	Attendance (✓)/ Apologies (A)			
		Surrey Heartlands CCG	North East Hants and Farnham CCG	Surrey Heath CCG	Surrey County Council
Julia Dutchman-Bailey (JDB)	Registered Nurse, Surrey Heartlands CCG	✓			
Dr Claire Fuller (Dr CF)	Interim CCG Accountable Officer	✓			
Karen McDowell (KMc)	ICS Director of Finance	✓			
Steven Clarke (SC)	Clinical Leader, North East Hants and Farnham CCG		✓		
Kathy Atkinson (KA)	Lay Member, North East Hants and Farnham CCG		✓		
Nicola Airey (NA)	Managing Director, Surrey Heath CCG <i>(also representing North East Hants and Farnham CCG)</i>			✓	
Daryl Gasson (DG)	Managing Director, North East Hants and Farnham CCG		✓		
TBC	Lay Member, Surrey Heath CCG			-	
TBC	Secondary Care Consultant , Surrey Heath CCG			-	
Cllr Tim Oliver (TO)	Leader of the Council (Chair)				✓
Cllr Sinead Mooney (SM)	Cabinet Member for Adults and Public Health				✓
Cllr Mary Lewis (ML)	Cabinet Member for Children, Young People and Families				✓
Attendees					
Natasha Moore (NM)	(Minute-taker) Governance Manager			✓	
Debo Sokoya (DS)	Governance Coordinator			✓	

Freedom of Information: Those present at the meeting should be aware that their name will be listed in the agenda and action notes of this meeting, which may be released to members of the public on request under Freedom of Information requirements.

Item No.	Timings	Item	Action	Presenter	Paper No
1	09:30	Welcome, Introductions and Apologies a) Confirmation of Convener	To note	Convener	Verbal
2		Declarations of Interest a) To receive confirmation from all members and attendees that their entry in the Register of Interests is up-to-date, accurate and complete. b) To receive any declarations of interest pertinent to items on this agenda.	To note	Convener	1
3		Quorum *	To confirm	Convener	Verbal
4	09:35	Minutes from the previous meeting on 28/05/2020	To approve	Convener	2
5	09:40	Action Log	To review	Convener	3
6	09:45	Questions from members of the public	To respond	Convener	Verbal
7	09:50	Terms of Reference	To approve	Convener	4
AOB					
8	10:00	AOB	To discuss	All	Verbal
9	10:05	Meeting close	To note	Convener	Verbal
Date of next meeting in public: Wednesday 9 December, 10:00- 12:00; Virtual meeting					

***Quorum** and membership agreed by Surrey County Council and each CCG individually. Details on Quoracy and voting are included in the Terms of Reference for each CCG as below:

Organisation	Quorum
North East Hants and Farnham CCG	One member
Surrey Heartlands CCG	A minimum of three members including: <ul style="list-style-type: none">• Clinical Chair or GP Member;• A Lay/ Independent Member; and• Accountable Officer or Chief Finance Officer.
Surrey Heath CCG	One member
Surrey County Council	Any three Cabinet members

REGISTER OF INTERESTS

Definition of an interest

A conflict of interest occurs where an individual's ability to exercise judgement, or act in a role is, could be, or is seen to be, impaired or otherwise influenced by his or her involvement in another role or relationship. In some circumstances, it could be reasonably considered that a conflict exists even when there is no actual conflict. In these cases, it is important to still manage these perceived conflicts in order to maintain public trust.

It is not possible, or desirable, to define all instances in which an interest may be a real or perceived conflict. It is for each Individual to exercise their judgment in deciding whether to register any interests that may be construed as a conflict. If any Individual is unsure as to whether an interest should be declared then he or she should seek guidance from the Governing Body Secretary or, if relevant, from the committee or sub- committee chair

(Examples below are non-exhaustive.)

Source: [NHS England Revised Statutory Guidance on Managing Conflict of Interest for CCGs](#) and the [CCG's Standards of Business Conduct Policy](#).

Financial Interests	Non-Financial Professional Interests	Non-Financial Personal Interests	Indirect Interests
<p>This is where an individual may get Direct financial benefits from the consequences of a commissioning decision. This could, for example, include being:</p> <ul style="list-style-type: none"> • A Director, including a non-executive Director, or senior employee in a private company or public limited company or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations; • A shareholder (or similar ownership interests), a partner or owner of a private or not-for-profit company, business partnership or consultancy which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations; • A management consultant for a provider. <p>This could also include an individual being:</p> <ul style="list-style-type: none"> • In secondary employment; • In receipt of secondary income from a provider; • In receipt of a grant from a provider; • In receipt of any payments (for example honoraria, one-off payments, day allowances or travel or subsistence) from a provider; • In receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role; and having a pension that is funded by a provider (where the value of this might be affected by the success or failure of a provider). 	<p>This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is:</p> <ul style="list-style-type: none"> • An advocate for a particular group of patients; • A GP with special interests, e.g. in dermatology, acupuncture, etc.; • A member of a particular specialist professional body (although routine GP membership of the RCGP, British Medical Association (BMA) or a medical defence organisation would not usually by itself amount to an interest which needed to be declared); • An advisor for the Care Quality Commission (CQC) or the National Institute for Health and Care Excellence (NICE); • A medical researcher; • GPs and Practice Managers, who are members of the Governing Body or Committees of the CCG should declare details of their roles and responsibilities held within their GP practice. 	<p>This is where an individual may benefit personally in ways which are not directly linked to their professional career and do not give rise to a Direct financial benefit. This could include, for example, where the individual is:</p> <ul style="list-style-type: none"> • A voluntary sector champion for a provider; • A volunteer for a provider; • A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation; suffering from a particular condition requiring individually funded treatment; • A member of a lobby or pressure group with an interest in health. 	<p>This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a commissioning decision (as those categories are described above) for example:</p> <ul style="list-style-type: none"> • A spouse/partner; • Close relative e.g., parent, grandparent, child, grandchild or sibling; • Close friend; or • Business partner. <p>A declaration of interest for a "business partner" in a GP partnership should include all relevant collective interests of the partnership, and all interests of their fellow GP partners</p> <p>Whether an interest held by another person gives rise to a conflict of interest will depend upon the nature of the relationship between that person and the individual, and the role of the individual within the CCG.</p>

REGISTER OF INTERESTS: Surrey-wide Commissioning Committees in Common

Interests highlighted in yellow have been updated since the last meeting

Updated: 21/09/2020

First name	Last Name	Role	Declared Interest (Name of the organisation and nature of business)	Type of Interest			Is the interest direct or indirect	Nature of interest	Date of Interest		Action taken to mitigate risk
				Financial	Non-financial Professional	Non-Financial Personal			From	To	
Members											
Nicola	Airey	Managing Director, Surrey Heath CCG (also representing North East Hants and Farnham CCG)	North East Hants & Farnham CCG, East Berkshire CCG and Surrey Heath CCG	Y	N	N	Direct	As Executive Director of the Frimley Commissioning Collaborative I have an executive role and influence that covers both North East Hants & Farnham CCG and East Berkshire CCG in addition to Surrey Heath CCG	01/01/20	Present	Interest Noted
			SECAmb	N	N	N	Indirect	Son student paramedic Brighton University. Placements with SECAmb who provide 999 ambulance services to residents within the CCG area	TBC	Present	Interest Noted
Kathy	Atkinson	Lay Member, North East Hants and Farnham CCG	Safer Tourism Foundation	Y	N	N	Direct	Chief Executive	01/12/16	Present	Interest Noted
Jacqui	Burke	Lay Member Audit, Surrey Heartlands CCG	Bells Solicitors (Farnham)	Y	N	N	Direct	Employment - Part Time Employee: Role - Financial Management	01/01/92	Present	Interest Noted
			Mind Body EDS	N	Y	N	Direct	Volunteer Bookkeeper (Role as Trustee & Chairperson period June 2017 to 06/09/2019). Registered Charity (as of 16/02/2018) "Mind Body EDS". Concerned with Raising Awareness of the Symptoms of Ehlers Danlos Syndromes and providing financial relief to sufferers of the condition.	June 2017	Present	Interest Noted

First name	Last Name	Role	Declared Interest (Name of the organisation and nature of business)	Type of Interest			Is the interest direct or indirect	Nature of interest	Date of Interest		Action taken to mitigate risk
				Financial	Non-financial Professional	Non-Financial Personal			From	To	
Charlotte	Canniff	Clinical Chair, Surrey Heartlands CCG	Sunbury Health Centre	Y	N	N	Direct	Member of Local NICS Federation	2017	Present	Withdraw from specified commissioning discussion and decisions
			Sunbury Health Centre	Y	N	N	Direct	GP Partner	2002	Present	Withdraw from specified commissioning discussion and decisions
			SASSE 1 PCN	Y	N	N	Direct	Member of SASSE 1 Primary Care Network	Sept 2019	Present	Withdraw from specified commissioning discussion and decisions
			Sunbury Health Centre	Y	N	N	Indirect	Husband - Practice Manager	2015	Present	Interest Noted
Edmund	Cartwright	Interim Director of Quality and Nursing, Surrey Heath CCG (Chair) (also representing North East Hants and Farnham CCG)	No interest(s) to declare								
Steven	Clarke	Clinical Leader, North East Hants and Farnham CCG	TBC								
Daryl	Gasson	Managing Director, North East Hants and Farnham CCG	No interest(s) to declare								
Julia	Dutchman-Bailey	Registered Nurse, Surrey Heartlands CCG	JSL D-B Ltd, Healthcare Consultancy	Y	N	N	direct	Director of a Provision of consultancy expertise to NHS organisation	11/2016	present	Doesn't undertake consultancy in Surrey patch
			Healthcare Partnership Ltd & Pharmco Ltd (Subsidiaries of Royal Surrey NHS FT)	Y	N	N	Direct	Non-Exec Director of subsidiaries of provider organisation in Surrey Heartlands	27/11/19	Present	Withdraw from specified commissioning discussion and decisions

First name	Last Name	Role	Declared Interest (Name of the organisation and nature of business)	Type of Interest			Is the interest direct or indirect	Nature of interest	Date of Interest		Action taken to mitigate risk
				Financial	Non-financial Professional	Non-Financial Personal			From	To	
Mary	Lewis	Cabinet Member for Children, Young People and Families, Surrey County Council	No interest(s) to declare								
Karen	McDowell	ICS Director of Finance	South West London CCG	N	N	N	Indirect	Husband is employed as the Locality Finance Director for South West London CCG	23/07/18	Present	Interest Noted
Sinead	Mooney	Cabinet Member for Adults and Public Health, Surrey County Council	Governor for Ashford and St Peters NHS Foundation Trust	N	N	Y	direct	I am a SCC appointed Governor for Ashford and St Peters NHS Foundation Trust	01/08/18	04/05/21	Withdraw from specified commissioning discussion and decisions
Tim	Oliver	Leader, Surrey County Council	Surrey County Council	Y	N	N	direct	Employee	23/05/18	present	Interest Noted
			Surrey Heartlands ICS	Y	N	N	direct	Independent Chair	01/04/19	present	Interest Noted
			HNS Data Ltd	N	Y	N	direct	Director	23/05/18	present	Interest Noted
			Oakem Associates Ltd	N	Y	N	direct	Director	23/05/18	present	Interest Noted
			Pledgit Ltd	N	Y	N	direct	Director	23/05/18	present	Interest Noted
Jonathan	Perkins	Lay Member General, Surrey Heartlands CCG	The Worshipful Company of Spectacle Makers	N	N	N	Indirect	Wife is the Clerk to the Worshipful Company of Spectacle Makers, a City Livery company and I regularly attend events at which senior figures within the optical world are also present.	01/06/15	Present	Interest Noted
			Princess Alice Hospice	N	N	Y	Direct	Currently an Ambassador for Princess Alice Hospice and a former Trustee	01/09/16	Present	Interest Noted

First name	Last Name	Role	Declared Interest (Name of the organisation and nature of business)	Type of Interest			Is the interest direct or indirect	Nature of interest	Date of Interest		Action taken to mitigate risk
				Financial	Non-financial Professional	Non-Financial Personal			From	To	

CEASED INTERESTS/ PREVIOUS MEMBERS' INTERESTS (to remain on register for 6 months following cessation)

Peter	Bibawy	Clinical Chair, North East Hants and Farnham CCG	Cambridge Practice, Aldershot	Y	N	N	Direct	GP-Self employed	2015	Present	
			Cambridge Practice	Y	N	N	Direct	(D2A) Discharge to Assess Bed assessor in Ticehurst Nursing Home, Aldershot and Hampshire. Contracted from Salus Medical	January 2018	Present	
			Private Practice	Y	N	N	Direct	With an interest Shock Wave Therapy	2015	Present	
			Salus GP Federation	Y	N	N	Direct	Shareholder	2015	Present	
			Southern Health NHS Foundation Trust	N	N	N	Indirect	Wife is a Psychiatrist	2015	Present	
			CHC Surrey services	N	N		Indirect	Close family relative	2015	Present	
Ruth	Colburn Jackson	Managing Director, North East Hants and Farnham CCG	No interest(s) to declare								
Matthew	Tait	ICS Chief Officer	No interest(s) to declare								
Tim	Oliver	Leader, Surrey County Council	Elmbridge Borough Council	Y	N	N	direct	Employee	23/05/18	06/05/19	Interest Noted
			Argent Health & Safety Ltd	N	Y	N	direct	Director	23/05/18	01/12/19	Interest Noted
			Oakem LLP	Y	N	N	direct	Partner	23/05/18	31/04/19	Interest Noted
			Boxhill Auto Solutions Ltd	N	Y	N	direct	Director	23/05/18	31/04/19	Interest Noted

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Surrey Health and Social Care

SURREY COMMISSIONING COMMITTEES IN COMMON MINUTES

Committees in Common between the following CCGs and Surrey County Council

NHS North East Hants and Farnham CCG	✓
NHS Surrey Heartlands CCG	✓
NHS Surrey Heath CCG	✓
Surrey County Council	✓

Date	Thursday 28 May 2020	Time	14:00- 15:00
Venue	Virtual meeting		

Members/ Attendees:

Name	Title/ Role	Attendance (✓)/ Apologies (A)			
		Surrey Heartlands CCG	North East Hants and Farnham CCG	Surrey Heath CCG	Surrey County Council
Convener					
Dr Charlotte Canniff (CC)	Clinical Chair, Surrey Heartlands CCG	✓			
Members					
Dr Charlotte Canniff (CC)	Clinical Chair, Surrey Heartlands CCG	✓			
Jacqui Burke (JB)	Lay Member Audit, Surrey Heartlands CCG	✓			
Jonathan Perkins (JP)	Lay Member Finance, Surrey Heartlands CCG	✓			
Julia Dutchman-Bailey (JDB)	Registered Nurse, Surrey Heartlands CCG	✓			
Matthew Tait (MT)	ICS Chief Officer	✓			
Karen McDowell (KMc)	ICS Director of Finance	✓			
Steven Clarke (SC)	Clinical Leader, North East Hants and Farnham CCG		A		

Reviewed by: CC (07/07/2020)

Name	Title/ Role	Attendance (✓)/ Apologies (A)			
		Surrey Heartlands CCG	North East Hants and Farnham CCG	Surrey Heath CCG	Surrey County Council
Kathy Atkinson (KA)	Lay Member, North East Hants and Farnham CCG	A			
Nicola Airey (NA)	Managing Director, Surrey Heath CCG <i>(also representing North East Hants and Farnham CCG)</i>		✓		
TBC	Lay Member, Surrey Heath CCG		-		
TBC	Secondary Care Consultant , Surrey Heath CCG		-		
Cllr Tim Oliver (TO)	Leader of the Council (Chair)				✓
Cllr Sinead Mooney (SM)	Cabinet Member for Adults and Public Health				✓
Cllr Mary Lewis (ML)	Cabinet Member for Children, Young People and Families				✓
Attendees					
Daryl Gasson (DC)	Managing Director, North East Hants and Farnham CCG	✓			
Tom Lawlor (TL)	Interim Associate Director of Commissioning, Surrey Heath CCG		✓		
Julia Cramp (JC)	Emotional Wellbeing and Mental Health Transformation Programme Lead				✓
Hayley Connor (HC)	Director of Commissioning, Children, Families, Lifelong Learning and Culture				✓
Helen Rostill (HR)	ICS Director of Mental Health Services	✓			
Dave Hill (DH)	Executive Director for Children, Life Long Learning and Culture, Surrey County Council				✓
Andy Vowles (AV)					
Rachel Crossley (RC)	Director of Strategic, Commissioning Surrey County Council				✓
Claire Kennedy (CK) <i>For item 7</i>	PPL	✓			
Trudy Mills (TM)	ICS Director of Childrens and Learning Disability Services	✓			
Helen Rostill (HR)	ICS Director of Mental Health Service	✓			
Natasha Moore (NM)	(Minute-taker) Governance Manager	✓			

Item No.	Discussion and actions raised	Who	By when								
1	<p>Welcome, Introductions and Apologies The Committees confirmed CC as Convener for this meeting. The Convener welcomed members and attendees; apologies were received as detailed above.</p> <p>It was noted that this meeting was taking place virtually, consistent with the Government guidance for COVID-19.</p> <p>They reminded all that the meeting would be recorded for administration purposes only; and the recording would be deleted once the minutes had been approved.</p>										
2	<p>Declarations of Interest</p> <p>a) To receive confirmation from all members and attendees that their entry in the Register of Interests is up-to-date, accurate and complete.</p> <p>b) To receive any declarations of interest pertinent to items on this agenda.</p> <p>The Chair noted the register of members' and attendees' interests included in the meeting papers. The Chair invited members and attendees to report any new declarations; amendments to the register; or any conflicts pertinent to items on this agenda. None were received.</p>										
3	<p>Quorum</p> <p>As the required quorum was met for the following organisations:</p> <ul style="list-style-type: none"> • North East Hants and Farnham CCG • Surrey Heartlands CCG • Surrey Heath CCG • Surrey County Council 										
4	<p>Minutes from last meeting on 18/12/2019 The minutes of the last meeting were presented.</p> <p>Recommendation/s:</p> <table border="1" data-bbox="263 1596 1076 1754"> <tr> <td>NHS North East Hants and Farnham CCG</td> <td>✓</td> </tr> <tr> <td>NHS Surrey Heartlands CCG</td> <td>✓</td> </tr> <tr> <td>NHS Surrey Heath CCG</td> <td>✓</td> </tr> <tr> <td>Surrey County Council</td> <td>✓</td> </tr> </table> <p>The above Surrey-wide Commissioning Committees are asked:</p> <ul style="list-style-type: none"> • TO APPROVE the minutes of the last meeting. <p>The Surrey-wide Commissioning Committees:</p> <ul style="list-style-type: none"> • APPROVED the minutes of the last meeting. 	NHS North East Hants and Farnham CCG	✓	NHS Surrey Heartlands CCG	✓	NHS Surrey Heath CCG	✓	Surrey County Council	✓		
NHS North East Hants and Farnham CCG	✓										
NHS Surrey Heartlands CCG	✓										
NHS Surrey Heath CCG	✓										
Surrey County Council	✓										

Item No.	Discussion and actions raised	Who	By when
5	<p>Action Log</p> <p>It was noted that shaded actions on the log were marked as completed and would only be discussed by exception. The following open actions were discussed:</p> <p><u>7. Planning of 20/21 final year of Mental Health Five Year Forward View (FYFV) Deliverables; MT to obtain clarity as follows: -provide details of performance in the performance reports going forward; -clarify RAG ratings in table in 2.1 and in table in 3.3; -clarity on section 2.1 of the report regarding MH investment across system; -downward trajectory of ES dementia diagnosis rates.</u> It was confirmed that all actions had been resolved and clarified as the report has progressed. Deliverables had not yet been agreed but that these would be considered as forward plan progresses.</p> <p>JB asked for a timescale for when this work would be implemented. MT confirmed that a quarterly performance report to the Committees in Common was being planned. He agreed to provide an update at the next meeting on this work.</p>		
6	<p>Integrated Commissioning</p> <p>MT presented the above noting that the report presented the latest work undertaken with regards to areas for potential future integration. This work had an initial focus on Childrens Commissioning and the report being presented had two recommendations: firstly, implementation of a single team (the report summarised advantages and challenges of this approach, as well as the rationale for the approach); and secondly, that potential other areas for integration are explored.</p> <p>DH added that the aim has always been that Childrens Services provide the best possible outcome for children, despite recently challenges. He added he and colleagues were supportive of the report, which accelerates this work.</p> <p>CK from PPL echoed the areas raised by colleagues as above. She added that although the report is complex, it is a testament to the level of engagement and positive joint working from all organisations, particularly through the current period of responding to the COVID-19 pandemic.</p> <p>TM added that during the recent COVID pandemic period, this joint working had only further accelerated and strengthened. She commented that formal integration of the team was the natural next step.</p>		

Item No.	Discussion and actions raised	Who	By when								
	<p>NA queried the scope as per section 2 and asked for clarity on Local Maternity Services (LMS). TM clarified that it was acknowledged that in some areas, this was provided via an acute service but that the strategic oversight for LMS would be within the scope of the report. This would include maintaining links between neighbouring systems, such as Sussex and Frimley. It was agreed to clarify this within the report.</p> <p>NA added that North East Hants and Farnham and Surrey heath CCGs were keen to be involved in future development work on the governance structures for the integrated team.</p> <p>Recommendation/s:</p> <table border="1" data-bbox="255 781 1081 938"> <tr> <td data-bbox="255 781 938 826">NHS North East Hants and Farnham CCG</td><td data-bbox="938 781 1081 826">✓</td></tr> <tr> <td data-bbox="255 826 938 871">NHS Surrey Heartlands CCG</td><td data-bbox="938 826 1081 871">✓</td></tr> <tr> <td data-bbox="255 871 938 916">NHS Surrey Heath CCG</td><td data-bbox="938 871 1081 916">✓</td></tr> <tr> <td data-bbox="255 916 938 938">Surrey County Council</td><td data-bbox="938 916 1081 938">✓</td></tr> </table> <p>The above Surrey-wide Commissioning Committees are asked:</p> <ul style="list-style-type: none"> • TO APPROVE the creation of a single team that brings together the existing areas of joint commissioning in Children's Services. • TO APPROVE the proposal to explore options to integrate services in additional areas where this will improve outcomes, to be brought back to the Committee in Common for subsequent decision. <p>The Surrey-wide Commissioning Committees:</p> <ul style="list-style-type: none"> • APPROVED the creation of a single team. • APPROVED the proposal to explore options to integrate services for discussion at a future meeting. 	NHS North East Hants and Farnham CCG	✓	NHS Surrey Heartlands CCG	✓	NHS Surrey Heath CCG	✓	Surrey County Council	✓		
NHS North East Hants and Farnham CCG	✓										
NHS Surrey Heartlands CCG	✓										
NHS Surrey Heath CCG	✓										
Surrey County Council	✓										
7	AOB No other business was raised.										

Item No.	Discussion and actions raised	Who	By when
8	Meeting close Meeting closed.		
Date of next meeting: Wednesday 30 September 2020; 10:00; Location tbc			
Signed and agreed by:			
<p>Date: DD MMM YYYY Dr Charlotte Canniff, Clinical Chair, Surrey Heartlands CCG (Convener)</p>			

Surrey Health & Social Care

Surrey-wide Commissioning Committees in Common

Terms of Reference

NHS Surrey Heartlands CCG	✓
NHS North East Hants & Farnham CCG	✓
NHS Surrey Heath CCG	✓
Surrey County Council	✓

Approved: September 2020 (tbc)

Next review due: September 2021

1. Context

- 1.1. Surrey County Council and the three Surrey CCGs wish to collaborate and integrate the commissioning of Health & Social Care.
- 1.2. The integration approach varies across the three CCGs.
 - The three Surrey CCGs will each establish a Surrey Commissioning Committee that will meet in Common with a Commissioning Committee established by Surrey County Council.
 - The collaborative working between the CCGs and Surrey County Council will be underpinned through an agreement of a suite of agreements under section 75 of National Health Services Act 2006.
 - The three CCGs are members of three different Integrated Care Systems (ICS) and therefore:
 - may not be able to make some collaborative decisions with their Surrey partners. However, there will be a need for them to participate in the discussion with other Surrey decision-making Committees' members to order to manage the consequences of a decision on their services.
 - will need to report into their own ICS for oversight and assurance purposes.

Introduction

- 1.3. Each of the three Surrey Clinical Commissioning Group Governing Bodies has resolved to establish a committee of the Governing Body known as the Surrey

Commissioning Committee ('the Committee') in accordance with Schedule 1A of the National Health Service Act 2006 (as amended) ("the NHS Act").

- 1.4. The Committee is established in accordance with each of the CCG's constitution and, where agreed, any delegation of functions from NHS England (also known as 'the NHS Commissioning Board' or the 'Board' under section 13Z of the NHS Act). 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 CCG's constitution.
- 1.5. Under Section 9E of the Local Government Act 2000 the Leader of a local authority operating executive governance arrangements, such as Surrey, may determine to whom executive functions are delegated. Such delegation of functions may be made to a number of defined groups, including a sub-committee of the executive. So long as that sub-committee meets the general local government requirements for taking decisions, it may meet in any location to transact its business. Surrey County Leader will establish committee called the "Surrey Commissioning Committee" and delegate to it the decision-making of Surrey County Council health-related commissioning functions.
- 1.6. The Committee will meet "in common" with one or more of the other Surrey CCGs, an equivalent Surrey County Council Commissioning Committee and an NHSE Officer. (The Committee may meet individually where there is a matter that is only relevant to a single organisation.)

2. Purpose & Objectives

- 2.1. The Committee exercises oversight for health and social care commissioning across Surrey including any responsibilities delegated to it from local and national partners. The Committee will be outcomes led, taking into account best clinical & social care practice and the views of the citizens of Surrey.
- 2.2. The Committee is:
 - A forum for bringing together representatives from the County Council, the three Surrey Clinical Commissioning Groups and NHS England to develop and discuss proposals and make aligned decisions relating to the commissioning of Surrey health and social care services.
 - Responsible for taking commissioning decisions within the scope/ set of functions delegated to it by local/ national partners.
- 2.3. The Committee will operate in line with the principles, vision and objectives set out in:
 - The Surrey Joint Health & Well-being Strategy;
 - Surrey Heartlands Devolution Trilateral Agreement (the "Surrey Heartlands Vision").

- 2.4. The Committee will make health & care commissioning decisions for Surrey residents.
- In developing the scheme of delegation (including any functions delegated to Surrey CCGs by national partners), the Committee will pay due regard to the principle of subsidiarity to ensure that decision making authority is delegated to the most appropriate level.
- 2.5. The Committee may only make decisions that the Governing Body / Surrey County Council Cabinet has delegated to it (listed in Annex 1). The Committee may enter into discussions with other committees that are making a decision for services that have not been delegated to it. This allows the Committee to be informed and inform the other committees of the impact of their decisions on the Committee.

3. Accountability/ Delegated Authority

- 3.1. The Committee is accountable to the Governing Body/ Surrey County Council Cabinet.
- 3.2. The minutes of Committee meetings shall be formally recorded and submitted to the Governing Body/ Surrey County Council Cabinet. The Chair shall draw to the attention of the Governing Body/ Surrey County Council Cabinet any issues that require consideration or require executive action. (For clarity – Any minutes from the confidential part of a meeting (Part II) will be considered in the Part II Governing Body / Surrey County Council Cabinet meeting.)
- 3.3. The Committee also reports strategic or “at scale” decisions to the relevant Integrated System Board and Integrated care partnerships for delivery.
- 3.4. Where a “Committees in Common” meeting arrangement is used, the minutes will be written as if only the Committee met¹.
- 3.5. The Committee is authorised by the Governing Body/ Surrey County Council Cabinet to investigate any activity within these terms of reference. It is authorised to seek any information it requires from any member, officer or employee who are directed to co-operate with any request made by the Committee. The Committee is authorised by the Governing Body/ Surrey County Council Cabinet to obtain outside legal or other independent professional advice and to secure the attendance of other individuals with relevant experience and expertise if it considers necessary.
- 3.6. The Committee makes strategic or “at scale” decisions and reports these to various local forums, e.g. Integrated Care Organisations for delivery or influencing local commissioning. This is in addition to reporting to the Governing Body/ Surrey County Council Cabinet.

¹ The minutes will be usually written generically e.g. “The Committee agreed that” and therefore identical for all the committees meeting in common. The start of the minutes will have a Header denoting the name of each Committee participating in the meeting in common.

- 3.7. There is a three stage mechanism for delegating decisions to the Surrey Commissioning Committee:
- a) **Enable Delegation to the Surrey Commissioning Committee**
The Governing Body / Surrey County Council Cabinet decides to delegate the preparation of a list of collaborative decisions to their executive and that the decisions for these are delegated to the Surrey Commissioning Committee.
 - b) **Describe the Scope of the Surrey Commissioning Committee**
The Surrey Commissioning Committee advises its parent bodies the scope of services that are suitable for collaborative commissioning and adds these as at Annex 1 to these Terms of Reference.
 - c) **Delegation of Decisions to the Surrey Commissioning Committee**
The executive of each participating organisation decides what in-scope decisions it will delegate to Surrey Commissioning Committee. The individual organisation's list is approved by its Governing Body / Surrey County Council Cabinet and added to Annex 1.

4. Sub Committees & Delegation

- 4.1. The Committee may delegate tasks to such individuals, sub-committees or third parties 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.

5. Responsibilities

- 5.1. Subject always to the Surrey Health & Care Vision, the key responsibilities of the Committee are:
- To develop and agree the mechanism and protocol to determine what should be commissioned at a Surrey or CCG level, subject to agreement by the relevant partners;
 - To exercise oversight of the commissioning of health and social care services for the people of Surrey;
 - To develop proposals for policies and / or agree the principles for the procurement of and/or the award of contracts to deliver health and social care services in Surrey;
 - To agree the overall principles for the allocation of resources across Surrey;
 - To review and pay due regard to the outcome of any consultations in relation to proposed significant services changes;

- To ensure decisions are taken and resources allocated to give the best value for money/ outcomes for residents;
 - To define (and rationalise where required) the supporting governance arrangements for the Committee particularly where it meets “in common”.
- 5.2. As set out in the Surrey Heartlands Investment Framework, the Committee may receive delegated responsibility to enable the application and approval of transformation funds across Surrey:
- Formally deciding on opportunities to prioritise and case for change;
 - Formally deciding on the approval of Level 3 investments.

6. Membership

- 6.1. The membership of the Committee is described in Annex 2.
- 6.2. The membership must be sufficient for the Committee to make decisions that have been delegated to it. The membership may be different to the partner organisations participating in the “in common” meeting. Each organisation will recognise the need of establishing a functional “in common” meeting.
- 6.3. Appointment of Members:
- The members of the Committee shall be appointed with approval from the Governing Body/ Surrey County Council Cabinet.
 - There shall be no bar to a particularly valued member returning to the Committee if a vacancy occurs in future years.
- 6.4. Members of the Committee should aim to attend all scheduled meetings. The Chair of the Committee will review with the Chair of the Governing Body/ Surrey County Council Cabinet any circumstances in which a Member’s attendance falls below 75% attendance.

7. Co-opted members/ deputies/ attendees

- 7.1. Committee members may nominate a suitable deputy when necessary and subject to the approval of the Chair. All deputies should be fully briefed and the secretariat informed of any agreement to deputise so that quoracy can be maintained.
- 7.2. No person attending the meeting in one role can additionally act on behalf of another person as their deputy. A member may attend a meeting and simultaneously be a member or a deputy for a member of another meeting that is meeting “in common”.
- 7.3. People from a range of areas may be invited to attend based on the needs of the agenda.

8. The Convener – (Committees in Common)

- 8.1. Where the Committee is using the “Committees in Common” meeting approach, the participating Chairs will either select:
 - a “Convener” from amongst themselves; or
 - an independent individual to be the “Convener”.
- 8.2. All the participating Committees will agree to allow the selected Convener to Chair the committees in common meeting.
- 8.3. The Convener will rotate amongst the participating Chairs, although there may be occasions when the business will indicate which of the Chairs would be most appropriate to be the Convener.

9. Quorum

- 9.1. The quorum for the Committee is described in Annex 2.
- 9.2. The quorum may be different to the partner organisations participating in the “in common” meeting.
- 9.3. The Convener will ask each of the participating Chairs to decide if the meeting is quorate after any actions have been taken to manage any declared conflicts of interest.
- 9.4. Nominated deputies attending Committee meetings, on behalf of substantive members, will count towards quorum.
- 9.5. If a meeting is not quorate, the Convener may adjourn the meeting to permit the appointment or co-option of additional members if necessary. The Committee Chair will have the final decision as to their suitability.
- 9.6. Any decisions put to a vote at a Committee meeting shall be determined by a majority of the votes of members present. (For clarity: members may be physically attending the meeting or participating by an agreed telecommunications link). In the case of an equal vote, the Chair shall have a second and casting vote. The Chair will declare the result of the vote.

10. Meetings

- 10.1. The Committee will meet formally on a quarterly basis and have an annual rolling programme of meeting dates and agenda items.
- 10.2. In addition to the above formal meetings, the Committee will meet informally in private for development sessions/ seminars.
- 10.3. The Committee will operate in accordance with the CCGs’/ Surrey County Council’s Standing Orders.

- 10.4. The CCGs'/ Surrey County Council's Corporate Office will be responsible for ensuring administrative support to each Committee.
- 10.5. The Surrey Heartlands' CCGs Governance Team will administer all meetings held "in Common". This will include:
 - Giving notice of meetings (including, when the Chair of the Committee deems it necessary in light of the urgent circumstances, calling a meeting at short notice);
 - Issuing an agenda and supporting papers to each member and attendee no later than 5 days before the date of the meeting;
 - Ensuring an accurate record (minutes) of the meeting.
- 10.6. The Committee will meet in public and agendas and papers will be published at least seven working days in advance of the meeting except where confidential or sensitive information is likely to be disclosed. This may include:
 - information given to any of the partners in confidence;
 - information about an individual that it would be a breach of the Data Protection Act to disclose; or
 - information the disclosure of which could prejudice the commercial interests of any of the partners or third parties.
- 10.7. Meetings may be held by conference call or by electronic means, so long as the technology provides live and uninterrupted conferencing facilities.
- 10.8. With the agreement of the Chair and by exception, one or more Members of the Committee may participate in meetings in person or virtually by using video or telephone or web link or other live and uninterrupted conferencing facilities.
- 10.9. An extra meeting of the Committee can be called at the request of the Chair.
- 10.10. Where an extra meeting needs to be scheduled, every endeavour will be made to give at least 10 working days' notice. Notification will be given by email.
- 10.11. 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 (Admission to Meetings) Act 1960 as amended or succeeded from time to time.
- 10.12. Non-voting people present at a meeting may be required to withdraw from the confidential part of the meeting.
- 10.13. 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 endeavour to reach a collective view.

11. Agenda Preparation

- 11.1. The Committee will develop the forward-looking rolling Agenda programme, maintained by the secretariat.
- 11.2. The Convener will work with the secretariat on the preparation of the next meeting agenda and consult with the other participating Chairs.

12. Managing Conflicts of Interest

- 12.1. The members of the Committee must comply fully with NHS England Guidance and CCG Policy regarding Conflict of Interest².
- 12.2. The Convener is responsible for managing conflicts of interest at a meeting of the Committee. If the Convener has a conflict of interest, then one of the other participating Chairs or another member of the Committee is responsible for deciding the appropriate course of action.
- 12.3. At the start of the meeting, the Convener will invite members to declare if they have any conflicts of interest with the business to be conducted, including previously declared interests.
- 12.4. The Convener will decide any necessary course of action to manage a declared conflict of interest as advised by the CCGs' Conflict of Interest Policy.
- 12.5. Any declared conflicts of interest will be recorded in the minutes along with any action taken, in a form as advised by the CCG Conflict of Interest Policy. In summary the information recorded is
 - the name of the person noting the interest;
 - the nature of the interest and why it gives rise to the conflict;
 - the item of the agenda to which the interest related;
 - how it was agreed that the conflict should be managed;
 - evidence that the conflict was managed as intended.

13. Decision-making (Committees in Common)

- 13.1. The aim of the Committee is to achieve consensus decision-making wherever possible.
- 13.2. The Committee will normally meet using the "Committees in Common" arrangement with the other Surrey CCGs and Surrey County Council. When the Convener

² The Management of Conflicts of Interest is included in the CCG Business Conduct Policy.

- determines a consensus has been achieved by the members present then the decision will be considered to have been made by the Committee.
- 13.3. Each voting member of the Committee shall have one vote. (It should be noted that an individual may be a member of more than one committee and is entitled to place their vote in each of their committees.)
 - 13.4. If the Convener determines that there is no consensus or one member disputes that consensus has been achieved, a vote will be taken by the Committee members. (The other CCG Committees meeting at the same time will likewise take a vote.) The vote will be passed with a simple majority the votes of the Committee members present. In the case of an equal vote, the Chair shall have a second and casting vote.
 - 13.5. The outcome of the vote will be shared with the other participating organisations in the “in common” meeting. There are two possible results:
 - a) **All Committees support the decision** – The decision is supported and becomes binding on the participating organisations.
 - b) **One or more Committees do not support the decision** – The meeting makes a judgement as to whether the decision can be delivered only in the organisations supporting the decision. If this is not possible the decision is declared as not being supported by all participating organisations.For clarity – The “In-Common” meeting cannot force an individual organisation to support a decision.
- 13.6. The result of the vote will be recorded in the minutes and a record will also be made of the outcome of the voting for the other committees participating in the decision.
 - 13.7. All decisions taken in good faith at a meeting of the Committee shall be valid even if there is any vacancy in its membership or, it is discovered subsequently, that there was a defect in the calling of the meeting, or the appointment of a member attending the meeting

14. Decision-making (Single Committee Issue)

- 14.1. On occasions, an agenda item at a CIC meeting will be considered that is pertinent to only one participant Committee. All meeting members may contribute to the discussion. When a decision needs to be made, the Convener will invite committees not affected by the item to abstain from the decision-making.
- 14.2. A record of the discussion and decision need only be included in the minutes of the Committee involved in the item.

15. Emergency/ Chair's action

- 15.1. The Committee will delegate responsibility for emergency powers and urgent decisions to the Chair of each Committee who must consult at least one other member of the Committee.
- 15.2. Urgent decisions must be reported to the next Committee meeting following the urgent decision for ratification by the full meeting together with a report detailing the grounds on which it was decided to take the decision on an urgent basis and the efforts made to contact the relevant other members of the Committee prior to taking the decision.

16. Secretariat

- 16.1. The Surrey Heartlands' Governance Team will ensure the provision of a Secretary to the meeting who shall attend to take minutes of the meetings and provide appropriate administrative support to the Convener, Committee Chair and Committee members.
- 16.2. The Surrey Heartlands' Governance Team will be responsible for supporting the Convener in the management of the Committee's business and for drawing the Committee's attention to best practice, national guidance and other relevant documents as appropriate.
- 16.3. The Meeting Secretary will ensure minutes of the Committee will be presented to the next meeting for formal sign off and made available to the participating organisations for publication on their website. Minutes or sections of minutes which are of a confidential nature which would not be disclosed under a Freedom of Information Act request will not be made available on the participants' websites.

17. Policy and Best Practice

- 17.1. The Committee will apply best corporate governance practice in its decision-making processes, covering a clear ethical basis to the business being considered; aligned business goals; an effective strategy incorporating stakeholder values; a well governed organisation and reporting systems to provide transparency and accountability.

18. Conduct of the Committee

- 18.1. The CCG/ Surrey County Council has a code of conduct in place which defines required standards of behaviour for individuals working within this organisation, and those performing or authorising activities or advisory duties on our behalf. The Committee and its membership will conduct itself in accordance with these standards and principles.
- 18.2. The CCG code of conduct specifically covers an employee/member's responsibility in relation to hospitality and gifts, and has regard to:

- Professional Standards Authority: Standards for Members of NHS Boards and Clinical Commissioning Group Governing Bodies in England,
 - NHS Business Services Authority: Standards of Business Conduct Procedure,
 - Nolan seven principles of public life.
- 18.3. The Surrey County Council code of conduct covers members'/ employees' responsibilities in relation to managing conflicts of interest, hospitality and gifts.

19. Review of Terms of Reference

- 19.1. The Committee will also self-assess its performance on an annual basis (normally starting each November), referencing its work plan to ensure that the business transacted in meetings has effectively discharged the duties as set out in the Terms of Reference.
- 19.2. These terms of reference will be reviewed annually by the Committee membership. Any proposed significant changes to the ToR and responsibilities will be presented to the CCG Governing Body/ Surrey County Council Cabinet for approval.

20. Review History

- 20.1. These Terms of Reference are used by all three Surrey CCGs and Surrey County Council.

Annex 1: List of commissioning decisions delegated to Surrey Commissioning Committees in Common

Service/ Scheme	Surrey Heartlands CCG	North East Hants & Farnham CCG	Surrey Heath CCG	Surrey County Council
Acute Commissioning				
South Central Ambulance Service-Patient Transport Service	Delegated	Delegated	Delegated	No
Mental Health Services				
Mental Health Services -Adult	Delegated	Delegated	Delegated	Delegated
CAMHS	Delegated	Delegated	Delegated	Delegated
Local Authority / Joint Services - CAMHS	Delegated	Delegated	Delegated	Delegated
IAPT Service	Delegated	Delegated	No	No
MH - Transformation	Delegated	Delegated	No	No
MH - SLAs-Other providers (non-NHS, inc. VS)	Delegated	Delegated	No	No
MH - NCAs	Delegated	Delegated	No	No
Learning Disability Services				
Learning Disability Services	Delegated	Delegated	Delegated	Delegated
Community				
Healthy Children & Families	Delegated	Delegated	Delegated	Delegated
Wheelchair services	Delegated	Delegated	Delegated	No
Children - SLAs - Other providers (Non-NHS, incl. VS)	Delegated	Delegated	Need to split further	No
Continuing Health Care				
Continuing Care Services (All Care Groups)	Delegated	Delegated	Delegated	Delegated
Funded Nursing Care	Delegated	Delegated	Delegated	Delegated
Children Services - Sussex Community NHS FT	Delegated	Delegated	Delegated	Delegated
Children Services - Continuing Care Services	Delegated	Delegated	Delegated	Delegated
Hosted - Continuing Healthcare Assessment & Support	Delegated	Delegated	Delegated	Delegated

Service/ Scheme	Surrey Heartlands CCG	North East Hants & Farnham CCG	Surrey Heath CCG	Surrey County Council
Better Care Fund				
Better Care Fund	Delegated	Delegated	Delegate Surrey Wide services. For others, need to split out and decide line by line for ones which are more locality specific.	Delegated
Public Health				
Public	No	No	No	Delegated

Annex 2: Committee Membership and Quorum

Organisation	Voting members		Quorum
	Role	Name (<i>deputies</i>)	
Surrey Heartlands CCG	Clinical Chair	Dr Charlotte Canniff (<i>any other Governing Body GP can deputise</i>)	A minimum of three members including: <ul style="list-style-type: none"> • Clinical Chair or GP Member; • A Lay/Independent Member; and • Accountable Officer or Chief Finance Officer.
	Surrey-wide GP ³	Dr Timothy Bates	
	Lay Member – Audit	Jacqui Burke	
	Lay Member – General	Jonathan Perkins	
	Registered Nurse	Julia Dutchman-Bailey	
	Accountable Officer	Dr Claire Fuller (Interim CCG AO)	
	Chief Finance Officer	Karen McDowell	
North East Hants & Farnham CCG	Clinical member of the Governing Body	Steven Clarke, Clinical Leader	One member
	Lay Member	Kathy Atkinson, Lay Member	
	An Executive Director	Nicola Airey, Managing Director, Surrey Heath CCG (can also act on behalf of Surrey Heath CCG)/ Daryl Gleeson, Managing Director, NEH&F CCG/ Other post holders TBC	
Surrey Heath CCG	Lay Member (either Lay Chair, Lay Member for Audit and Governance, Lay Person for PPE)	TBC	It is expected that two members will normally attend the meeting; however, quoracy will be agreed as one member with delegated authority. The CCG may also invite a subject matter expert to help inform the decision.
	Secondary Care Consultant	TBC	
	Executive Director (either Chief Finance Officer, Dir Planning and Delivery, Director Quality and Nursing, Chief Officer)	Nicola Airey, Managing Director, Surrey Heath CCG (Can also act on behalf of NEH&F CCG)/ Other post holders TBC	

³ (*Subject to Surrey Heartlands CCG Governing Body approval on 30/09/2020*)

Organisation	Voting members		Quorum
	Role	Name (<i>deputies</i>)	
Surrey County Council	Leader of the Council	Cllr Tim Oliver *	Any three Cabinet Members.
	Cabinet Member for Adults and Public Health	Cllr Sinead Mooney*	
	Cabinet Member for Children, Young People and Families	Cllr Mary Lewis *	
<p><i>*Deputy will be any other SCC Cabinet Member as nominated by the Leader of the Council.</i></p>			

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