

**NORTH EAST LINCOLNSHIRE CLINICAL COMMISSIONING GROUP**

**TERMS OF REFERENCE**

**CARE CONTRACTING COMMITTEE**

# 1. PURPOSE

 The Care Contracting Committee (CCC) is a Committee of the Clinical Commissioning Group Governing Body that has been delegated the responsibility for ensuring that the market shape agreed by the Council of Members is achieved.

The CCC will also oversee all procurement processes ensuring that they are enacting decisions taken by the Council of Members and that the CCG is compliant with external regulations and requirements including relevant procurement law.

The CCC will oversee all the CCGs contracts except for those which relate solely to General Practice, for example, Primary Medical Contracts and General Medical Contracts. These will be managed by the CCG’s Primary Care co-commissioning committee (PCCC). Where it is not clear whether a contract should be overseen by the CCC or the PCCC, the CCC will determine whether General Practice is the most capable provider or not, and therefore which is the most appropriate committee to deal with the contract/procurement.

# 2. ACCOUNTABILITY

 The CCC is a permanent Committee of the CCG Governing Body. The roles and responsibilities described in these terms of reference have been delegated to the CCC by the Governing Body.

# 3. REPORTING

 The CCC reports to the CCG Governing Body. The recommendations of the Committee and the minutes will be reported to the CCG Governing Body.

Minutes of the CCC meeting will be made available electronically to CCG Governing Body members after approval by the Chair.

4. CONSTITUTION

 All Committee Members must adhere to the CCG’s Constitution.

# 5. COMMITTEE CHAIR AND DEPUTY CHAIR

 The Chair of the Committee will be the Chief Operating Officer.

 The Deputy Chair of the Committee will be the Chief Finance Officer.

# 6. MEMBERSHIP

The Committee membership shall be:-

* 1 Lay Member (Governing Body)
* 1 Community Lead
* Chief Operating Officer (Chair)
* Chief Finance Officer (Deputy Chair)
* Director of Quality and Nursing
* Director of Adult Services (NELC)
* Medical Director
* 1 clinical representative (who must be a GP)
* 1 Social work professional

Members are required to attend scheduled meetings. Attendance will be monitored throughout the year and any concerns raised with the Chair and relevant Member.

The Committee may also extend invitations to other personnel with relevant skills, experience or expertise as necessary to deal with the business on the agenda. Such personnel will be in attendance and will have no voting rights. This will normally include: -

* Portfolio Holder Health and Wellbeing
* Assistant Director of Contracting and Performance
* Contract Manager
* Assistant Director Programme Delivery and Primary Care

The Care Contracting Committee may request the attendance of any member of staff from the CCG or outside organisations as and when appropriate.

# 7. QUORACY

 The Care Contracting Committee will be quorate if 5 of the members are present.

Where a quorum cannot be convened from the membership of the meeting, owing to the arrangements for managing conflicts of interest or potential conflicts of interest, the Chair of the meeting shall consult with the Conflict of Interest Guardian or Chief Finance Officer on the action to be taken.

# 8. DECISION MAKING/VOTING

 If a member is not able to attend, deputies may attend meetings on their behalf but shall not vote.

# 9. SUBGROUPS

The committee shall establish subgroups to support delivery of its functions and responsibilities as and when it deems appropriate. Standing groups shall be:

* Individual Commissioning Approval and Advice Panel (ICAAP) which has been established to ensure that appropriate individual contracts are put in place.
* The Market Intelligence and Failing Services Committee, which has been established to ensure that care homes are maintaining appropriate care standards

On a bi-annual basis the CCC should receive an overview report from each of the sub committees to provide assurance that they are acting in accordance with the CCC remit.

# 10. ROLES AND RESPONSIBILITIES

 The Care Contracting Committee will:

* Monitor Value for Money, ensuring contracts are robust and deliver the requirements of the Commissioning Strategy.
* Oversee the contract implementation of all Commissioning Plans and Business Cases that support the delivery of the Commissioning Strategy.
* Ensure appropriate contracts and contractual arrangements are in place to support effective commissioning in line with the requirements of national guidance and local requirements.
* Ensure that material or contentious amendments to contracts are carried out in accordance with relevant legal & contract law requirements
* Ensure contracts are in place to deliver the Commissioning Strategy approved by the CCG Governing Body.
* Provide assurance to the CCG governing Body that all contracts meet the required external regulation standards, as well as local quality standards and relevant agreed protocols
* Provide assurance to the CCG Governing Body that due process is being followed for all procurements
* Ensure safe and effective reshaping of the market to deliver the commissioning strategy and ensure service delivery
* Oversee the CCGs collaborative commissioning arrangements including approving changes to those arrangements when required
* Advise on approval of individual contracts (other than NHS contracts) of a capital or revenue nature amounting to, or likely to amount to over £250,000 over a 3-year period or the period of the contract if longer
* Receive and approve a schedule of NHS service agreements signed in accordance with the requirements of the NHS Operating framework and agreed by the Chief Operating Officer
* Provide feedback in year as to the financial operation of CCG contracts both Health and Adult Social care. This would highlight issues of significant over or under trades or risks with associated reasons and any remedial actions already in place or requiring agreement.

# 11. DECLARATIONS OF INTERESTS, CONFLICTS AND POTENTIAL CONFLICTS

 All committee/subcommittee members must adhere to the CCG’s Constitution and Standards of Business Conduct / Conflicts of Interest policies, together with NHS England statutory guidance on managing conflicts of interest.

 Where a member of the committee/subcommittee/group believes that he /she has a conflict of interest in relation to one or more agenda items, they must declare this at the beginning of the meeting wherever possible, and always in advance of the agenda item being discussed. It will be responsibility of the Chair to decide how to manage the conflict and the appropriate course of action.

 To further strengthen scrutiny and transparency of CCG’s decision-making processes the CCG has an appointed Conflict of Interest Guardian. This role is undertaken by the CCG’s Integrated Governance and Audit Chair.

 Any interests which are declared at a meeting must be included on the CCG’s Declaration of Interest Register. Where this is not already the case, the individual with the conflict must ensure that the item is added to their declaration as soon as is practicable following the meeting.

# 12. FREEDOM OF INFORMATION ACT 2000

 The minutes and papers of this Committee are, in the main, classed as public documents, except where matters, usually due to draft work in progress, issues of confidentiality or commercial sensitivity, are specifically deemed to be unsuitable for publication.

# 13. MEETING PAPERS

 The Chairman of the Care Contracting Committee will draw up the agenda for each meeting. The agenda and papers will be distributed five days in advance of the meeting.

# 14. FREQUENCY AND NOTICE OF MEETINGS

 The Care Contracting Committee will meet 4 times a year as a minimum and will make decisions where required in between meetings on a virtual meeting basis.

 Meetings of the Care Contracting Committee will be planned for the calendar year ahead.

# 15. ADMINISTRATIVE SUPPORT

 Administrative support will be provided to the Care Contracting Committee by a member of staff from the CCG Exec Admin team.

 The minute secretary to Care Contracting Committee will record meetings (both actual and virtual) and detail the recommendations of the Committee.

# 16. REVIEW OF TERMS OF REFERENCE

 These Terms of Reference will be reviewed on an annual basis.

 Agreed by Care Contracting Committee on 10 February 2021

 Approved by the Governing Body on 11 March 2021