

## QUALITY, FINANCE & GOVERNANCE COMMITTEE

### TERMS OF REFERENCE

#### 1. ROLE OF THE COMMITTEE

##### **Purpose:**

The Committee will scrutinise and provide the Board with assurance on the quality, safety, financial and service performance (including delivery of the CCG's programme of financial savings) of the CCG's commissioned services – except where delegated to the STP CCG Joint Committee – and the CCG's governance arrangements, including information governance, equality & diversity, health and safety and human resources management.

##### **Objectives:**

The Committee will monitor, on behalf of the CCG Board, delivery of the CCG's financial, operational and performance targets. In meeting its responsibilities the Committee will:

- Provide assurance and advise the Board on the contractual and national standard performance and quality indicators of CCG commissioned services. Issues to be reported on an exception basis
- Provide the Board with advice and assurance on financial performance
- Receive and comment on financial forecasts, analysis of financial risk and financial planning
- Oversee and ensure remedial action when activity/performance issues/variances arise either against targets or key assumptions made in drawing up activity/finance plans
- Receive best value reports/benchmarking identifying outliers/issues and make recommendations regarding necessary action, if appropriate
- Receive and advise on medium term financial and savings planning including the refresh of the Financial Recovery Plan
- Ensure that there are appropriate mechanisms in place to assure the Board that systems, policies and people in place are operating in a way that is effective, focused on key risks and driving the delivery of the CCG's objectives.
- Receive reports from Service Performance and Review Groups (SPRGs) on an exception basis and agree appropriate action
- Review and monitor the procurement programme and the contestability plan/process of key programmed procurements.
- Consider the procurement vehicle for business cases and recommend appropriate action
- Consider and advise on the management of the capital programme
- Review and challenge the delivery of financial savings, activity impacts and other benefits from QIPP projects.

- Provide assurance and advise the CCG Board on the performance of CCG commissioned services in relation to all quality indicators. This includes patient safety, patient experience and effectiveness of outcomes.
- Ensure continuous quality improvement and better outcomes are delivered in accordance with national guidance, through robust contract monitoring and use of data and information.
- Provide assurance and advise the CCG Board on performance and compliance with statutory duties, including any action plans that are implemented to address areas of significant underperformance.
- Review and disseminate the learning from internal reports, local or national reviews and enquiries and other data and information that may be relevant for understanding quality and safety within the CCG.
- Provide scrutiny, assurance and oversight of serious incidents/incidents.
- Provide assurance and to advise the CCG Board on performance and compliance with statutory duties, e.g. safeguarding, the Equality Act 2010 and Health & Safety.
- Seek assurance on implementation of Information Governance arrangements within the CCG to ensure the CCG maintains at least Level 2 compliance with the Information Governance Toolkit.
- Seek assurance on key Human Resources indicators, including recruitment and retention, sickness absence and mandatory training.

## **2. ACCOUNTABILITY**

### **Accountable to:**

The Mid Essex CCG Board

### **Accountable for:**

The Sub-Committees/Groups which report to the Quality, Governance & Finance Committee will be:

- Savings Programme Board
- Local Estates Forum
- Performance Sub-Committee
- Equality and Diversity Sub-Committee
- NICE Quality Committee
- Medicines Management Sub-Committee
- IFR Panel
- BCF Locality Partnership Board

## **3. DECISION MAKING**

The Committee can, where contributing to the organisation's strategic objectives, on behalf of the Board, take decisions to:

- Approve alterations to the organisation's FRP savings target/requirement
- Approve the procurement route for contracts expected to have a value of up to £1,000,000 per annum (for contracts above £1,000,000, and those under that value that are considered contentious, procurement route to be approved at Board)
- Approve the awarding of contracts between £100,000 and £500,000 per annum
- Approve virements between £100,000 and £500,000
- Approve consultancy staff where aggregate spend in any one year exceeds £50,000 (subject also to complying with national approval regimes)

- Postpone or cancel a service development being delivered as part of the savings programme where not financially or otherwise viable, subject to clinical review.
- Subject to clinical sign-off by the Live Well Committee and any consultation requirements, agree to de-commission services up to a value of £500k. De-commissioning plans above the value of £500k or which are considered to be particularly contentious will be referred to the CCG Board for a final decision.
- Approve minor amendments on behalf of the Board or endorse new and/or significant amendments for approval by the Board of policies and procedures within its remit.

Decisions will be made on the basis of consensus and where consensus cannot be reached they will be made on the basis of a simple majority vote, with the Chair holding the casting vote.

Where decisions are required outside of the meeting these can be taken virtually following agreement of the Chair.

#### **4. MANAGEMENT OF CONFLICTS OF INTEREST**

Members of the Committee will be required to declare any relevant interests to the CCG in accordance with the CCG's Conflicts of Interest Policy (MECCG003).

A register of Committee members' interests and those of CCG staff and representatives from other organisations who regularly attend Committee meetings will be produced for each meeting. Committee members will be required to declare interests relevant to agenda items as soon as they are aware of an actual or potential conflict so that the Committee Chair can decide on the necessary action to manage the interest in accordance with the Policy.

#### **5. MONITORING AND REPORTING**

##### **Monitoring Arrangements:**

The Committee will require regular reports in relation to the areas within its remit to enable it to discharge its duties effectively.

##### **Reporting arrangements:**

The minutes of the Committee will be formally recorded and action notes submitted to the MECCG Board at regular intervals.

#### **6. MEMBERSHIP**

##### **Core Members:**

Lay Member (Chair)  
 Clinical Vice Chair  
 Accountable Officer / Deputy Accountable Officer  
 Chief Transformation and Strategy Officer  
 Director of Clinical Transformation  
 Chief Finance Officer  
 Director of Governance & Performance  
 Director of Nursing & Quality  
 Deputy Chief Finance Officer  
 Deputy Director of Nursing & Quality  
 Head of Corporate Governance

*Deputies may attend for absent core members where nominated to act in this capacity*

##### **Standing members/Co-opted members /Observers;**

##### **Standing Members/Co-Opted Members**

The authors of reports will be invited to attend meetings if available. The Committee may also co-opt additional members if required .

## **7. QUORUM**

This Committee will be considered quorate when the following members, as a minimum are present:

- Chair or Vice Chair
- Accountable Officer or nominated deputy
- Chief Finance Officer or nominated deputy
- At least one clinical member
- At least one Nursing & Quality representative
- At least one Commissioning representative

## **8. MEETING FREQUENCY**

The Finance, Quality and Governance Committee will normally meet bi-monthly.

## **9. REVIEW OF EFFECTIVENESS**

The Committee will develop a work plan that prioritises and monitors the delivery of its objectives. This work plan will be monitored regularly and will be formally reviewed on an annual basis.

## **10. COMMITTEE ADMINISTRATION**

The servicing of this Committee will be by the PA to the Chief Finance Officer.

Papers will be circulated 5 working days in advance of the meeting. Late papers will not normally be accepted and must be agreed with the Chair or, if unavailable, the *Vice Chair*.

## **11. REVIEW OF TERMS OF REFERENCE**

These Terms of Reference will be reviewed by the Committee at least annually or earlier if required.

To be reviewed annually and ratified by Mid Essex Clinical Commissioning Group Board.

**Date of Committee approval: 22 May 2018**  
**Date of Board approval: 28 June 2018**