

## **LIVE WELL COMMITTEE TERMS OF REFERENCE**

### **1. ROLE OF THE GROUP**

#### **Purpose**

Within Mid Essex CCG's governance the Committee will provide the main forum for assurance of the delivery of Live Well. It will champion the Live Well vision within the mid Essex health and social care system and oversee and assure the CCG's contribution to the implementation of all aspects of Live Well. The Committee will ensure that all clinical, strategic and operational activity commissioned by the CCG supports and aligns with the Live Well strategy.

#### **Objectives:**

The Live Well Committee is responsible for:

- Delivering Live Well, without compromising quality, safety and value for money
- Developing outcomes to support Live Well transformation
- Ensuring that Patient & Public Voice adds value to the work of the Live Well Committee
- Ensuring that Patient & Public Voice is involved in all stages of the commissioning cycle
- Oversight of primary care, out-of-hospital and mental health strategy delivery
- Providing direction and oversight and seeking assurance from the work programmes
- Seeking assurance that the work programmes are on track to achieve ambitions included within the Live Well strategy
- Driving Integrated Commissioning and, where relevant, ensuring appropriate governance arrangements are in place to deliver joint commissioning
- Ensuring that the opportunities for partnership working are pursued at both a strategic level and through the relevant workstreams
- Approving the annual QIPP programme and any additional QIPP schemes identified throughout the year, ensuring clinical approval and alignment with the Live Well strategy. This includes:
  - Consideration of whether or not schemes should proceed for further work up based on an Outline Business Case (OBC)
  - Approval of the OBC for each viable scheme
  - Setting a target date for the preparation of a scheme Workbook
  - Signing off scheme Workbooks
  - Consideration and, if appropriate, sign off of Business Cases
  - Providing clinical assurance for all projects in the QIPP programme
- Reviewing, challenging and approving plans prior to Board endorsement to ensure they are consistent with:
  - The Live Well principles and priorities
  - Delivery of the CCG's strategy and objectives
  - Meeting national service targets
  - The requirements of the Financial Recovery Plan
  - Maintaining quality standards
  - Ensuring strategies, programmes and projects have received appropriate impact assessments (Quality, Equality and Privacy)
  - Delivering realistic and deliverable objectives

- Providing clinical ownership and sign off of transformational change, strategic development and direction in line with the principles of the Live Well strategy
- Generating new ideas for the strategic delivery of Live Well through research and horizon scanning
- Recommending to the Board innovative approaches to the delivery of Live Well goals
- Ensuring that the CCG has regard to its duty to reduce health inequalities

## **2. ACCOUNTABILITY**

### **Accountable to:**

The Committee is accountable to the Mid Essex CCG Board.

## **3. DECISION MAKING**

The Committee can, on behalf of the Board, and where not part of the organisation's Financial Recovery Plan, take decisions to:-

- postpone a service development where not financially viable or where not safe
- where appropriate, recommend to the Finance & Performance Committee commissioning decisions up to the value of £500,000, following review and scrutiny of an appropriate business case and in line with existing approved budgets
- Approve minor amendments on behalf of the Board or endorse new and/or significant amendments for approval by the Board of policies and procedures for all work related to the delivery of the Live Well programme and its objectives.

The Live Well committee will only sanction activity that is within existing approved budgets or which contributes to cost reduction.

The committee can make recommendations to the Board for setting the strategic direction of services that fall outside the remit of the organisation's Financial Recovery Plan.

The Live Well Committee will agree the CCG's Live Well delivery plan.

Decisions shall be made on the basis of consensus. Where consensus cannot be reached, decisions shall be made on the basis of a simple majority vote, with the Chair holding the casting vote.

## **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. REPORTING**

### **Monitoring Arrangements:**

The Committee will require regular reports from the working groups in relation to progress in achieving the objectives that they have been set (other than financial recovery).

### **Reporting arrangements:**

The minutes of the Committee will be formally recorded. Summary action points will be submitted to each meeting of the CCG Board.

## **6. MEMBERSHIP**

The membership of the Live Well Board will be formed with strong clinical representation. Essex County Council will be represented on the Live Well committee to reflect the close links to the public health, wellbeing and social care agendas. In addition partnership working with patient & public representatives, local authorities, providers, the voluntary sector and others will take place at a number of levels within the Live Well system, mainly at an operational level within working groups. (Note: the ECC Lead will operate within the County Council's governance arrangements and are not responsible to the CCG's Board).

### **Voting members:**

CCG Chair (Chair)

Clinical Chairs for Primary Care x 2  
Clinical Chair for Out-of-Hospital  
Clinical Chair for Mental Health

Accountable Officer  
Director of Clinical Transformation (Deputy Chair)  
Director of Nursing and Quality  
Director of Governance and Performance  
Chief Pharmacist  
Consultant in Public Health, Essex County Council  
Deputy Chief Finance Officer  
Chief Transformation and Strategy Officer

### **Non-voting members:**

ECC Representative – Director of Local Delivery for Essex Adult Social Care  
District Council Representatives x 3  
Community Champion Representatives x 5 (2 to attend each meeting on a rotational basis)  
CVS Representative

The Committee may co-opt other attendees when required for particular items of business.

The meetings will be administered by the CCG Chair's PA.

## **7. QUORUM**

The following representatives are required to be present to constitute a valid meeting:

- The Chair or Vice Chair, or, where neither is able to attend, a chair selected by the committee for that meeting, plus

- At least two CCG Executive Directors plus
- The Deputy Chief Finance Officer (or a nominated deputy)

### **Conflicts Of Interest**

Any quorum of the Committee shall exclude any member affected by a Conflict of Interest. If this has the effect of rendering the meeting inquorate, then the Chair shall decide on one of the following options:

- (a) Inviting on a temporary basis one or more of the following to make up the quorum so that the group can progress the item of business
- (b) Adjournment of the item and to reconvene the meeting when appropriate membership can be ensured.

In the event that none of the above maintain quoracy, the Chair is at liberty to stand down selected members to ensure that clinicians are in the majority when a vote is needed upon a decision.

Any arrangements to ensure quoracy must be included in the minutes.

### **8. MEETING FREQUENCY**

The Live Well Committee will meet on a monthly basis.

### **9. REVIEW OF EFFECTIVENESS**

The Committee will undertake an annual review of its own effectiveness at the end of each financial year, using either the CCG's committee effectiveness checklist or an equivalent assessment tool, and report the results of that review to the Board.

### **10. REVIEW OF TERMS OF REFERENCE**

To be reviewed as required and as a minimum annually, and to be ratified by the CCG Board.

**Date of approval: 8 March 2019**