

## ***CCGS: ACCOUNTABILITY & GOVERNANCE:***

***HOW WILL PROVIDERS AVOID TOKENISM OR UNDUE INFLUENCE?***

***HOW WILL CCGs WORK WITH LOCAL AUTHORITIES AND HEALTH & WELL-BEING BOARDS?***

***....IN 12 MINS !***

## ***HEALTH & SOCIAL CARE BILL - GOVERNANCE ARRANGEMENTS***

### Step 1:

- Applications to NHS Commissioning Board by 2 or more persons
- Applications accompanied by proposed ***Constitution*** and other relevant information specified
- ***Accountable*** person to be determined

## ***HEALTH & SOCIAL CARE BILL - GOVERNANCE ARRANGEMENTS***

### Step 2:

- Commissioning Board determines applications
- CCGs established; proposed ***constitution takes effect***
- Constitution must be ***published***
- CCG must have a ***Governing Body***

## ***HEALTH & SOCIAL CARE BILL - GOVERNANCE ARRANGEMENTS***

### **Governing Body:**

- An accountable officer
- Health care professionals of a prescribed description;  
Nurse/Hospital specialist
- 2 lay persons: 1 PPI/1 governance
- Other Individuals of a prescribed description
- Can determine min and max numbers, of the Governing Body as a whole and of the prescribed positions contained therein,
- Or not have any prescribed positions
- CCG boundaries to match LA boundaries unless specific circumstances are present

## ***HEALTH & SOCIAL CARE BILL - GOVERNANCE ARRANGEMENTS***

**What does the Governing Body have to do?**

1. Ensure the CCG exercises its functions effectively, efficiently and economically
2. Ensure it complies with generally accepted principles of good governance

## ***HEALTH & SOCIAL CARE BILL - GOVERNANCE ARRANGEMENTS***

### **1. Exercising its functions ...**

- Determine remuneration, fees and allowances for employees or those providing services to the CCG
- Pension Scheme allowance arrangements
- Other functions connected with the exercise of its main function as specified by the CCGs *Constitution* or regulations

## ***HEALTH & SOCIAL CARE BILL - GOVERNANCE ARRANGEMENTS***

**2. What do we mean by generally accepted principles of good governance?**

Trickier ...



Principles of Good Governance	
The Independent Commission on Good Governance in Public Services (2004)	Charity Commission <i>An effective board will provide good governance and leadership by ...</i>
Focusing on the organisation's purpose and its intended outcomes for citizens and service users	Understanding their role
Performing effectively in clearly defined functions and roles	Ensuring delivery of organisational purpose
Promoting values for the whole organisation & demonstrating values of good governance through behaviour	Being effective as individuals and a team
Taking informed, transparent decisions and managing risk	Exercising control
Developing the capacity and capability of the governing body to be effective	Behaving with integrity
Engaging stakeholders and making accountability real	Being open and accountable
<a href="http://www.cipfa.org.uk">www.cipfa.org.uk</a>	<a href="http://www.charitycommission.gov.uk">www.charitycommission.gov.uk</a>

***The 7 Nolan Principles:***

Selflessness, Integrity, Objectivity, Accountability, Openness, Honesty, Leadership



## ***HEALTH & SOCIAL CARE BILL - INVOLVEMENT*** ***(No decision about me without me)***

- Duty to promote involvement of patients
  1. Planning of commissioning arrangements
  2. Changes in commissioning arrangements
  3. Implementation matters
- The ***Constitution*** must describe the arrangements for these three duties
- The ***Constitution*** must include a statement of the principles it will follow in implementing these arrangements

***So you need to think about this stuff right at the start, when going for authorisation and writing your constitution***



## ***HEALTH & SOCIAL CARE BILL - INVOLVEMENT***

Much of this is not brand new ... it started a few years ago ...



The Engagement Cycle: planning, procurement, management

World Class Commissioning, Competency 3

Patient & Public Engagement

## ***INVOLVEMENT: NOT RE-INVENTING THE WHEEL ...***

There are routes already there ...

- Existing local patient engagement mechanisms (e.g. LINKs)
- Community & 3<sup>rd</sup> sector organisations
- Foundation Trusts and their memberships
- Existing Local Authority engagement mechanisms e.g. Consultations, Joint Strategic Needs Assessments

And yes, new ones coming online...

- Health & Well-being Boards
- Local Healthwatch (replacing LINKs)
- New CCG networks of people
- Public Sector Equality Duty

***Blend of systematic and ad-hoc engagement***

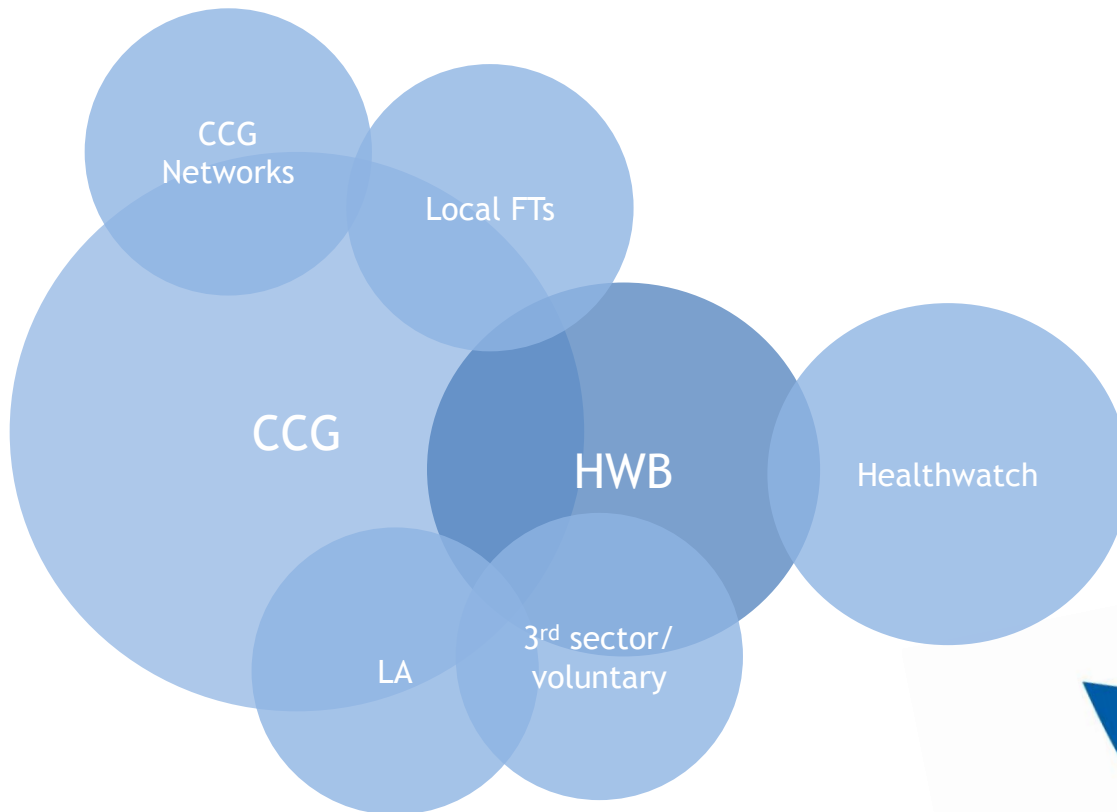


## ***LOCAL AUTHORITIES AND HEALTH & WELL-BEING BOARDS***

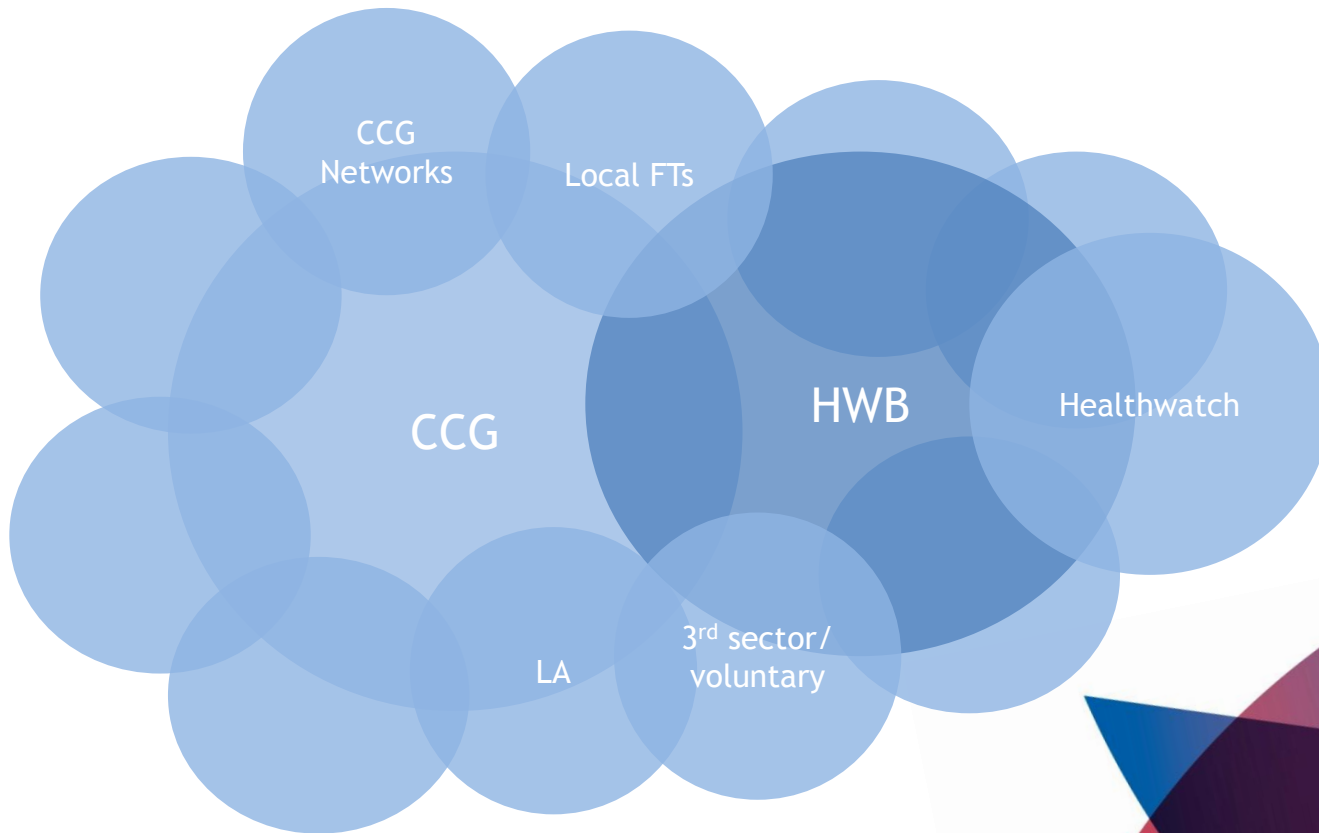
- A LA must continue its duty to ensure there are local involvement networks in place.
- A LINKs will effectively then become a Local Healthwatch
- A LA must also establish a HWB
- These Boards are there to ensure there is integration between stakeholders



## ***HOW IT MIGHT LOOK ?***



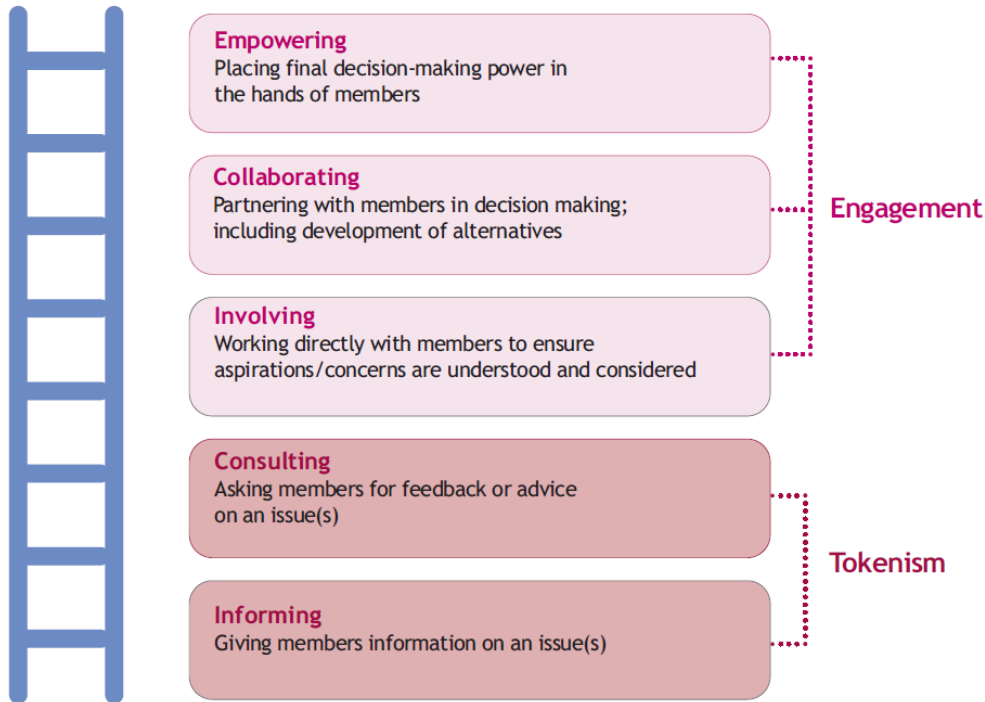
## ***EVENTUALLY***



## ***IS THIS TOKENISM?***



## ***TOKENISM: THE LADDER OF ENGAGEMENT***



## ***ITS UP TO YOU!***

Look to the FT sector for some guidance on engagement and how it has been taken from the statute books into reality.



<http://www.monitor-nhsft.gov.uk/home/our-ions/browse-category/guidance-foundation-trusts/reports/guidance-governors/current->

It probably felt fairly similar in 2003/2004 for those groups as it feels for ours today.

How far you take the model of engagement and how much it becomes knitted into the fabric of your CCGs ethos is up to you. And it will take some time.





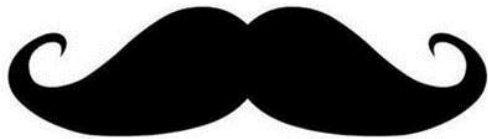
Thank you

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Membership Engagement Services

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Happy Movember! It's the final day of our Moustache challenge. For last minute donations please visit

**<http://mobro.co/MrGoodman>**

