

REPORT CLASSIFICATION	✓	CATEGORY OF PAPER	√
Official	✓	Proposes specific action	✓
Official: Sensitive Commercial		Provides assurance	
Official: Sensitive Personal		For information only	

BOARD MEETING 28 March 2023			
Report Title:	Updated Governance Handbook (Issue 5)		

Purpose of report

To request approval from the Board on the proposed amendments to documents held and published in the ICB's Governance Handbook, including the Scheme of Reservation and Delegation, and committee, subcommittee and joint committee terms of reference.

Key points

NHS North East and North Cumbria Integrated Care Board (the ICB) is the statutory decision-making body of the North East and North Cumbria Integrated Care System. The ICB is responsible for the commissioning of health services and effective stewardship of NHS spending for all the people living in the North East and North Cumbria (NENC).

The ICB's Constitution and supporting documents create the framework for the ICB to delegate decision-making authority, functions and resources to ensure it meets the diverse needs of our citizens and communities. The Constitution sets out the functions that the ICB will undertake and is supported by the governance handbook.

The handbook includes several key documents including a functions and decisions map, scheme of reservation and delegation, financial limits and committee terms of reference. The documents were approved by the Board on 1 July 2022 (issue 1), with further amendments to one or more documents approved by Board on 27 September 2022 (issue 2) and 29 November 2022 (issue 3) and 31 January 2023 (issue 4).

As part of a process of ongoing review of the documents within the Governance Handbook, further amendments have been identified to ensure the documents remain fit for purpose. The amended documents are attached with changes highlighted or tracked and summarised below:

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Material Changes to the Scheme of Reservation and Delegation (SORD) - Appendix 1

- Page 10 revised delegation to parent committees to approve their sub committee terms of reference
- Page 13 ICB statutory duties copied from Constitution for completeness
- Pages 26 to 28 added delegations relating to primary care services
- Appendix 1 updated list of committees, Subcommittees and Joint committees
- Appendix 2 Primary Care Services Appendix 2 replaced to include Pharmacy, Optometry and Dentistry
- Appendix 3 Delegation summaries added to the SORD
- Appendix 4 remuneration Guidance added to the SORD

Functions and Decisions Map - Appendix 2

Minor updates to ensure consistency with the SORD.

Executive Committee Terms of Reference

Following receipt of the recent NHS England Armed Forces – ICB Guidance which sets out several requirements for ICBs in terms of commissioning services for veterans, the following amendment to the Executive Committee's terms of reference was discussed and approved by the Committee (subject to approval by the Board) to provide clarity on where the responsibility of commissioning for veterans sits:

 Commissioning services for veterans and families, who form part of the NENC registered populations.

Please note that this is the only amendment to the committee terms of reference and therefore they have not been included on this occasion.

North East and North Cumbria Integrated Care Partnership - Appendix 3

The Board is asked to formally approve the NENC Strategic Integrated Care Partnership (ICP) and Area ICPs terms of reference. Once approved, these will be shared with health and wellbeing boards and with local authority partners across the NENC. Any material changes arising from engagement with partners will be brought back to a future Board for approval.

The Board is asked that members may be added, amended, or deleted in the terms of reference and/or minor amendments made with the approval of Executive Director of Corporate Governance, Communications, and Involvement. Any changes will be versioned controlled until the next formal issue.

Establishment of place-based governance arrangements - Appendix 4

Working with partners, each place will establish an ICB Place subcommittee (as part of the place-based governance arrangements). These will follow a standard format for the terms of reference but enable local variation, e.g., membership.

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The Board is being asked to approve the establishment of ICB subcommittees at each place or places where it is appropriate to work across a wider footprint, and to approve the standard terms of reference for such subcommittees.

Following approval to establish these, the Board is asked to delegate authority to the Executive Committee for the approval of individual place subcommittee terms of reference.

The Board is also asked to agree that any subcommittees established at place will be listed in the Governance Handbook by the Executive Director of Corporate Governance, Communications, and Involvement, as is required by the Constitution.

Establishment of Subcommittees

The Constitution requires the Board to formally approve the establishment of all subcommittees and the need for further subcommittees to be established to support the function of the Executive and Quality and Safety Committees.

The proposed subcommittees for these parent committees are listed in **Annex 1** below and the Board is asked to approve the establishment of these subcommittees, along with the terms of reference for each one.

Risks and issues

There is a risk the ICB does not have a robust and clear control environment in relation to the effective stewardship and management of public funds and levels of delegation may not support local decision-making.

Assurances

The SORD, and terms of reference have been reviewed to ensure they remain fit for purpose and are in line with statutory guidance.

Parent committees have reviewed the proposed subcommittee terms of reference.

Members of the NENC ICP recommended approval of its terms of reference in December 2022 and edits since have been minor in nature only.

A draft of the updated SORD was circulated to Audit Committee members for review prior to its submission to the Board. This was due to the timing of meetings prohibiting a formal review of the SORD at the next Audit Committee meeting on 13 April 2023. The changes to the SORD were accepted by members following minor edits.

Recommendation/action required

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The Board is asked to note the proposed changes to the governance documents described above and to approve the updated versions for insertion into the Governance Handbook (issue 5), as follows:

- Scheme of Reservation and Delegation (Appendix 1) version 3-0
- Functions and decisions Map (Appendix 2) version 2-0
- Strategic and Area Integrated Care Partnerships (Appendix 3) version v1-0
- Approve the establishment of ICB subcommittees at each place
- Approve the standard terms of reference for such subcommittees at Appendix 4 version 1-0.
- Delegate the approval of place subcommittees' terms of reference to the Executive Committee, including any variation to the template terms of reference except the purpose of the subcommittees.
- Approve the establishment of other subcommittees listed in Annex 1 and to approve their terms of reference (Appendices 5 to 11).

The Board to asked to approve that the following documents may be updated and replaced in the Governance Handbook by the Executive Director of Corporate Governance, Communications and Involvement as updates arise:

- Functions and Decisions Map
- Committee Structure
- Register of Interests
- Delegation Agreement Summaries
- Remuneration Guidance (subject to the approval of Remuneration Committee)
- NENC List of eligible providers of primary medical services

Acronyms and abbreviations explained				
SORD - Scheme of Reservation and Delegation				
NENC – North East and North Cumbria				
SOP - Standard Operat				
IFR - Individual Funding ICP - Integrated Care F				
Sponsor/approving director Claire Riley, Executive Director of Corporate Governance, Communications, and Involvement				
Reviewed by	Deborah Cornell, Director of Corporate Governance and Involvement			
Report author	Irene Walker, Head of Governance			
Link to ICB corporate aims (please tick all that apply)				
CA1: Improve outcomes in population health and healthcare				
CA2: tackle inequalities in outcomes, experience and access				
CA3: Enhance productivity and value for money				
CA4: Help the NHS support broader social and economic development				
Relevant legal/statutory issues				

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Note any relevant Acts, regulations, national guidelines etc						
Any potential/actual conflicts of interest associated with the paper? (please tick)	Yes		No	✓	N/A	
If yes, please specify						
Equality analysis completed (please tick)	Yes		No		N/A	✓
If there is an expected impact on patient outcomes and/or experience, has a quality impact assessment been undertaken? (please tick)	Yes		No	√	N/A	
Key implications						
Are additional resources required?	n/a					
Has there been/does there need to be appropriate clinical involvement?	n/a					
Has there been/does there need to be any patient and public involvement?	n/a					
Has there been/does there need to be partner and/or other stakeholder engagement?	n/a					

Establishment of Subcommittees

Parent Committee	Proposed Subcommittees	Purpose	Reference Appendix Number
Executive Committee	Independent Funding Review (IFR) Panels x 2	To consider Individual Funding Requests and make decisions to either support or not support the requests on the basis of the information provided to the IFR Panel. Requests will be assessed for access to treatments within the commissioning authority of the ICB.	Appendix 5
Executive Committee	Medicines Subcommittee	The purpose is of the subcommittee is to support the Executive Committee to discharge its duties relating to quality assurances of medicines safety, medicines quality, efficient use of medicines and clinical governance for the use of medicines within the Integrated Care System.	Appendix 6
Quality and Safety Committee	Quality and Safety Area Subcommittees x 4	To provide the Quality and Safety Committee with assurance that is delivering its functions in a way that delivers high quality safe patient care in commissioned services and secures continuous improvement in the quality of services, against each of the dimensions of quality set out in the shared commitment to quality and enshrined in the Health and Care Act 2022. This includes reducing inequalities in the quality of care.	Appendix 7
Quality and Safety Committee	Safeguarding Health Executive Group: Children, Adults and Cared for Children subcommittee	Providing a single strategic oversight body providing assurance to the Safeguarding Partnerships/Adult Boards, ICB and ICP and local organisations on quality, outcomes, finance and performance. To make formal recommendations to the Safeguarding Partnerships/Adult Boards' Board, ICB and ICP and local organisations, e.g., future provision, investments/disinvestments.	Appendix 8
Quality and Safety Committee	Antimicrobial Subcommittee	To support the Quality and Safety Committee to discharge its duties relating to is to bring together key	Appendix 9

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Parent Committee	Proposed Subcommittees	Purpose	Reference Appendix Number
		stakeholders across health and social care from the North East and North Cumbria and integrated care system to deliver the national strategy tackling antimicrobial resistance 2019-2024, Healthcare Acquired Infection (HCAI) reduction objectives, information sharing and best practice and system level assurance.	
Executive Committee	Primary Care Strategy and Delivery Sub Committee	To support the Executive Committee to discharge its duties in relation to primary care.	Appendix 10
Executive Committee	Pharmaceutical Services Regulatory [Sub] Committee (PSRSC)	To receive and determine, on behalf of the ICB, applications submitted under the NHS (Pharmaceutical Services) Regulations 2013 as amended ('the Regulations'). Please note this is a nationally mandated [sub] committee by NHS England.	Appendix 11