

GOVERNANCE ARRANGEMENTS

NHS Rotherham Board Meetings

Chairman: Alan Tolhurst

Members: Non Executive Directors, Cluster Chief Executive and Director of Finance, Director of Public Health, Chief Operating Officer (COO) , RCE members (David Tooth/ Richard Cullen).

Observer: *Rotherham Metropolitan Borough Council elected member.*

In Attendance: *Deputy COO, Assistant COO, Chief Finance Officer.*

Frequency: 4 meetings per year - June (to include final accounts), September, December, March.

Reports received

Chairman's correspondence
Chair of Commissioning Executive report
Cluster Chief Executive Report/Transition update
Chief Operating Officer report/update
Serious Incidents (SI) report
Audit & Quality Assurance Committee (AQuA)
Performance report

Minutes received

Cluster Board
NORCOM
Specialised Commissioning Group
AQuA
Remuneration & Terms of Service Committee (or summary thereof)
Practice-Based Commissioning Approvals Committee
Performance Management Committee
Adults Board
Children's Board
Safeguarding Children Board
Safeguarding Adults Board
Partnership Board
Clinical Policy Board

Rotherham Performance Management Committee

Chairman: Alan Tolhurst

Members: Non Executive Directors, Commissioning Executive GP members, Chief Operating Officer (COO), Deputy Chief Operating Officer (DCOO), Director of Public Health, Chief Finance Officer, Chair GP Reference Group.

In attendance: Assistant Chief Operating Officer (ACOO), Medical Director

Frequency: 7/8 times a year (April, May, July, August, October, November, January, February).

Reports received (subject to discussions)

Performance Report, to cover
- health-gain targets
- progress against SIP

- Finance
- Contracting
- Quality, Innovation, Prevention and Productivity programme

Audit & Quality Assurance Committee

Chairman: John Gomersall

Members: Rekha Kapoor, Robin Stonebridge, Phillip Drury, Richard Cullen
(second GP member to be considered on a development basis)

In Attendance: Chief Finance Officer, Director of Public Health, DCOO, ACOO, Head of Corporate Governance, Head of GP Quality, Planning Performance and Risk manager, Internal Audit, Audit Commission.
COO (once annually).

NHS Rotherham – Functions of Committees

PCT Board

Maintain overall governance of all NHS Rotherham's functions.

Hold the Commissioning Executive/Management Executive to account for the implementation of the single integrated plan and for all other aspects of performance as required in its terms of reference.

Commissioning Executive (CE)

Implement the Single Integrated Plan for 2011/12.

Ensure required performance against all NHS Operating Framework requirements and all single integrated plan requirements is achieved.

Ensure all financial duties are achieved.

Ensure all QIPP programme requirements are achieved.

Ensure effective performance against agreed contracts of all healthcare providers.

Prepare the Single Integrated Plan (or its equivalent) for 2012/13.

Provide clinical advice to NHS Rotherham on all contract areas and fulfils the function of the Professional Executive.

Advise the Board on all aspects of managing the organisational transitions as required by the NHS Bill and Department of Health.

Ensure that the views of patients and the public, the views of partner organisations such as RMBC and the voluntary sector and of clinicians other than GPs are taken into consideration when making recommendations to the Board on strategic commissioning decisions and decisions over the transition to new commissioning structures

Management Executive

Ensure operational delivery by NHS Rotherham and co-ordinate work in supporting CE/Board.

Commissioning Performance Management Committee

Performance manage the Commissioning Executive against all the requirements of its remit.

AQUA

As per terms of reference

Remuneration & Terms of Service Committee

As per terms of reference – with Chair and all Non-Executive Directors as members

GP Commissioning Reference Group

Provide oversight, support and advice to the Commissioning Executive on behalf of all Rotherham GPs.

Cluster Board

Resilience: support each PCT to sustain the delivery of all priority functions.

Governance: support each PCT Board to ensure that it maintains good standards of governance and accountability.

Strategy and plans: maintain oversight of each PCT's single integrated plan for 2011/12, and advise on the strengthening of these plans as necessary.

Performance: seek assurance from each PCT about operational performance with specific reference to patient safety, Operating Framework requirements, finance, contracts and QIPP, and advise on and support corrective action where required.

Transition: oversee the preparation and implementation of plans for transition to the changed NHS arrangements as proposed in the Health and Social Care Bill, including the development of GP commissioning consortia, the development of commissioning support services, the development of new public health arrangements and the development of the NHS Commissioning Board.

