Executive Commissioning Board (ECB)

Terms of Reference

Document Information

Programme Name	Strategic Partnerships – integration of health and care
Date produced	31 st May 2017
Version	v.03
Author	Ali Jan Haider
Owner	Ali Jan Haider and Bev Maybury

Sign off

Executive Commissioning Board

Date adopted	7 th July 2017 at the Executive Commissioning Board meeting
Date of review	By the end of July 2018

Document Control

Version	Date	Author	Change Ref	Pages Affected
V.01	31 st May 2017	Ali Jan	Initial Draft	All
V.02	19 th July 2017	Ali Jan	Membership – add Kersten England	4
V.02	19 th July	Ali Jan	Purpose – expand to include 'alignment' of commissioning functions so that the focus of the group is not exclusively on 'integration'	2
V.02	7 th September	Ali Jan	Establishment - 'a time limited group as the commissioning landscape move towards and Accountable Care system'	4
v.03	7 th September	Ali Jan	Reporting arrangements: Amended to read: Receive quarterly reports on progress of the Better Care fund and wider Integration Programme Receive annually, a report on the use of resources in support of the Better Care Fund	5

Purpose of the Executive Commissioning Board

The purpose of the Executive Commissioning Board is to provide system leadership, clinical oversight and strategic direction to the integration and alignment of commissioning arrangements so that our vision for integrated health and care is delivered. This arrangement is between Airedale, Wharfedale and Craven Clinical Commissioning Group, Bradford City Clinical Commissioning Group, Bradford Districts Clinical Commissioning Group and Bradford Metropolitan District Council.

Terms of reference

The Executive Commissioning Board will have a role and duties which will include:-

- 1. Agree the scope of the programme of work to integrate health and care in Bradford District by 2021, setting the scale of ambition and pace needed for effective delivery.
- 2. Encourage collaborative planning and ensure that integrated commissioning is working well.
- 3. Align the priorities of the Better Care Fund Plan for Bradford (2018-19 and 2019-20) as a subset of the integration programme for approval by the Health and Wellbeing Board and lead its delivery.
- 4. Develop a programme plan to ensure delivery of all components of the integration programme to agreed milestones.
- 5. Provide quality assurance to business cases for individual developments including the strategic assumptions, models of care, evidence base, financial analysis and equality impact assessment.
- 6. Develop pooled arrangements for the Integration Programme for approval by the Health and Wellbeing Board.
- 7. Develop an agreed basis for a section 75 agreement for the BCF for approval by the Health and Wellbeing Board and undertake the strategic management of this agreement.
- 8. Support the business focus of the Health and Wellbeing Board
- 9. Monitor the performance of the integrated commissioning function and ensure that it delivers the statutory and regulatory obligations of the partners. As a minimum the Executive Commissioning Board will monitor:
 - a. Delivery of the priorities set out in the STP
 - b. Financial plans and financial performance of the integrated commissioning function, including forecasts for the year
 - c. Compliance with any specific reporting requirements associated with the Better Care Fund and other section 75 agreements
 - d. Performance against progress in delivering against the commissioning priorities agreed
 - e. Management response to risks identified and the assurance against them regarding the integrated commissioning function
- 10. Provide assurance to the governing bodies of the partners on the progress and outcomes of the integrated commissioning function.

Establishment

The Local Authority and the CCGs have agreed to establish the Executive Commissioning Board. The Board, a time limited group as the commissioning landscape move towards and Accountable Care system is established to deliver the intended benefits arising from the integration of commissioning for health and well-being for the people of Bradford District.

Membership

The Chair and membership of the ECB will be reviewed annually. During its first 6 months the ECB will be jointly chaired by the Strategic Director of Health and Wellbeing from the Local Authority and the Chief Officer from the CCGs.

Director of Strategic Partnerships	Ali Jan Haider	Airedale, Wharfedale and Craven, and Bradford City and Districts CCGs
Strategic Director of Health and Wellbeing	Bev Maybury	Bradford Council
Chief Officer	Helen Hirst	Airedale, Wharfedale and Craven, and Bradford City and Districts CCGs
Chief Executive BMDC	Kersten England	Bradford Council
Strategic Director of Children's Services	Michael Jameson	Bradford Council
Strategic Director Place	Steve Hartley	Bradford Council
Director of Accountable Care Bradford	Liz Allen	Bradford City and Districts CCGs
Director of Accountable Care Airedale	Sue Pitkethly	Airedale, Wharfedale and Craven CCG
Director of Finance	Julie Lawreniuk	Airedale, Wharfedale and Craven, and Bradford City and Districts CCGs
Strategic Director of Finance	Stuart McKinnon-Evans	Bradford Council
Clinical Chairs	Dr Akram Khan	Bradford City CCG
	Dr Andy Withers	Bradford Districts CCG

Dr James Thomas Airedale.

> Wharfedale and Craven CCG

Director of Public Health Anita Parkin **Bradford Council**

Meeting frequency

Meetings will take place initially monthly, with a first stage review after 6 months, annually thereafter.

If a member is unable to attend a formal meeting of the Board, they shall appoint a suitable individual to deputise for them.

Chair

The role of chair will be shared between Health and Social Care.

Location of meetings

Meetings will be administered by the Health and Wellbeing Department in BMDC.

The agenda and papers will be issued no later than 4 working days in advance of meetings unless later circulation has been authorised by the Chair (exceptional circumstances only).

Quoracy

In order to meet and conduct routine business 6 members must be present of which at least:

1 must be a clinical representative

1 must be from BMDC

In order to take decisions in relation to the scope of the programme or resource allocation 6 members must be present as follows:

- 2 representatives from the Clinical Commissioning Group
- 2 representatives from BMDC
- 1 provider representative
- 1 clinical representative

Reporting Arrangements

The Executive Commissioning Board will submit summary reports to the Health and Wellbeing Board:-

Receive quarterly reports on progress of the Better Care fund and wider Integration Programme

Receive annually, a report on the use of resources in support of the Better Care Fund