

Roles and Responsibilities of Members of the Board

1. Core Responsibilities

The overarching role of the Oxfordshire Clinical Commissioning Group (the CCG/OCCG) Board is to ensure that the organisation has appropriate arrangements in place to exercise the CCG functions. All members of the Board will share corporate responsibility, as part of a team to ensure that the CCG exercises its functions effectively, efficiently and economically and in accordance with the generally accepted principles of good governance and the OCCG constitution.

Individual members of the Board will bring different perspectives, drawn from their different professions, roles, background and experience. These differing insights into the range of challenges and opportunities facing the CCG will, together, ensure that the CCG takes a balanced view across the whole of its business.

2. Clinical Chair

The Clinical Chair of the OCCG will be responsible for the leadership of CCG Board including:

- Ensuring that the CCG has a strategy for the development of health care in Oxfordshire through effective commissioning
- Ensuring that the CCG has an organisational development plan to ensure a well-functioning CCG that delivers the statutory functions.
- Leading OCCG, ensuring it is constantly committed to and is able to discharge its duties and responsibilities as set out in its constitution
- Being the senior clinical voice of OCCG and therefore taking the lead in interactions with all stakeholders, including the NHS Commissioning Board.
- Building and developing the OCCG Board and its individual members
- Ensuring that OCCG has proper constitutional and governance arrangements in place
- Ensuring that, through the appropriate support, information and evidence, the Board is able to discharge its duties
- Supporting the Accountable Officer in discharging the responsibilities of the organisation
- Contributing to the building of a shared vision of the aims, values and culture of the organisation
- Leading and influencing to achieve clinical and organisational change, to enable the CCG to deliver commissioning intentions
- Ensuring that public and patients' views are heard and their expectations understood and, where appropriate as far as possible, met;
- Ensuring that the CCG is able to account to its local patients, stakeholders and NHS England;

- Ensuring that the CCG builds and maintains effective relationships, particularly with the individuals involved in overview and scrutiny from the relevant local authority

3. Accountable Officer

The Accountable Officer of the CCG will be responsible for:

- Ensuring that the CCG fulfils its duties to exercise its functions effectively, efficiently and economically thus ensuring improvement in the quality of services and the health of the local population whilst maintaining value for money.
- Ensuring that the regularity and propriety of expenditure is discharged, and that arrangements are put in place to ensure that good practice (as identified through such agencies as the Audit Commission and the National Audit Office) is embodied and that safeguarding of funds is ensured through effective financial and management systems.
- Working closely with the Chair of the Board, to ensure that proper constitutional, governance and development arrangements are put in place to assure the members (through the Board) of the organisation's ongoing capability and capacity to meet its duties and responsibilities. This will include arrangements for the ongoing development of its members and staff.
- The overall management of the Clinical Commissioning Group and its operations on a day to day basis.
- The overall executive leadership, governance and performance of OCCG.
- The delivery of national and local targets and standards through a strong and clear performance management and accountability framework.
- Ensuring that the CCG complies with its duty to provide information to NHS England.
- Ensuring that the CCG performs its functions in a way which provides good value for money.

4. Lay Vice Chair

Key aspects of the role are:

- Supporting Clinical Chair to ensure OCCG has proper constitutional and governance arrangements and in the delivery of the Clinical Chair's responsibilities where appropriate.
- Bringing external skills and challenge to developing the CCG strategy, supporting its delivery and ensuring that the Board acts in the best interests of patients and the wider community.
- Bring specific expertise and experience to the work of the Board. Their focus will be strategic and impartial, providing an external view of the work of the CCG that is removed from the day-to-day running of the organisation.
- Be a member of committees of the Board.
- Deputising for the Chair of the Board where he or she has a conflict of interest or is otherwise unable to act

5. Locality Clinical Directors

The Locality Clinical Directors provide the main link from the member practices to the Board. They are responsible for:

- Leading the commissioning of locality based services.

- Maintaining and developing an effective locality structure to involve and engage all practices within the locality and to ensure high quality locality commissioning.
- Providing clinical leadership within the locality and represent the locality at the Board.
- Effective performance management of locality practices to ensure the locality stays within its commissioning budget.
- Delivery of Quality Innovation, Prevention and Productivity (QIPP) milestones and savings targets through a clinically lead project framework.
- Leading patient and public engagement with the locality.
- Producing a commissioning strategy for the locality which delivers the mission, vision and values of OCCG
- Improving the quality of primary care within the locality.
- Clinical Leadership of pan-Oxfordshire work for the following areas:
 - Children and Young People
 - Long Term Conditions
 - Medicines Management
 - Mental Health (including Learning Disability)
 - Older People (including Continuing Health Care)
 - Planned Care (including Mothers and Newborn)
 - Urgent Care (including End of Life care)
- One of the Locality Clinical Directors will be the member of the Board with a lead responsibility for Equality and Diversity.

6. **Chief Finance Officer**

The Chief Finance Officer is a senior member of the Executive leadership team and Board with responsibility for:

- Providing professional financial leadership and business advice to OCCG, ensuring delivery of QIPP finance and performance targets to maintain the highest possible standards of corporate governance and probity.
- Providing financial advice to the clinical commissioning group and for supervising financial control and accounting systems.
- Making appropriate arrangements to support, monitor and report on the CCG's finances.
- Overseeing robust audit and governance arrangements leading to propriety in the use of the CCG's finances.
- Advising the Board on the effective, efficient and economic use of the CCG's allocation to remain within that allocation and deliver required financial targets and duties.
- Producing the financial statements for audit and publication in accordance with the statutory requirements to demonstrate effective stewardship of public money and accountability to the NHS Commissioning Board.
- Securing customer focused and fit for purpose commissioning support for Finance, Contracting, Information, Performance Management, Programme Support and other functions as required by the CCG.
- Leading the negotiation of healthcare contracts with providers.
- Providing expert support to OCCG to ensure implementation and delivery of robust operational and strategic plans.
- Senior Information Risk Owner for the CCG.

7. **Chief Operating Officer and Director of Delivery and Localities**

The Director of Delivery and Localities is a senior member of the Executive leadership team and Board with lead responsibility for:

- The commissioning function for OCCG and feeding into the organisational wide operational plans, and QIPP plans, and ensuring that all plans are linked to and congruent with overall OCCG vision, mission and values.
- Ensuring delivery of commissioning strategy, plans and QIPP plans through a programme and project approach for pan-Oxfordshire areas of work.
- Engagement with the Board and other clinicians to lead the development of plans and ensuring clinical input to and leadership of change processes.
- Providing an executive lead for the delivery of medicines management support to the localities and responsible for ensuring a co-ordinated approach across localities of delivery of the overall QIPP targets for medicines management.
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- Ensuring OCCG delivers outcomes from the Health and Wellbeing Strategy.
- Domains 1, 2 and 3 of the NHS Outcomes framework.

8. **Director of Quality**

The Director of Quality is a senior member of the Executive leadership team and Board with lead responsibility for:

- Ensuring a proactive and systematic approach to guarantee the quality of commissioned services.
- Ensuring quality is reflected in all aspects of OCCG work and supports delivery of the requirements of the National Outcomes Framework.
- Ensuring the development and implementation of systems and processes to capture patient experience; working closely with the OCCG Localities.
- Ensuring the development and implementation of systems and processes for patient safety and clinical governance.
- Providing a focal point in the organisation for the introduction of innovative thinking and practices; working closely with the Clinical Director of Research and Development.
- Developing and managing appropriate integrated governance processes that support OCCG to deliver its strategy.
- Leading for Safeguarding, Safety and being the Caldicott Guardian on the Board.
- Providing the designated link with the Local Office of NHS Commissioning Board.
- Domains 4 and 5 of the Outcomes framework.

9. **Lay member with a lead role in championing patients and public empowerment**

Key aspects of this role will be to:

- Bring external skills and challenge to developing the CCG strategy, supporting its delivery and ensuring that the Board acts in the best interests of patients and the health of people in Oxfordshire.
- Be strategic and impartial, providing an independent view of the work of the CCG that is external to the day-to-day running of the organisation, specifically bringing their knowledge as a member of the local community, to the work of the Board.
- Ensure that, in all aspects of the CCG's business the public voice of the local population is heard and that opportunities are created and protected for patient and public empowerment in the work of the CCG.

- Ensure that public and patients' views are heard and their expectations understood and met as appropriate.
- Ensure the CCG builds and maintains an effective relationship with Local Healthwatch and draws on existing patient and public engagement and involvement expertise.

10. Lay member with a lead role in overseeing governance

Key aspects of this role will be to:

- Bring external skills and challenge to developing the CCG strategy, supporting its delivery and ensuring that the Board acts in the best interests of patients and the wider community.
- Bring specific expertise and experience to the work of the Board. Their focus will be strategic and impartial, providing an external view of the work of the CCG that is removed from the day-to-day running of the organisation.
- Oversee key elements of governance including audit, remuneration and managing conflicts of interest. This will include chairing the audit committee.
- Have a lead role in ensuring that the Board and the wider CCG behaves with the utmost probity at all times.

11. Medical Specialist Advisor

The Medical Specialist Advisor will not be employed by any organisation from which the CCG secures any significant volume of provision.

As well as sharing responsibility with the other members for all aspects of the CCG Board business, this clinical member will bring a broader view, on health and care issues to underpin the work of the CCG. In particular, they will bring to the Board an understanding of patient care in the secondary care setting.

The Medical Specialist Advisor will be

- A doctor who is, or has been, a secondary care specialist, who has a high level of understanding of how care is delivered in a secondary care setting.
- Competent, confident and willing to give an independent strategic clinical view on all aspects of CCG business.
- Highly regarded as a clinical leader, preferably with experience working as a leader across more than one clinical discipline and/or specialty with a track record of collaborative working.
- Able to take a balanced view of the clinical and management agenda, and draw on their in depth understanding of secondary care to add value.
- Able to contribute a generic view from the perspective of a secondary care doctor whilst putting aside specific issues relating to their own clinical practice or their employing organisation's circumstances.
- Able to provide an understanding of how secondary care providers work within the health system to bring appropriate insight to discussions regarding service redesign, clinical pathways and system reform.

12. Nurse Specialist Advisor

The Nurse Specialist Advisor will not be employed by any organisation from which the CCG secures any significant volume of provision. The individual should bring

significant additional perspectives beyond primary care and should not be a general practice employee.

As well as sharing responsibility with the other members for all aspects of the CCG Board business, as a registered nurse on the Board, this person will bring a broader view, from their perspective as a registered nurse, on health and care issues to underpin the work of the CCG especially the contribution of nursing to patient care.

The Nurse Specialist Advisor will be:

- A registered nurse who has developed a high level of professional expertise and knowledge.
- Competent, confident and willing to give an independent strategic clinical view on all aspects of CCG business.
- Highly regarded as a clinical leader, probably across more than one clinical discipline and/or specialty – demonstrably able to think beyond their own professional viewpoint.
- Able to take a balanced view of the clinical and management agenda and draw on their specialist skills to add value.
- Able to contribute a generic view from the perspective of a registered nurse whilst putting aside specific issues relating to their own clinical practice or employing organisation's circumstances.
- Able to bring detailed insights from nursing and perspectives into discussions regarding service redesign, clinical pathways and system reform.

13. Partnership Directors

These are non-voting members of the Board. OCCG recognises that the County Council is a major strategic partner and that there is a need for strong partnership working between the NHS, Public Health and Social Care. The role of the Partnership Directors is to ensure alignment of strategy across commissioning organisations and to facilitate effective partnership working.

14. Practice Manager Representative

This is a non-voting member of the Board. The relationship with practices is critical to the success of the CCG and Practice Managers have a key role in facilitating communications between the corporate body and practices. This position on the Board is to support effective relationships with practices.

Version	Proposal / Change	Date
V1	Establishment of OCCG	04.2013
V2	Amendments agreed at November 2013 Board. Changes effective from 3 February 2014	02.2014
V3	Amendments to reflect agreed revised Constitution dated 14 January 2016	01/2016