



**GIG**  
CYMRU  
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WALES

Cyd-bwyllgor  
Comisiynu  
Joint Commissioning  
Committee

# Collaborative Commissioning Leadership Group (CCLG)

Terms of Reference & Operating Arrangements

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<b>Contents</b>	<b>Page</b>
1. Introduction & Constitution	2
2. Purpose	3
3. Scope and Duties	4
4. Membership	5
5. Quorum	7
6. Meeting Secretariat	7
7. Frequency of Meetings & Attendance	7
8. Withdrawal of Individuals in Attendance	7
9. Circulation of Papers	7
10. Reporting	8
11. Sub-Groups	8
12. Review	8

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## 1. Introduction & Constitution

- 1.1 In accordance with JCC Standing Order 6.15, the Joint NHS Wales Joint Commissioning Committee (the Joint Committee) will delegate certain functions to the Chief Commissioner. The Chief Commissioner will be accountable to the Joint Committee for all functions delegated to them irrespective of any further delegation to other officers.
- 1.2 The Chief Commissioner is designated as the Accountable Officer for the JCC in line with the Accounting Officer memorandum issued by the Director General and Chief Executive of NHS Wales on 15 May 2024. The essence of the role as an Accountable Officer is a personal responsibility for the propriety and regularity of the public finances for which the Chief Commissioner is answerable.
- 1.3 The Scheme of Delegation to the Chief Commissioner forms a schedule to the Standing Orders and is approved by the Joint Committee.
- 1.4 The following has been delegated from the Joint Committee to the Chief Commissioner:

REF.	AREA	MATTER
C1.	Performance & Assurance	Responsibility for the leadership and overall delivery of the JCC's: <ul style="list-style-type: none"> <li>• Integrated Medium-Term Plan (IMTP); and</li> <li>• Budget and financial framework (including overall distribution of the financial allocation and unbudgeted expenditure)</li> </ul>
C2.	Performance & Assurance	Responsibility for the framework for planning and securing those services delegated to the JCC from LHBs, in-line with the approved IMTP
C3.	Performance & Assurance	Responsibility for ensuring the Health and Care Quality Standards 2023 and the Duty of Quality is embedded within Joint Committee Team's activity
C4.	Performance & Assurance	Responsibility for implementing those policies approved by the JCC in relation to the planning and securing of those services delegated to the JCC from LHBs

- 1.5 A system of internal control is in place to further support the Joint Commissioning Committee's (JCC) Chief Commissioner in regard to internal control and decision-making, including leading engagement and collaborative planning with the health boards in Wales.
- 1.6 These Terms of Reference set out the role and function of a JCC's Collaborative Commissioning Leadership Group (CCLG).

- 1.7 The JCC CCLG's role is work together to provide the primary mechanism to ensure effective collaboration at a senior leadership level with health boards.
- 1.8 The CCLG will support the Chief Commissioner and health board Chief Executive Members of the Joint Committee in developing plans and proposals to inform decision-making by the Chief Commissioner and the Joint Committee in adherence with the delegations afforded to them respectively.
- 1.9 The CCLG falls within the delegated authority of the Chief Commissioner and will not be held in public but would be subject to consideration in line with NHS Wales Information Governance Policy and particularly the release of information under the Freedom of Information Act.
- 1.10 The Standing Orders and Standing Financial Instructions for the JCC as well as the governance arrangements of the host health board 'Cwm Taf Morgannwg University Health Board' will apply.
- 1.11 The CCLG membership comprises of very senior health board representatives and JCC Team representatives. Any matters relating to specific providers will be dealt with via the JCC commissioning monitoring mechanisms.

## 2. Purpose

- 2.1 The purpose of the JCC CCLG is to provide health board, **executive-level** support to the Chief Commissioner and the JCC Team in **partnership** and **collaboration** to plan, advise, develop and implement key plans and strategies (including the IMTP) for the JCC.
- 2.2 The CCLG will provide the **primary engagement mechanism for health board involvement** in the development, review and management of issues and the contribution of advice to inform consideration by the JCC at Joint Committee meetings.
- 2.3 Enable system leadership and collaboration to recognise the JCC as a **centre of excellence for commissioning** that supports an iterative process of an All Wales Commissioning Framework to plan and deliver commissioning that is focused on value and patient outcomes.
- 2.4 The CCLG will promote a **no surprises** approach to the work of the JCC including the development of plans and oversight of risks and performance of services commissioned by the JCC, being clear on reporting issues at Joint Committee meetings where consensus has not been achieved.
- 2.5 Whilst the JCC CCLG will have oversight of the implementation of key plans and strategies, the JCC CCLG is **not** a formal decision-making forum and will **not** be responsible for 'holding to account' of the JCC Team.

### 3. Scope and Duties

The JCC CCLG will work together to provide advice and support to the Chief Commissioner in relation to the achievement of the JCC's Vision, Mission and Strategic Objectives with a specific role in relation to:

#### 3.1 Engagement

- Members of the JCC CCLG will act as the primary link between JCC and health board Chief Executive Officer Members of the Joint Committee in a role as agent of their Chief Executive, collaborating on the development and delivery of activities delegated to the JCC.
- Ensure early and appropriate engagement on issues prior to Joint Committee meetings or Joint Sub-Committee meetings to support an approach of 'no surprises'.
- Members will establish and maintain effective engagement across the JCC and health boards on all joint commissioning matters.
- Health board Members of the CCLG will provide timely and comprehensive briefings and advice to health board Chief Executive Members of the Joint Committee to facilitate the business of Joint Committee meetings.
- Health board Members will support JCC Members in ensuring engagement with NHS Wales, Llais and other stakeholders in the course of the business of the JCC.
- Role model and demonstrate at all times, the Values set by the JCC.

#### 3.2 Commissioning

- Formulate proposals by developing, engaging and discussing issues to inform what services should be commissioned by the JCC, including services to be commissioned on a regional or national basis ahead of consideration at Joint Committee meetings.
- Support and contribute to the JCC as a centre of excellence and the development/review of an All Wales Commissioning Framework.
- Support the development of key plans and strategies including the JCC's Integrated Medium Term Plan (IMTP) and Commissioning Strategy.
- Support the focus on quality and safety for the patients who access the services commissioned by the JCC in all plans and proposals developed for consideration at Joint Committee meetings.
- Consider and contribute to the development of proposals for the Joint Committee on the appropriate level of funding, focussing on value, for the commissioning of directed and delegated services and the contribution from each of the health boards for those services.
- Identify opportunities for service improvement.
- Identify opportunities for investment and disinvestments and assessing the consequences of subsequent action.
- Identify opportunities for services that would benefit from joint commissioning including assessment of repatriation opportunities.
- Contribute to the development and maintenance of the needs assessment across Wales to ensure JCC priorities are appropriately focussed and delivering value for Wales.

### 3.3 Delivery

- Review progress against the JCC’s IMTP and contribute to the management of material variation where necessary.
- Support the achievement of the JCC’s Vision, Mission and Strategic Objectives.
- Support the implementation of JCC Strategies, Frameworks and plans.
- Support the JCC by ensuring a clear focus on quality and safety in the planning, securing and oversight of services commissioned by the JCC and compliance with the Duty of Quality.
- Support the delivery of relevant actions arising from Joint Committee meetings.
- Work collectively to support the implementation of the JCC IMTP.
- Contribute and cooperate to support the overall financial performance and contract management of the JCC.
- Contribute and cooperate to support the operational performance of providers commissioned by the JCC.
- Undertake activities as required in line with the business of Joint Committee meetings and responsibilities of the Chief Commissioner respectively.

### 3.4 Advice

- Support and contribute to the development of evidence-based advice to Joint Committee meetings.
- Formulate proposals and advice on prioritisation for commissioning services on behalf of the health boards.
- Advise on the appropriate level of funding for all services commissioned by the JCC.
- Assess and advise on the proposed commissioning activities of the JCC.
- Assess and advise on any policy changes that may affect the responsibilities of the Joint Committee or the JCC Team.
- Ensure clear reporting to Joint Committee and Sub-Committee meetings on issues where consensus of the CCLG members has not been achieved.

### 3.5 Risk Management

- Contribute to the identification and assessment of risks relating to the services commissioned by the JCC.
- Contribute to the management and mitigation of risks that arise relating to the services commissioned by the JCC.

## 4. Membership

### Members

4.1 The Membership of the CCLG is as follows:

<b>Chair:</b>	Chief Commissioner, JCC
<b>Vice Chair:</b>	Deputy Chief Commissioner, JCC
<b>Members:</b>	ABuHB CEO nominated (Executive) Director

	BCuHB CEO nominated (Executive) Director
	C&VuHB CEO nominated (Executive) Director
	CTMuHB CEO nominated (Executive) Director
	HDuHB CEO nominated (Executive) Director
	SBuHB CEO nominated (Executive) Director
	PtHB CEO nominated (Executive) Director
	Director of Finance & Information, JCC
	Director of Nursing & Quality, JCC
	Medical Director, JCC
	Director of Planning & Performance, JCC
	Director of Commissioning (Ambulance/111), JCC
	Director of Commissioning (Specialised Services), JCC
	Director of Commissioning (Mental Health, Learning Disabilities and Vulnerable Groups), JCC
	Committee Secretary, JCC
	Public Health Wales Rep, JCC
<b>Attendees by invitation:</b>	WAST
	Velindre
	Llais
	Welsh Government/NHS Executive

- 4.2 The membership of the CCLG shall be determined by the Chief Commissioner, taking account of the balance of skills and expertise necessary to deliver the Group's remit.
- 4.3 Members may on occasion nominate a suitably senior alternate Executive Director to attend the Group on their behalf but should ensure that they are fully aware and briefed on the issues to be discussed. Health board members should ensure the health board Chief Executive is aware and supportive of the nominated deputy.
- 4.4 The Committee Secretary, on behalf of the Chief Commissioner, shall arrange the provision of advice and support to group members on any aspect related to the conduct of their role on the Group.
- 4.5 The membership will be reviewed annually.

**By Invitation:**

- 4.6 The Chief Commissioner may invite other offices to attend when the CCLG is discussing areas of risk or matters that are the responsibility of that Director / member of staff.
- 4.7 The Chief Commissioner may also co-opt additional independent external attendees from outside the JCC/NHS Wales to provide specialist skills, knowledge and experience.

## 5 Quorum

- 5.1 A quorum shall be at least **nine members** comprising:

The Chief Commissioner or their Deputy  
3 further Directors from the JCC and  
5 (min) CEO nominated (Executive) Directors from health boards

## 6 Meeting Secretariat

- 6.1 The JCC Committee Secretary will arrange and oversee the secretarial and support arrangements for the CCLG.

## 7 Frequency of Meetings & Attendance

- 7.1 The Meetings shall meet bi-monthly, (in alternate months to the Joint Committee meetings) and more frequently or otherwise as deemed necessary by the Chief Commissioner.
- 7.2 Members will be required to commit to regular attendance to support continuity of business and effective support to the Chief Commissioner and Chief Executive Members of the Joint Committee.
- 7.3 Where a commitment to attendance is causing concern, the Chief Commissioner will make the member aware, seek solutions to improve attendance. In the case of health board Director Members, the Chief Commissioner reserves the right to refer to the matter to the Chief Executive of the respective health board.
- 7.4 The CCLG will arrange meetings and align with key statutory requirements during the year consistent with the Joint Committee's meeting annual plan of Business.

## 8 Withdrawal of Individuals in Attendance

- 8.1 The Chief Commissioner may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

## 9 Circulation of Papers

- 9.1 All papers will be distributed at least 7 calendar days in advance of the meeting.
- 9.2 The Committee Secretariat will ensure that summary notes are taken at each meeting to record actions and key points which will be provided to the Chief Commissioner within ten working days following the meeting.



## 10 Reporting

- 10.1 As Chair of the CCLG, the Chief Commissioner shall ensure regular updates are provided at each Joint Committee meeting on the work of the CCLG as required through the Chief Commissioners Report.
- 10.2 Health board Members of the CCLG shall ensure they provide regular and timely updates to the health board Chief Executive Members, taking account of the schedule of Joint Committee meetings.

## 11 Sub-Groups

- 11.1 Sub-groups of the JCC CCLG will be established at the discretion of the Chief Commissioner with support from the Chief Executive Members of the Joint Committee.
- 11.2 Terms of Reference including scope and purpose of any sub-group will be agreed by the JCC CCLG with reference to Chief Executive Members of the Joint Committee.
- 11.3 Consideration will be given to the establishment of a sub-group or sub-groups to support the CCLG on;
  - Strategy & IMTP development
  - Delivery oversight & management (finance, performance/value, quality)
- 11.4 Each of the JCC Commissioning Directors will establish a Collaborative Commissioning Group to include member representatives from health boards to support the specific issues of the relevant Commissioning portfolios, namely;
  - Specialised Services
  - Ambulance & 111
  - Mental Health, Learning Disabilities and Vulnerable Groups

## 12 Review

- 12.1 These Terms of Reference shall be adopted by the CCLG at its first meeting and subject to review at least on an annual basis thereafter with reference to members of the Joint Committee.