

**REPORT TO MERTON CLINICAL COMMISSIONING GROUP
GOVERNING BODY**

Date of Meeting: 26 November 2015

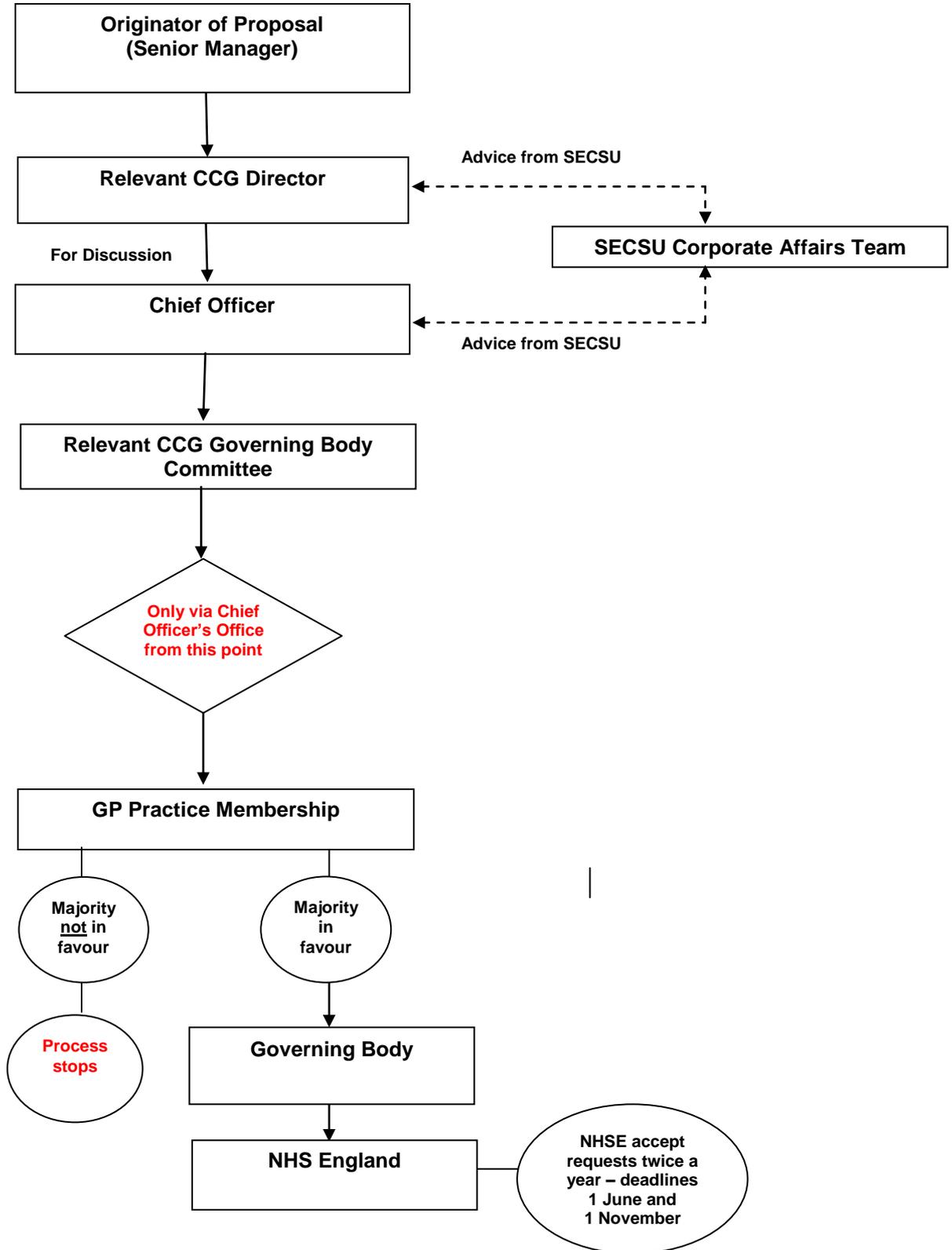
Agenda No: 7.4

Attachment: 16

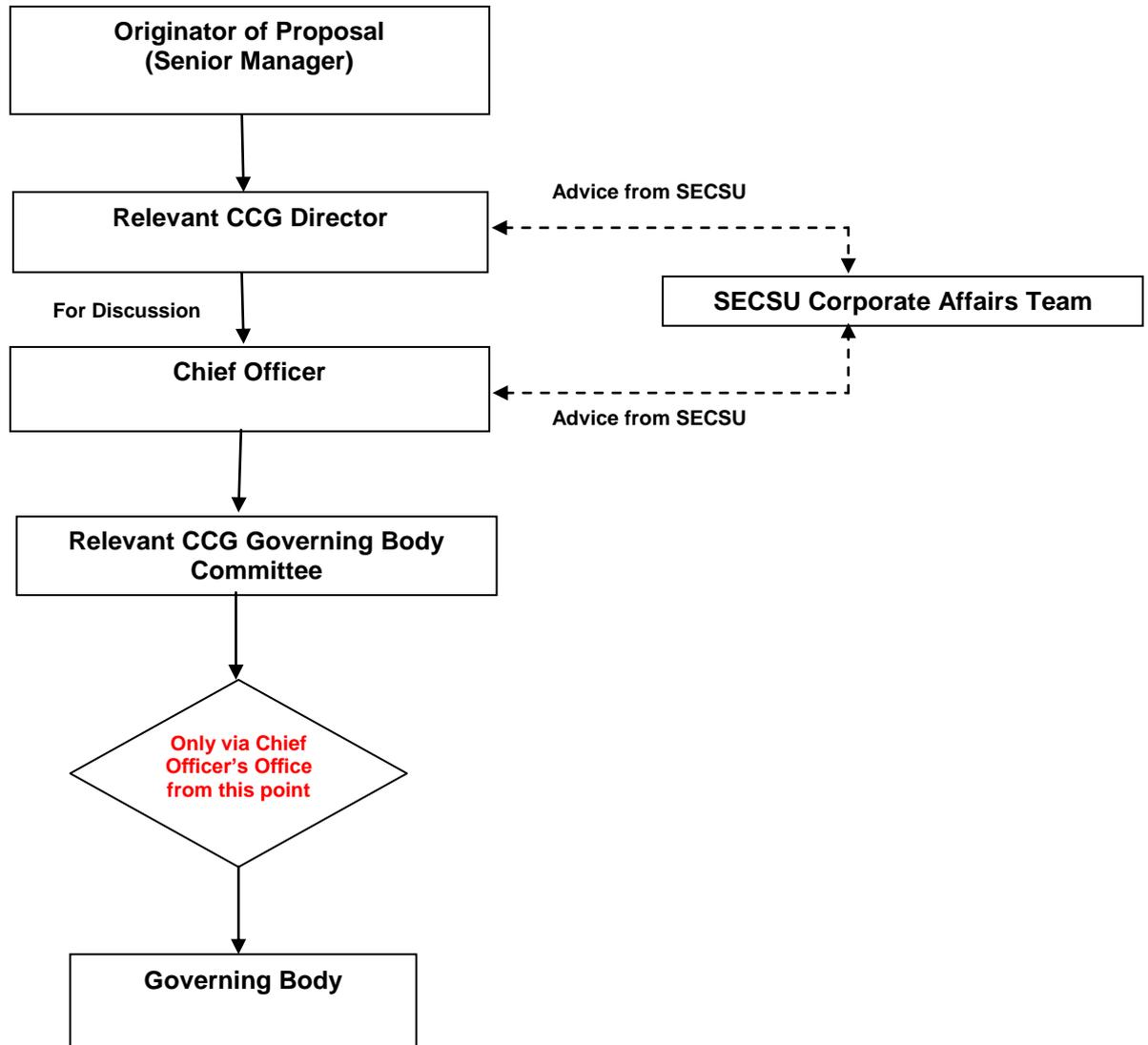
<p>Title of Document: Process for amending the NHS Merton CCG Constitution</p>	<p>Purpose of Report: To clarify the process for requesting and achieving approval for amendments to the Constitution</p>
<p>Report Author: Adam Doyle</p>	<p>Lead Director: Adam Doyle</p>
<p>Executive Summary:</p> <p>The Merton CCG Constitution sets out the terms on which the CCG exercises its statutory function to commission health services for the population of Merton. The Constitution, which encompasses the CCG’s governance arrangements, must:</p> <ul style="list-style-type: none"> • Be consistent with the NHS Constitution • Be consistent with the licence under which the CCG operates • Maintain internal consistency across the document to avoid conflicting passages <p>All changes to the Constitution, however small, must be approved by NHS England (NHSE). There are two opportunities each year to submit changes; The deadlines are 01 June and 01 November each year.</p> <p>The importance and complexity of the Constitution dictates that there must be a clear and transparent process for progressing proposed changes through the CCG and to NHSE. This process is presented as a flow chart in Appendix A.</p> <p>Proposals for changes to appendices to the CCG Constitution may be made at any time in year and without reference to NHS England. However all proposed changes must:</p> <ul style="list-style-type: none"> • Be consistent with the NHS Constitution • Be consistent with the licence under which the CCG operates • Maintain internal consistency across the document to avoid conflicting passages <p>The importance and complexity of the appendices again dictates that there must be a clear and transparent process for progressing proposed changes through the CCG to the Governing Body. This process is presented as a flow chart in Appendix B.</p> <p>There are no exceptions to the processes described in Appendix A and Appendix B.</p>	
<p>Key sections for particular note (paragraph/page), areas of concern etc:</p> <ul style="list-style-type: none"> • Dialogue with GP Member practices and NHSE about proposed changes to the Constitution will be progressed through the Chief Officer’s Office. • A minimum of 54% of GP Member Practice must vote in favour of a proposed change for it to be carried. 	
<p>Recommendation(s): The Governing Body is asked to NOTE the process to be followed by the CCG and ensure it is embedded into the working practices of the organisation.</p>	

Committees which have previously discussed/agreed the report: None
Financial Implications: None
Implications for CCG Governing Body: Positive – clarifies the process to be followed.
How has the Patient voice been considered in development of this paper: Not applicable
Other Implications: (including patient and public involvement/Legal/Governance/Risk/Diversity/Staffing): None
Equality Assessment: Not applicable
Information Privacy Issues: Not applicable
Communication Plan: (including any implications under the Freedom of Information Act or NHS Constitution) Will be directly communicated to Committee members, the Governing Body and any staff affected by the report.

Flow Chart for Proposed Changes to the CCG Constitution



Flow Chart for Proposed Changes to Appendices to the CCG Constitution



Proposals for changes to appendices to the CCG Constitution may be made at any time in year and without reference to NHS England. However all proposed changes must:

- Follow the process flow charted above
- Be consistent with the CCG Constitution
- Be consistent with the licence under which the CCG operates.

There are no exceptions.