

# Stoke-on-Trent Clinical Commissioning Group

## Patient Congress - Terms of Reference

### The Purpose

The purpose of the Patient Congress is to bring the experience and voice of patient groups and carers to influence commissioning decisions of the Clinical Commissioning Group.

We will do this by:

- Putting the patient first
- Requesting and supporting evidence of best practice
- Seeking assurance from the CCG that patient voices are heard and acted upon appropriately
- Ensuring that patients are fully included in all aspects of service design and change
- Working in partnership with the CCG in order to inform and co-develop service improvements and service redesign
- Promoting awareness of health initiatives and developments with patients and the public

### Remit and Responsibilities (Duties)

The Patient Congress will:

1. Work in partnership with the CCG Executive throughout all key commissioning cycles of service design, redesign or improvement
2. Receive assurance that the strategic outputs of the collective work of the Congress are reflected in the Planning process and that patient and stakeholder views are systematically embedded in the commissioning cycle
3. Interact with other patients, the public and communities to collate ideas, concerns, issues and feedback that the Patient Congress considers is relevant
4. Seek assurance from commissioners that there is interaction with hospital, community, social care providers and other relevant stakeholders to relay local issues
5. Involve its members in commissioning and redesign through special interest groups and/or committees of the CCG
6. Receive intelligence from the members of the congress who attend special interest groups and/or committees of the CCG
7. Assist the CCG to explain the usage of healthcare resources to the public
8. Receive assurance that all commissioning work has patient input and quality of care at the heart of the process

### Accountability / Relationship with CCG Governing Body / Committee Structures

The Patient Congress will appraise the Governing Body of progress against its roles and responsibilities via a written report to Quality Committee. This report will be overseen by the Lay Person for PPI or Clinical Director for PPI and will be shared with congress members.

The Patient Congress will be connected to the PPI Steering Group through two nominated representatives.

## **Membership**

The Patient Congress will consist of 22 members – 15 voting members and 7 non-voting.

### Voting Membership

- Chair - CCG Lay Member for Patient and Public Involvement
- Vice Chair – CCG Operational Lead for Patient and Public Involvement
- Clinical Director – Patient and Public Involvement
- 12 representatives drawn from local patient interest groups, PPGs, the voluntary/community sector or condition support groups in Stoke-on-Trent in line with the CCG's Equality Delivery System

### Non-Voting Membership

- 2 representatives from Stoke on Trent City Council (1 Public Health representative and 1 Social Care representative)
- 1 representative from HealthWatch
- 2 Senior Commissioning Managers
- 1 representative from the CSU
- 1 representative from VAST (CCG/VAST Liaison role)

In addition, the Patient Congress may consider co-opting further members onto the Congress in a non-voting time limited capacity, where expertise is required specific to items being considered, and not available within the current membership.

## **Quoracy**

The Patient Congress will be quorate and able to make decisions with a minimum of 5 voting members present, to consist of:

- Chair (or Vice-Chair)
- 4 other voting members

In the event that an urgent vote is needed, the Chair may take a decision on quoracy.

## **Voting**

- Voting will be by consensus
- Where consensus is not reached, each voting member will be allowed 1 vote
- The Chair will retain the casting vote

## **Frequency and Notice of Meetings**

The Patient Congress will meet eight weekly (bi-monthly) for approximately 2 – 3 hours. A schedule of meeting dates will be circulated in advance. Additional meetings may be called as required.

Additional Task & Finish groups may be established by agreement.

## **Secretary / Reporting Arrangements**

The Patient Congress will be formally minuted by an administrative member of the CCG and the minutes signed off by the Chair when agreed as accurate by the Congress.

Agendas and papers will be issued at least 1 week in advance of the meeting date. All papers of a confidential nature will be clearly marked as such via a 'Confidential' watermark throughout the report.

## **Conflicts of Interest**

Conflicts of interest are to be declared and recorded within the minutes at the beginning of each meeting.

A register of Members' Interests is to be provided to the Chair and submitted to the CCG Governing Body in accordance with the CCG's Conflict of Interest Policy on an annual basis. Members must ensure that they advise the CCG of any changes to their declarations of interests at the earliest opportunity.

If a conflict of interest arises, then the Chair may request members to withdraw at the appropriate discussions / voting point.

When more than 50% of the members are required to withdraw from a meeting or part of it, the Chair will consider whether the meeting is quorate. Where the meeting is not quorate the discussion will be deferred until a quorum can be convened.

### **Conduct of the Patient Congress**

Members of the Patient Congress will act at all times in good faith and follow the seven principles of Public Life (Nolan Principles)

The Patient Congress will be chaired by the PPI Lay Member on the Governing Body and will have the Operational Lead for PPI as its Vice Chair.

There is an implicit agreement that the Patient Congress, by reason of membership, will trust the Chair to represent them accurately and with integrity at all meetings

The Patient Congress will review its effectiveness at the end of each meeting as a standing agenda item.

Patient Congress members will be expected to:-

- Attend review and development days as required
- Undertake a Disclosure and Barring Service (DBS) check
- Sign a confidentiality agreement
- Attend the conflict of interest training
- Sign a conflict of interest declaration
- Attend EDS training

Congress members who attend Special Interest Groups/CCG Committees (e.g. Planning, Quality, PPI Steering etc) will report to the Congress, outlining the work that has taken place. The Chair of both the Special Interest Group and the Chair of the Congress should be notified of anything that is deemed to be of significant interest.

### **Tenure / Attendance**

The tenure will be for 2 years from time of appointment in the first instance (excluding the Chair and non-voting members). Members may stand down at any time during their tenure, by giving written notice. Members may only be re-elected twice, subject to the interview process.

Members are expected to attend all meetings or arrange apologies in advance in exceptional circumstances. Non-attendance without prior apology or other notification for three consecutive meetings will result in membership being deemed as lapsed. The Chair will discuss any issues in relation to attendance with the individual(s) concerned, identifying any barriers for attendance and agreeing an appropriate way forward.

Where members may be absent from duties for a period of time, discussions will take place between the Chair of the Patient Congress and the individual or organisation to determine whether it is appropriate to nominate a deputy to provide cover during this time. An informal meeting will be undertaken between the Chair of the Patient Congress and one other Congress member, with the nominated individual, to outline responsibilities during this period of cover.

### **Reimbursement**

All Patient Congress members, from the voluntary / community sector or condition support groups and from locality groups will be entitled to reimbursement as follows on an honorarium basis:

- £75 attendance fee per Patient Congress meeting, six meetings per year and any extra-ordinary Congress meetings which may be called. Attendance will be ascertained from minutes of meetings and signature sheets. Payment will be processed within five working days of the meeting.
- Expenses (travel and parking) to be paid for all incurred costs whilst on approved CCG business. This includes travel and parking to the Patient Congress meeting and any additional meetings or events as agreed in advance with the operational lead for PPI within the CCG.
- Payment sheets for travel and parking will be processed on a monthly basis via the administrator for Patient Congress.
- This payment can be made to the individual or organisation they represent

### **Review of Terms of Reference**

The Patient Congress shall carry out an annual self-assessment, to review its performance. The outcome of this will be shared with the Governing Body, and the general public.

Formal review of the Terms of Reference, Cycle of Business and membership will also occur annually.

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