

## **Patient and Public Engagement Committee Terms of Reference**

### **1. Purpose**

The Patient and Public Engagement Committee (PPEC) has been established as a strategic group to ensure the patient voice is at the centre of NHS Mansfield and Ashfield CCG and NHS Newark and Sherwood CCG. The PPEC will bring together members of NHS Mansfield and Ashfield CCG Citizens' Reference Panel, the NHS Newark and Sherwood CCG Stakeholder Reference Group and the mid Nottinghamshire Patient Reference Group. The PPEC will replace these groups.

All references within the Terms of Reference to the 'Joint Governing Body' are referring to joint meetings of NHS Mansfield and Ashfield CCG Governing Body and NHS Newark and Sherwood CCG Governing Body.

All references within the Terms of Reference to 'CCG area' are referring to the population covered by NHS Mansfield and Ashfield CCG or NHS Newark and Sherwood CCG.

### **2. The objectives of the PPEC are:**

- a) To provide an interface between communities and networks across mid Nottinghamshire and the CCGs' Joint Governing Body for the purposes of providing the patient and public perspective in the planning and commissioning of health and care services for the CCG area.
- b) To support and develop the PPEC membership in their work and ensure that the issues raised in engagement with patients and the public, inform and improve the quality and cost effectiveness of local CCG commissioned services.
- c) To use the interface between communities and networks as a mechanism to communicate outputs/outcomes of engagement and involvement.
- d) To provide the CCGs with an overarching group that will enable sharing of suggestions and decisions on issues relevant to the CCGs.
- e) To ensure patient and public experience is central to the work of the Joint Governing Body and it features prominently on the agenda at every meeting.
- f) To provide a two-way process of feedback between the Joint Governing Body including sub-committees (Quality, Risk and Safeguarding Committee included) and the PPEC.
- g) To be assured that the CCGs are complying with the NHS' guiding principles for CCGs for patient and public participation.

### **3. Membership**

The membership of the Group will comprise:

- a) A core membership incorporating:
  - Patient Participation Group representatives - one from each of the primary care localities in Mansfield and Ashfield and two from the primary care localities in Newark and Sherwood to reflect the rurality of Newark and Sherwood (8)
  - Healthwatch Nottinghamshire representative (1)
  - Community and voluntary sector representatives from Mansfield CVS, Newark and Sherwood CVS and Ashfield Voluntary Action (3)
  - Local Authority elected members from each district council within mid-Nottinghamshire (3)
  - Representatives from communities and networks across mid-

Nottinghamshire who reflect the CCGs' commissioning intentions and groups with protected characteristics (8). This will be updated as required in response to any changes to the CCGs' commissioning intentions

- Communities and Engagement Team representative
- b) virtual membership will be represented via the PPEC core membership. Every effort will be made to ensure the Health and Wellbeing Forum is as accessible and inclusive as possible.
- c) links will be developed with a wide cross section of the communities we serve particularly those who are vulnerable or with protected characteristics
- d) there will be an appropriate balance of representation from across the two CCG areas and health interest groups in the membership.

Other members may also be co-opted for a specific purpose and for a limited period of time.

The membership for the PPEC will be seen as necessary and appropriate to the relevant issues at hand.

#### **4. Chair and Vice-Chair**

The Chair and Vice Chair will be elected from the membership of the PPEC having successfully met the requirements of the Joint Governing Body Competency Framework for Lay Members.

The Chair and Vice-Chair will not be from the same CCG area.

The Chair and Vice-Chair will be elected for a term of one year. A review will take place by the PPEC in which the Chair will then rotate with the Vice-Chair unless the PPEC wish the Chair and Vice-Chair to remain unchanged for a further term of one or more years after which the Chair and/or Vice-Chair rotate to the other CCG area. The Chair and Vice-Chair may only stand for a maximum period of three years before further elections will take place in which the Chair and Vice-Chair may seek re-election for one more term of no more than 3 years.

The Chair will be one of the lay members on the joint Governing Body. The Vice-Chair will be appointed as a lay member of the Quality, Risk and Safeguarding Committee (QRS) and will work to a role specification. The Chair and Vice-Chair of the PPEC will be subject to a Disclosure and Barring Service (DBS) check.

The Chair and Vice-Chair will establish a relationship in which they meet regularly and both are familiar with the work of the QRS and ensure that its deliberations are supported by the PPEC work plan. The Vice-Chair and Chair will include in their regular meetings discussions about impending joint CCG Governing Body public meeting agendas. The Chair of the Governing Body will identify when a confidential item is relevant for input from the PPEC in order that this may be discussed with the PPEC and feedback provided to the Governing Body.

#### **5. Quorum and voting arrangements**

A quorum of the membership will include:

- a) either the Chair or Vice-Chair (1)
- b) two Patient Participation Group members from each of the CCG areas (4)
- c) one third sector representative (1)
- d) Special interest groups (2)

Any question where it is deemed necessary by the Chair to require a vote at a meeting shall be determined by a majority of the votes of members present at the meeting. If necessary, the Chair will have the casting vote.

## **6. Frequency of meetings**

The PPEC will meet monthly and meetings will be scheduled in advance at a time that will enable PPEC members to contribute in a timely manner to the Joint Governing Body meetings.

Meetings will take place at venues within easy travelling distance of PPEC members, rotating between, and spread evenly (when possible) over the two CCG areas. Where meeting venues are unfamiliar to PPEC members an environmental and personal safety risk assessment will be carried out. Meeting venues should be free of charge wherever possible.

Extraordinary meetings will be arranged as required. The PPEC Members will also attend Development Sessions to enhance their skills, knowledge and expertise.

Virtual working through email links and telephone conference calls will be used where appropriate.

## **7. Mode of Working**

The PPEC will develop a work plan that reflects the CCGs' priorities, local issues and supports the membership to have a better awareness of issues effecting mid Nottinghamshire or either of the two CCG areas.

All members of the PPEC will be provided with the Joint Governing Body public agenda and access to papers, supported by the PPEC Chair / Vice Chair in order to be prepared to inform and challenge the Joint Governing Body.

The work plan of the PPEC will be aligned to the CCGs' Commissioning Intentions, Health and Wellbeing Strategy and Integrated Care Systems work plans.

## **8. Requirements of PPEC and its membership**

A key role of the PPEC will be to support and strengthen the membership to ensure diverse representation of the communities. PPEC members will be expected to:

- a) Consider issues from a wider locality perspective and be well informed about the issues and concerns of both CCG areas.
- b) Undertake preparation for meetings.
- c) Share learning experiences and feedback from PPEC meetings to the groups/networks they represent in order to improve their ability to represent their respective communities and improve services.
- d) Participate in support and development reviews along with training and development opportunities.
- e) Be a role model and ambassador with a positive, collegiate approach.
- f) Bring challenge to the CCGs in the role of 'critical friend'.
- g) Produce a work plan to ensure that the PPEC have clear aims and objectives to support the work of the CCGs and their priorities.
- h) Adhere to the PPEC Code of Conduct by being respectful, courteous and value others contributions.

PPEC members will be required to attend no less than 80% of meetings during the course of a year. If a PPEC member does not attend the minimum number of meetings required, the Chair may request that the PPEC member resign from their position. Special consideration will always be given when there are extenuating circumstances.

If any member is not in a position to attend a meeting then apologies must be sent in order that they can be noted and recorded within the minutes of the meeting. If a member fails to send their apologies for absence to a meeting and does not attend on several occasions they may be asked to resign from the PPEC.

If for any reason a PPEC Member is not able to attend a meeting but telephone conferencing facilities are available then this option will be considered.

Members not able to attend a meeting should submit any feedback requested prior to the meeting.

### **9. Conduct of PPEC**

The PPEC will be expected to conduct itself in an exemplary manner working to the [Nolan seven principles of public life](#), namely:

- Selflessness
- Integrity
- Objectivity
- Accountability
- Openness
- Honesty
- Leadership

Members of the PPEC will have a collective responsibility for the operation of the group. They will participate in discussion, review evidence and provide objective expert input to the best of their knowledge and ability, and endeavour to reach a collective view.

The PPEC may delegate tasks to such individuals, sub-committees or individual members as it shall see fit, provided that any such delegations are consistent with the parties' relevant governance arrangements, are recorded in a scheme of delegation, are governed by terms of reference as appropriate and reflect appropriate arrangements for the management of conflicts of interest.

The Competency Framework mentioned earlier will include the range of knowledge, skills and behaviours necessary for all PPEC members to be able to contribute to PPEC meetings and to conduct business appropriately.

### **10. Administration of Meetings**

The Director responsible for strategic oversight of the PPEC is the Chief Commissioning Officer who will delegate day to day administration of the PPEC to the Communities and Engagement Team.

Agendas and supporting papers will be circulated no later than 5 working days in advance of meetings. It is not a requirement for all board papers to be read. There are summary sheets that will provide the PPEC Members with insight and information into the meeting that will take place. (It is a legal requirement by the CCGs to issue Board Papers on their websites 7 days prior to the meeting).

Any items to be placed on the agenda will be sent to the Communities and Engagement Team no later than 7 working days in advance of the meeting. Urgent items that miss the deadline for inclusion on the agenda may be added on receipt of permission of the Chair.

Minutes will be taken at all meetings and circulated to the members of the PPEC. The minutes will be approved by agreement of the PPEC at the next meeting. The Chair of the PPEC will approve draft minutes prior to them being submitted to the Joint Governing Body for comment and noting.

The PPEC Chair will also present a report as part of the Joint Governing Body integrated performance process as governance processes develop to allow this to impact on the whole of the Joint Governing Body deliberations.

The PPEC will also comply with any reporting requirements set out by the CCGs.

Members of the PPEC shall respect confidentiality requirements as set out in the CCGs' Standing Orders.

### **11. Declarations of Interest**

NHS Mansfield and Ashfield CCG and NHS Newark and Sherwood CCG have a Conflict of Interest Policy which PPEC members are required to observe, which includes a register of member interests.

At the beginning of each formal meeting, PPEC members will be required to declare any personal interest if it relates specifically to a particular issue under consideration. Any such declaration shall be formally recorded in the minutes for the meeting and the conflict of interest managed in accordance with the provisions set out in the CCGs' policy.

When agendas for formal PPEC meetings are planned, the Chair or Administrative Support may identify an actual, suspected or perceived conflict of interest. Consideration will then be given to the provision of papers, meeting attendance or involvement in debate or voting in order to manage any conflict of interest in accordance with the provisions set out in the CCGs' policy.

### **12. Reporting Responsibilities**

The PPEC will report items for consideration to the Governing Body through submission of minutes and integrated reports. In addition, PPEC members will report back to their respective groups and networks.

The role of the Vice-Chair at the Quality Risk and Safeguarding Committee (QRS) will be to:

- a) contribute to discussions about systems and procedures for the development of patient and public experience as an integrated part of the CCGs' Governing Body reporting processes.
- b) support the development of patient and public engagement within the CCGs.
- c) contribute to the duty of the QRS Committee to promote staff and patient confidence in quality services by learning from experience and through effective communication.

The PPEC will provide an annual report covering its work to the Joint Governing Body setting out progress made and future developments in line with the work plan produced by the members. This report will then be published on the CCGs' websites and shared with PPEC members' groups and networks.

### **13. Expenses**

Members of the PPEC will be able to claim reasonable out-of-pocket expenses in accordance with the CCGs' policy. Expenses must be submitted monthly and claims will be paid within 28 days unless other arrangements have been agreed in advance.

#### **14. Review of Terms of Reference**

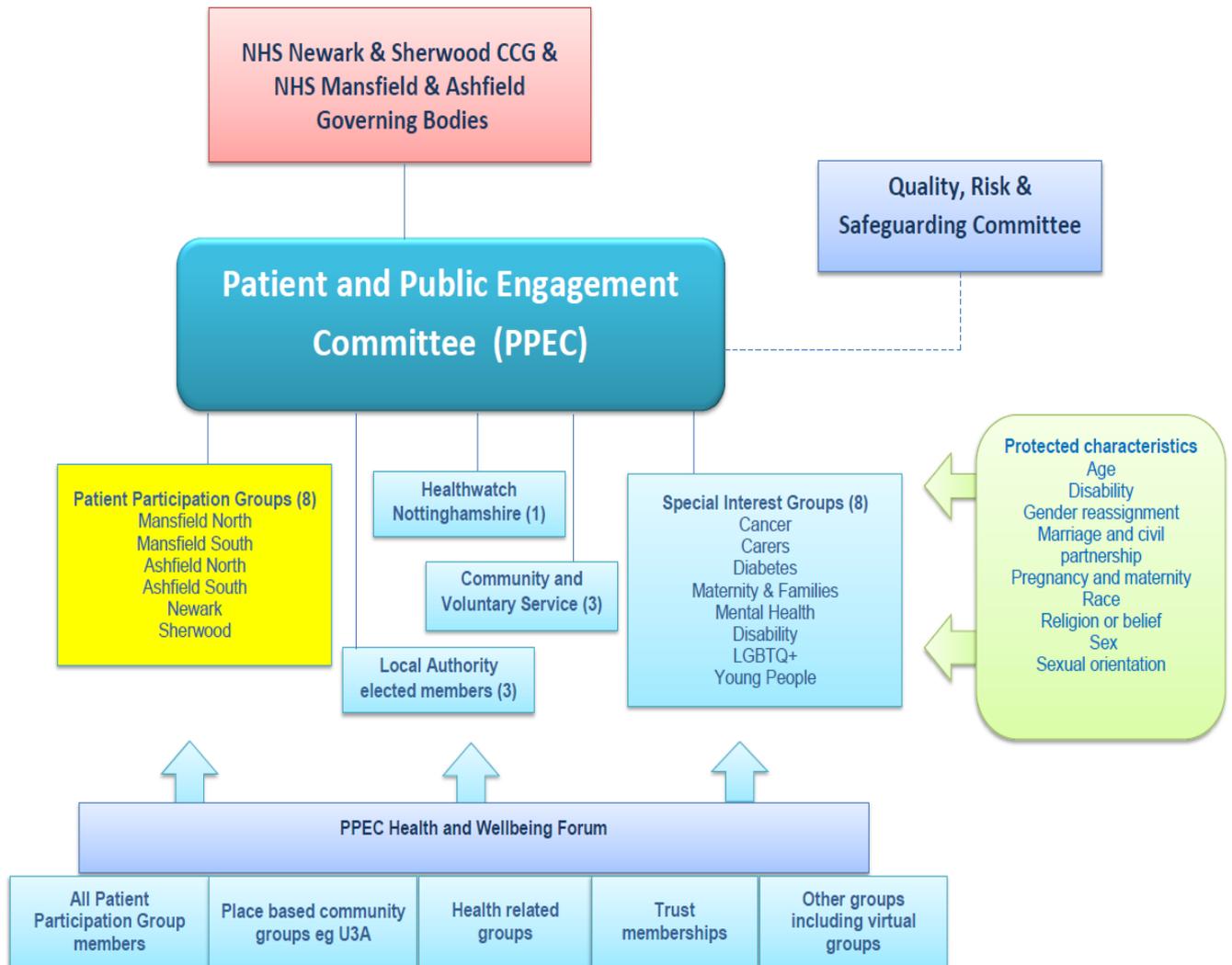
The Terms of Reference will be reviewed at least annually or when there is a material change to the contents of the Terms of Reference.

Any proposed amendments to the Terms of Reference will be submitted to the Joint Governing Body for approval.

Agreed: June 2018

Review Date: June 2019

### Membership of PPEC



**Role description for members of the Patient and Public Engagement Committee**

<b>Organisations:</b>	NHS Newark and Sherwood Clinical Commissioning Group and NHS Mansfield and Ashfield Clinical Commissioning Group
<b>Post:</b>	Member of the Patient and Public Engagement Committee
<b>Number of posts:</b>	TBC
<b>Tenure:</b>	Terms of Office 3 Years
<b>Reports to:</b>	Patient and Public Engagement Committee Chair
<b>Reimbursement:</b>	Reasonable out-of-pocket expenses
<b>Notice;</b>	1 month
<b>Time commitment:</b>	Up to 6 hours per month (2 hours will be required in attendance at monthly committee meetings)
<b>Closing date:</b>	TBC

**Why you may be interested in the Patient and Public Engagement Committee/role summary:**

Members of the Patient and Public Engagement Committee (PPEC) will be expected to bring important added value to NHS Newark and Sherwood and NHS Mansfield and Ashfield Clinical Commissioning Groups (CCG) by helping to ensure that service and policy decisions reflect the needs and views of local communities.

As an active member of a Patient Participation Group (PPG) or special interest group/organisation members will be expected to be the link between those groups, the PPEC and CCGs, ensuring a two-way communication is developed and maintained. Members will be expected to provide constructive challenge to current thinking on health and care issues and ensure that patient, public and community engagement remains at the forefront of the CCGs' business.

**Key responsibilities and opportunities:**

Through being active members of the PPEC, members will be expected to undertake the following roles:

- Bring a different and independent patient and public perspective to the discussions to meet responsibilities and deliver outcomes and objectives from the PPEC;
- Strive to ensure that any outcomes produced are representative of the needs of all and not driven solely by the personal opinion of an individual or group.
- Ensure information from CCGs is cascaded out to the wider community via your organization / member networks and others as agreed in PPEC meeting and raise

awareness about commissioning decisions and intentions and service development and to provide feedback as appropriate to the PPEC.

- Actively participate in other relevant and appropriate PPEC and CCG sub groups and task and finish groups;
- Attend and actively participate in PPEC meetings
- Comply with the terms of their appointment with the CCG and the PPEC Terms of Reference and Code of Conduct.
- Support a two-way communication channel between the networks they are representing and the PPEC
- Support the co-ordination of the engagement of PPGs, community health interest groups and others who wish to be involved in the consultation, planning and commissioning of health services locally
- Encourage and support active participation in health and wellbeing within member's networks and the organisation represented
- Perform duties in a manner which supports and promotes the PPEC / CCGs' commitment to equality, diversity and human rights
- Attend relevant training and development opportunities

#### **Experience:**

Members of the PPEC will bring a variety of strengths that will contribute to the CCGs effectiveness in engaging and involving patients, public and carers. Specialist knowledge of health care is not essential. Diverse skills or knowledge will be valued in many areas such as public engagement, social marketing or expertise on equality issues.

#### **What the role involves:**

- Attendance at monthly meetings of the Patient and Public Engagement Committee;
- Preparation for meetings, including understanding and interpreting reports
- Liaising with the organisation or networks that you represent to canvass views and opinions
- Liaison with the Communities and Engagement Team and other members of the clinical and managerial team of the CCGs as appropriate within PPEC activity
- Attendance at additional PPEC sub groups or workstream meetings as and when required

#### **Expenses:**

Members of the Patient and Public Engagement Committee will be entitled to be reimbursed for reasonable out-of-pocket expenses: travel expenses, childcare and carer expenses where appropriate, in line with the CCGs Lay Member Expenses Policy.

## Patient and Public Engagement Committee Member Competencies

The following competencies are identified to help potential candidates assess their abilities to fulfil the role of PPEC member

Essential	Desirable
<b>Knowledge, Skills and Experience</b>	
<ul style="list-style-type: none"> <li>Willing to develop an understanding of the CCGs, their commissioning process, and wider health and care issues, to benefit the CCGs and their aims.</li> </ul>	To possess a good understanding of the NHS and the remit and responsibilities of CCGs.
<ul style="list-style-type: none"> <li>Have experience to contribute to the effective working of the PPEC with the objective of ensuring that the CCGs benefit from sound decision making, advice and guidance</li> </ul>	Recent experience in a PPG or special interest group or similar
<ul style="list-style-type: none"> <li>The ability to focus on the long-term or widespread implications of decisions</li> </ul>	
<ul style="list-style-type: none"> <li>Be able to develop good working relationships with a diverse range of people involved in the PPEC Committee</li> </ul>	Experience within a community organisation or similar
<ul style="list-style-type: none"> <li>Be able to analyse complex information and communicate with a wide range of people at all levels on issues, and present information accurately, creatively and precisely</li> </ul>	Have looked at CCG Governing Body performance papers
<ul style="list-style-type: none"> <li>The ability to network and communicate effectively with patients, carers and voluntary groups</li> </ul>	Have already been involved in a local community organisation or some other capacity
<ul style="list-style-type: none"> <li>Be able to demonstrate knowledge of and commitment to the involvement of patients, carers and the local community to identify their health needs</li> </ul>	Have experience in representing the interests of the community
To have a broad understanding of equality, diversity and human rights	
<b>Personal Attributes</b>	
<ul style="list-style-type: none"> <li>The ability to listen to and understand the perspectives of other individuals, groups and organisations.</li> </ul>	
<ul style="list-style-type: none"> <li>Be able to constructively challenge current thinking in ways that are both creative and supportive, eg generating ideas and problem solving</li> </ul>	
<b>Other requirements</b>	
<ul style="list-style-type: none"> <li>Live or be registered with a GP practice in Mansfield, Ashfield Newark or Sherwood</li> </ul>	

Support with development needs will be provided by the outgoing Patient & Public Lay member on the CCG for a period agreed with the PPEC member.

Additional competences required of PPEC Chair and Vice Chair  
(to ensure meet Lay Member Competency for role on Governing Body role or Quality Risk and Safeguarding Committee)

Essential	Desirable
<b>Overview of responsibilities</b> The PPEC representative will:	
<ul style="list-style-type: none"> <li>• Bring independent thinking, skills and perspectives to the Governing Body / Committees</li> <li>• Hold the executive directors to account by monitoring performance and ensuring systems are robust and reliable in relation to patient and citizen engagement.</li> <li>• Contribute to shaping a positive culture for the organisations.</li> <li>• Proactively contribute to Committee decisions.</li> <li>• Act as an ambassador for the PPEC.</li> <li>• Promote partnership development and working across the local health and social care community.</li> </ul>	<ul style="list-style-type: none"> <li>• Been a member of the committee of a community organisation or similar</li> <li>• Have identified areas to improve performance from previous experience</li> <li>• Evidence of how influenced committee decisions</li> </ul>
<b>Personal Attributes</b>	
<ul style="list-style-type: none"> <li>• Show intellectual flexibility in dealing with the complexity of documents coming to the PPEC and CCG Board and committees and clarify complexity for other people.</li> </ul>	
<ul style="list-style-type: none"> <li>• Have or develop the confidence to proactively contribute to the PPEC , CCG Board or Committee meetings and present the public and patient views of proposed service development and commissioning plans.</li> </ul>	
<ul style="list-style-type: none"> <li>• Demonstrate the ability to work at senior level in an organisation with a significant budget and of comparable complexity to CCG.</li> </ul>	
<ul style="list-style-type: none"> <li>• Demonstrate a considerable reputation within your experience whether public, private or voluntary sector.</li> </ul>	
<ul style="list-style-type: none"> <li>• Demonstrate experience of building alliances and working relationships with a range of stakeholders.</li> </ul>	
<ul style="list-style-type: none"> <li>• Exhibit a high level of commitment to patients, carers and the community and to tackling health inequalities in disadvantaged groups.</li> </ul>	
<ul style="list-style-type: none"> <li>• Demonstrate the motivation to improve NHS performance and the confidence to take on challenges.</li> </ul>	
<ul style="list-style-type: none"> <li>• Demonstrate the ability to develop a clear vision, take on a personal leadership role enthusing others, build an effective team and gain support and influence.</li> </ul>	
<ul style="list-style-type: none"> <li>• Be able to constructively challenge Governing Body or Committee documents or CCG Directors / managers in a positive way which holds Executive Directors to account.</li> </ul>	
<ul style="list-style-type: none"> <li>• Able to effectively manage the PPEC meetings in line with the leadership and chairmanship qualities defined and effectively report CCG Board / Committee proceedings to the PPEC.</li> </ul>	<ul style="list-style-type: none"> <li>• Have effectively chaired committee meetings</li> </ul>

Support with development needs will be provided by the outgoing Patient & Public Lay member on the CCG for a period agreed with the PPEC member.