

#### **Hull Clinical Commissioning Group**

## Agenda Item: 4.8

Report to:	CCG Board
Date of Meeting:	31 <sup>st</sup> May 2013
Subject:	CCG Constitution and Speaking Out Arrangements
Presented by:	Mike Napier, Head of Corporate Governance
Author:	Mike Napier, Head of Corporate Governance

STATUS OF THE REPORT:					
To approve	X	To endorse			
To ratify		To discuss			
To consider		For information			
		To note			

### PURPOSE OF REPORT:

To reaffirm the arrangements within the CCG Constitution and the CCG in general.

### **RECOMMENDATIONS:**

1. To approve the recommended addition to the CCG Constitution and note the other arrangements already in place within the CCG with respect to speaking out.

REPORT EXEMPT FROM PUBLIC DISCLOSURE	No X Yes
If yes, grounds for exemption (FOIA or DPA section reference)	

CCG STRATEGY NUMBER - REFERENCE	ASSURANCE FRAMEWORK - REFERENCE NUMBER
Short summary as to how the report links to the CCG's strategic objectives	Short summary as to how the report adds assurance to the Assurance Framework
Ensures the provision of the highest possible quality of service.	Establishes formal mechanisms and arrangements for the governance of the CCG.

<b>IMPLICATIONS:</b> (summary of key implications, including risks, associated with the paper),			
Finance	No additional costs identified.		
HR	No additional risks identified.		
Quality	No additional risks identified		
Safety	No additional risks identified		

**ENGAGEMENT:** (*Explain what engagement has taken place e.g. Partners, patients and the public prior to presenting the paper and the outcome of this*)

The CCG Constitution has been subject to considerable internal engagement and review.

LEGAL ISSUES: (Summarise key legal issues / legislation relevant to the report)

No adverse impacts identified.

**EQUALITY AND DIVERSITY ISSUES:** (summary of impact, if any, of CCG's duty to promote equality and diversity based on Equality Impact Analysis (EIA). **All** reports relating to new services, changes to existing services or CCG strategies / policies **must** have a valid EIA and will not be received by the Group if this is not appended to the report).

No adverse impacts identified.

**THE NHS CONSTITUTION:** (How the report supports the NHS Constitution)

The proposals support delivery of Principle 3 of the NHS Constitution: The NHS aspires to the highest standards of excellence and professionalism.



# The CCG Constitution and Speaking Out Arrangements

## 1. Introduction

- 1.1. There has been continued national coverage and debate on the importance of NHS organisations supporting staff seeking to raise concerns in the public interest. Whistleblowing remains an important part of clinical governance arrangements and patient safety systems, with direct implications on patient safety outcomes.
- 1.2. Consideration has also been given as to how best to emphasise the similar support afforded to Members of CCGs, including its Board Members. The Chief Executive of the NHS, Sir David Nicholson, has recently written to the service in this respect with particular reference to CCG Constitutions.
- 1.3. This short paper confirms the arrangements already in place in the CCG as well as the proposed action in the light of Sir David's correspondence.

### 2. Information

- 2.1. The CCG's Constitution sets out the general principles, rules and arrangements through which it discharges its statutory duties. It was approved by the then NHS Commissioning Board in January 2013.
- 2.2. Section 9.9 of the CCG Constitution (the Group as an Employer) explicitly confirms that "the group will adopt a Code of Conduct for staff and will maintain and promote effective 'whistleblowing' procedures to ensure that concerned staff have means through which their concerns can be voiced."
- 2.3. In addition, the approved Statement of Appointment for Board Members also confirms in section 9 (Roles and Duties) that "You must comply with any duty of candour as it may be applied to the NHS, its officers, contractors or employees.

The CCG promotes openness and transparency in all that it does and as a CCG member you are encouraged and supported in raising any concerns you may have in relation to patient safety and care or any other matter related to the business of the CCG."

2.4 For the avoidance of any further doubt, NHS England has suggested that the following paragraph also be added to CCG Constitutions, "*The group recognises and confirms that nothing in or referred to in this constitution (including in relation to the issue of any press release or other public statement or disclosure) will prevent or* 

inhibit the making of any protected disclosure (as defined by the Employment Rights Act 1996, as amended by the Public Interest Disclosure Act 1998) by any member of the group, any member of its governing body, any member of any of its committees or sib-committees or the committees or sub-committees of its governing body, or any employee of the group or any of its members, nor will it affect the rights of any worker (as defined in that Act) under that Act."

2.5 Proposed amendments to CCG Constitutions require the approval of the Director of Operations for NHS North of England and enquiries in this regard will be necessary should the recommendation be approved by the Board.

## 3. Recommendation

3.1 It is recommended that the Board approve the addition to the CCG Constitution as set out in 2.4 and note the other arrangements already in place within the CCG with respect to speaking out.