

# South Kent Coast Integrated Commissioning Group

# **Terms of Reference**

### 1. Introduction

- 1.1 The South Kent Coast Integrated Commissioning Group is established to enable joint working between NHS South Kent Coast Clinical Commissioning Group's Commissioners and Local Authority Commissioners as well as officers from Dover District Council and Shepway District Council to ensure delivery of the agreed Integrated Commissioning Strategy and associated integrated plans.
- 1.2 The South Kent Coast Integrated Commissioning Group is authorised by the South Kent Coast Health and Well-being Board to act within its terms of reference. The members of the Group remain accountable to their respective organisations and rather than make decisions about commissioning plans the Group will make recommendations for the South Kent Coast Health and Well Board to consider.

## 2. Membership

- 2.1 The membership of the Integrated Commissioning Group shall consist of:
  - 2.1.1 Zoe Mirza, Head of Integrated Commissioning, NHS South Kent Coast CCG (meeting chair);
  - 2.1.2 Dr Joe Chaudhuri, Dover GP and Deputy Clinical Chair, NHS South Kent Coast CCG;
  - 2.1.3 Dr Tuan Nguyen, Shepway GP;
  - 2.1.4 Other NHS South Kent Coast CCG staff as required;
  - 2.1.5 Paula Parker, Commissioning Manager, Kent County Council (deputy meeting chair);
  - 2.1.6 Janice Duff, Assistant Director, Kent County Council;
  - 2.1.7 Jess Mookherjee, Assistant Director Public Health, Kent County Council;
  - 2.1.8 Jo Frazer, Programme Manager Health & Social Care Integration, Kent County Council;
  - 2.1.9 Other local authority officers as required;
  - 2.1.10 Michelle Farrow, Head of Leadership Support, Dover District Council;
  - 2.1.11 Sandra Sainsbury, Housing Strategy Partnership Officer, Shepway District Council.
- 2.2 Specific agenda items may require additional stakeholders to attend meetings.
- 2.3 Members of the group are responsible for briefing their own organisations.





South Kent Coast Clinical Commissioning Group

- 2.4 Where members are unable to attend meetings they should make arrangements for a deputy to attend on their behalf.
- 2.5 Administrative support for the group will be shared between the CCG and KCC.

### 3. Quorum

3.1 The quorum is based on appropriate members being in attendance to enable discussions and decisions on specific agenda items rather than the number of members in attendance.

### 4. Frequency of meetings

4.1 Meetings of the group shall be every 6-8 weeks.

### 5. Remit and responsibilities of the Committee

- 5.1 The group shall:
  - 5.1.1 be responsible for the development, and regular review, of the Integrated Commissioning Strategy and for working in partnership to focus on the priority work stream areas;
  - 5.1.2 make recommendations to and provide reports to the South Kent Coast Health and Well Being Board on joint plans as required;
  - 5.1.3 provide reports to other members of the group to ensure members are kept up to date as plans are developed and delivered;
  - 5.1.4 contribute towards the development of the local Better Care Fund plans;
  - 5.1.5 maintain oversight of the delivery of local Better Care Fund plans and agree recommendations and joint approaches to support the delivery of schemes within the plans and where necessary escalating any barriers and risks;
  - 5.1.6 plan priority areas to be presented to the South Kent Coast Health and Well Being Board to support the development of the forward plans;
  - 5.1.7 consult with the Dover Adult Strategic Partnership and Shepway Adult Strategic Partnership as consultative forums;
  - 5.1.8 ensure work programmes are aligned with organisational integration priorities and strategies as well as the South Kent Coast Health and Well Being Strategy;
  - 5.1.9 maintain awareness of how local plans fit into national and local priorities and utilise opportunities for shared learning particularly from the Kent Pioneer Programme.