

HEALTHIER PEOPLE,  
BETTER FUTURE

**NHS**  
Heywood, Middleton  
and Rochdale  
Clinical Commissioning Group

**REMUNERATION COMMITTEE**

**Terms of Reference**

**October 2018**



## VERSION CONTROL

Version	Issued to	Date	Comments
V0.1			
V0.2	Remuneration Committee	27.03.2013	Revisions made at Remuneration Committee meeting held 27.03.2013
V0.3	Remuneration Committee	11.4.2013	Circulated to Remuneration Committee members for further comment – approved by members
V0.4	NHS HMR Clinical Commissioning Group	26.04.2013	For approval
V1.0	NHS HMR Clinical Commissioning Group	26.04.2013	Approved
V1.1	NHS HMR Clinical Commissioning Group	26.04.2014	Updated and Approved
V1.2	NHS HMR CCG Governing Body	18.11.2016	Amendments to membership required
V1.3	NHS HMR CCG Governing Body	16.1.17	Updates required to Clinical membership and duties of the Committee
V1.4	NHS HMR CCG Remuneration Committee	17.3.17	Updated and circulated to members for approval. RATIFIED by Governing Body
V1.5	NHS HMR CCG Remuneration Committee	18 May 2018	Updates - transferred to the standard template, amendment to decision making in line with Scheme of Delegation – approved by members with amendment to sustainability section as approved by GB
V2.0	NHS HMR CCG Governing Body	20 July 2018	Further updates to titles RATIFIED
V2.1	NHS HMR CCG Remuneration Committee	October 2018	Amendments to delegation following Constitutional Updates from NHS England
V3.0	NHS HMR CCG Governing Body	16.11.2018	RATIFIED

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## 1. Introduction

The Remuneration Committee (the Committee) is established in accordance with Heywood, Middleton and Rochdale Clinical Commissioning Group's (NHS HMR CCG) constitution, standing orders and scheme of delegation.

These terms of reference set out the membership, remit responsibilities and reporting arrangements of the Committee and shall have effect as if incorporated into the Clinical Commissioning Group's constitution and standing orders.

### PART ONE

## 2. Part One - Purpose of the Committee

Under delegated authority from the Governing Body, the Committee will:

- make recommendations on appropriate remuneration and terms of service for the:
- Chief Officer, Chief Finance Officer and any other employees not employed under Agenda for Change including
  - (i) all aspects of salary
  - (i) arrangements for termination of employment and other contractual terms including redundancy (if applicable), annual leave and contracted hours
- aim to ensure that individuals are fairly rewarded for their individual contribution to the CCG, having proper regard to the CCG's circumstances, performance reports to support any performance related reward and to the provisions of any national arrangements for such members of staff where appropriate;
- monitor and evaluate the performance in relation to the targets and competences set out for each role in the job descriptions of the Chief Officer, Chief Finance Officer and any other executive / joint executive roles not on agenda for change
- determine the contractual arrangements for such staff including the annual salary awards, proper calculation and scrutiny of termination payments taking account of such national guidance as is appropriate.
- The Committee will have full authority to commission any reports or surveys it deems necessary to help it fulfil its obligations
- Any significant changes to the establishment of the CCG which may affect individuals employment status

## 3. Part One - Objectives of the Committee

The Committee will conduct its business in accordance with national guidance and the Nolan principles of public life. The committee will review its own performance, membership and terms of reference.

Any resulting changes to the terms of reference should be approved by the Governing Body.

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#### 4. Part One - Membership

The Committee shall operate as a sub - committee of the Governing Body .The membership shall comprise:

ROLE	RESPONSIBILITY	VOTING/NON-VOTING
Lay Member for Governance	Chair	Voting
Lay Member for Integrated Risk		Voting
Lay Member for Patient and Public Engagement		Voting
Clinical Board Member		Voting
Director of Operations / Exec Nurse		Non-Voting

Only members of the Committee have the right to attend committee meetings and vote. However, other individuals such as the Accountable Chief Officer (AO), CCG Clinical Chair, Chief Finance Officer, HR representative and external advisers may be invited to attend for all or part of any meeting as and when appropriate.

There must be a Lay Member voting majority.

In the absence of the Chair, s/he shall delegate this responsibility to another Lay member.

Each officer will withdraw or not be in attendance for discussions about their own remuneration and terms of service

The Committee may co-opt or seek advice from other representatives/expertise as appropriate and deemed necessary.

#### 5. Part One - Quoracy

For each meeting to be deemed quorate attendance must include a minimum of three voting members of the Committee.

#### PART 2

#### 6. Part Two - Purpose of the Committee

Under delegated authority from the Governing Body, the Committee will:

- Make recommendations on appropriate remuneration and terms of service for the:
  - Clinical Chair
    - (ii) all aspects of salary
  - arrangements for termination of employment and other contractual terms including redundancy (if applicable), annual leave and contracted hours
  - Clinical Locality Governing Body Members and Clinical Leads
    - (ii) all aspects of salary
    - (iii) arrangements for termination of employment and other contractual terms
- aim to ensure that individuals are fairly rewarded for their individual contribution to the CCG, having proper regard to the CCG's circumstances, performance reports to support any

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performance related reward and to the provisions of any national arrangements for such members of staff where appropriate;

- monitor and evaluate the performance in relation to the targets and competences set out for each role in the job descriptions of the Chair, Clinical Locality Governing Body Members and Clinical Leads
- determine the contractual arrangements for such staff including the annual salary awards, proper calculation and scrutiny of termination payments taking account of such national guidance as is appropriate.
- The Committee will have full authority to commission any reports or surveys it deems necessary to help it fulfil its obligations
- Any significant changes to the establishment of the CCG which may affect individuals employment status

## 7. Part Two - Objectives of the Committee

The Committee will conduct its business in accordance with national guidance and the Nolan principles of public life. The committee will review its own performance, membership and terms of reference.

Any resulting changes to the terms of reference should be approved by the Governing Body.

## 8. Part Two - Membership

The Committee shall operate as a sub - committee of the Governing Body. The membership shall comprise:

ROLE	RESPONSIBILITY	VOTING/NON-VOTING
Lay Member for Governance	Chair	Voting
Lay Member for Integrated Risk		Voting
Lay Member for Patient and Public Engagement		Voting
Director of Operations / Exec Nurse		Non-Voting

Only members of the Committee have the right to attend committee meetings and vote. However, other individuals such as the Accountable Chief Officer (AO), CCG Clinical Chair, Chief Finance Officer, HR Representative and external advisers may be invited to attend for all or part of any meeting as and when appropriate.

In the absence of the Chair, s/he shall delegate this responsibility to another Lay member.

Each person will withdraw or not be in attendance for discussions about their own remuneration and terms of service.

The Committee may co-opt or seek advice from other representatives/expertise as appropriate and deemed necessary.

Deputies must be fully briefed and hold the represented members full delegated authority.

## 9. Part Two - Quoracy

For each meeting to be deemed quorate attendance must include a minimum of two voting members of the Committee.

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## The following apply equally to both the Part One and Part Two Meetings

### 10. Frequency of Meetings

The frequency of meetings will be determined by the Committee in order to carry out its functions. It is envisaged that the Committee will meet no less than twice a year. When the meetings are held the Secretary or nominated officer shall call a meeting of the committee by issuing notice.

Notice of any meeting must indicate:

- The proposed date and time, which must be at least 7 days after the date of the notice, except where a meeting to discuss an urgent issue is required (in which case as much notice as reasonably practicable in the circumstances should be given);
- Where it is to take place;
- There may be a requirement for additional meetings to be called by the Chair of the Committee.

### 11. Conflicts of Interest

An up to date register of members' interest will be retained and published in line with HMR CCG Conflicts of Interest Policy.

Members will be expected to declare any conflicts of interest at all meetings and the Chair will determine how any conflict will be managed in line with CCG guidelines.

### 12. Accountability

The Committee operates under delegated authority from the Governing Body.

Updates on decisions will be provided to the Governing Body under Part 2 on determinations about pay and remuneration for employees of the Clinical Commissioning Group, as described in principle duties.

The Committee has no authority in relation to the remuneration and terms of service of those officers of the CCG employed under Agenda for Change Terms and Conditions, and non-officer members of the CCG.

Any Chairs action taken between meetings must be ratified at the next meeting of the Committee.

The Committee will complete an annual self-assessment of effectiveness, which will inform the CCG's Annual Governance Statement.

### 13. Scheme of Delegation

The Committee will carry out the duties as detailed in these terms of reference in accordance with the scheme of delegation as set out in the NHS Heywood, Middleton and Rochdale CCG Constitution.

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## 14. Corporate Sustainability

As a healthcare commissioner, the CCG is committed to planning and buying health care on a sustainable basis, this committee will support the commitments of the HMR CCG Sustainable Development Management Strategy and Delivery Plan, wherever possible in;

1. Commissioning for Sustainability and Adaptation
2. Being a Sustainable Organisation
3. Promoting sustainability with member practices
4. Delivering our commitments and Assessing our Performance

Commissioning for sustainable development in the health and care system means;

- Planning services which are efficient, effective and safe
- Burying services which provide highest quality at best value, are safe and which have least impact on the environment
- Avoiding duplication, inefficiency and waste
- Focus on preventative, proactive care
- Patients public engagement and involvement in planning and design of services
- Building resilience, and protecting and developing community assets and strengths
- Making the best use of all of the resources we have
- Minimising carbon emissions

## 15. Review Date

These Terms of Reference will be reviewed annually.

## 16. Secretarial Support

Secretarial support will be provided to support the Chair in the management of the committee's business and the collation and distribution of papers.

The agenda and papers for meetings shall be distributed five working days prior to the meeting.

Secretarial support will be appointed by the CCG.

## 17. Conduct of Committee

The committee will review annually the terms of reference and membership and the chair will also produce an annual report of business areas.

Items for the agenda and all relevant supporting papers should be submitted to the Committee Admin lead for approval by the Committee Chair a minimum of 10 working days prior to the meeting.

As a minimum all members will be expected to attend 70% of meetings within the financial year.

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