Clinical Commissioning Groups

In Autumn 2011, information was issued by the Department of Health (DH) to stimulate interest in current commissioners (e.g. Primary Care Trusts (PCT’s)) becoming clinical commissioning groups (CCGs) in the newly reformed health care system. In order for CCGs to become a legal entity (i.e. established as a statutory body) able to take on responsibility for health care budgets for their local community from April 2013, they needed to go through a robust development and authorisation process. This process was developed with a continuous improvement approach and included:

- Initial development phase
- Application
- Authorisation process
- Annual assessment (after authorisation)

Each proposed CCG was allocated a place in one of four waves for their authorisation applications. Only the NHS Commissioning Board (NHSCB) - renamed NHS England (NHSE) in 2013 – could legally make a decision on authorisation. NHS East Riding of Yorkshire CCG was successfully authorised in Wave 1.

CCG Constitution

All GP practices are required by law to be a member of a CCG (GMS contract regulations in 2013). “Every CCG is required by law to have a constitution. The constitution is a legal document that should outline the governance structures and responsibilities of the CCG.” (BMA 2015).

A CCG’s constitution details how it will “discharge its functions, elect sub committees and make decisions” (BMA 2015). It also outlines its compliance with its statutory duty to “secure that there is effective participation by each member of the clinical commissioning group in the exercise of the group's functions” (Health and Social Care Act 2012, Schedule 2, paragraph 6). As part of the authorisation process, NHS England approved the CCG’s constitution. Your CCG’s constitution is the ‘go to’ document for definitive answers relating to your CCG’s governance arrangements. The constitution contains (but is not limited to) the flowing principles:

- Effective corporate governance
- Effective decision-making
- Effective dispute resolution
- Effective powers of delegation
- Process for making amendments to the CCG constitution (though not all governance changes will require amendments to a CCG’s constitution)

Governing Body Membership

“CCGs are at liberty to use whatever naming convention they may choose to describe their leaders and senior employees” (NHSE 2012 p10) but will include the following:

- Clinical Leader – this can also be the Chair or Accountable Officer
- Chair of the governing body – can also be the Clinical Leader
- Chief Officer - accountable officer
- Chief Finance Officer
- GP or other healthcare professionals acting on behalf of member practices
- Lay members - minimum 2
Clinical members - a secondary care doctor and a registered nurse
CCG member practices decide, together, how they will be represented on the governing body and this must be specified in the constitution.

At NHS East Riding of Yorkshire CCG, we have 2 statutory Lay Members on the Governing Body – Audit/Finance/Governance and Patient and Public Involvement. We also have an additional Lay Member for Quality who is also our Deputy Chair and can take over if a conflict of interest is identified for the Clinical Chair or they are otherwise unable to act. We also have representation from the Health and Wellbeing Board (a GP) and from the Local Authority (the Public Health Lead and Adult Social Care lead). Our executive quality lead is also our registered lead nurse. Our GP community is represented by 6 GPs, elected by the GP membership (Council of Members), one from each of our 5 commissioning localities in our patch each with a single vote (total 5 votes) (NB: 2 GPs serve one locality but with a ½ vote each).

NHS ERYCCG Council of Members

The Council of Members (CoM) is comprised of the GP practice representatives and exercises all those functions of the CCG that have not been delegated to the Governing Body under the Constitution. The CoM meets 6 times a year. The Chair of the Governing Body chairs the CoM meetings and an Annual General Meeting (AGM) is held once a year in public. Member voting is weighted in accordance with the number of registered patients per practice equating to 1 vote per 1,000 registered patients.

Self Check

- Are you familiar with your CCG’s Constitution? Do you know where to find it? Do you know who to raise any queries about the constitution with?
- Do you understand your role and responsibilities, and those of the CCG, as detailed in the constitution? Do you know who to ask for clarification?
- Where does your annual assessment get reported? Do you understand its significance?
- How does your CCG ensure there is effective participation by each member of the CCG?
- Do you know the period of office for each Governing Body member, including the Chair, and the processes of appointment/election?

Useful Resources


Further Information

For further information about this fact sheet, please contact the Head of Corporate Governance and Organisational Development ERYCCG.ContactUs@nhs.net, 01482 675705.

*Re-use of this information is permitted but should include an acknowledgement of the source of the information.*