



**Commissioning Board**  
*A special health authority*

# Clinical Commissioning Groups

## HR Frequently Asked Questions (FAQs)

*Additional questions June 2012*



## **Clinical Commissioning Groups HR Frequently Asked Questions (FAQs) Additional questions June 2012**

### **1. The CCG HR Guide highlighted additional remuneration guidance would be issued in May 2012. When will it be issued and what will it cover?**

The guidance is attached and is intended for the use of Clinical Commissioning Groups (CCGs), to support the employment of senior managers, who undertake the roles of Chief Officer (*where the senior manager also undertakes the Accountable Officer role*) and Chief Finance Officer, following the CCG becoming a statutory body and the employing body (i.e. from 01 April 2013).

The guidance is intended to provide clarity in the following areas:

- Governance issues, including the duties and responsibilities of CCG Remuneration Committees as public bodies;
- The setting of appropriate rates of pay for Senior Managers who undertake the roles of Chief Officer\* and Chief Finance Officer.

### **2. Why can't CCGs implement these arrangements immediately?**

The terms and conditions of the Chief Officer\* and Chief Finance Officer will be set by CCG remuneration committees as outlined in the Health and Social Care Act and will come into effect from April 2013.

There is, however, a transition period where it is critical that the balance is achieved between the governance of the PCT Cluster and the support to the CCGs to enact their determinations and freedoms as outlined in the Health and Social Care Act. Establishing the right balance will ensure:

- CCGs are able to appoint the candidates who best meet their needs
- CCGs have time to develop and consult upon the policies, terms and conditions which they may wish to implement from 1 April 2013
- Senior staff are well supported

*\* The guidance uses the term 'Chief Officer'. This is defined as the Chief Officer of the CCG where this manager also undertakes the role of accountable officer. The specific term is used to describe the senior manager in a CCG when this individual also takes on the role of accountable officer. The term Chief Clinical Officer is used when the role of accountable officer is undertaken by the CCG lead clinician.*

- Appropriate governance arrangements are applied in line with the current statutory position.

### **3. These appointments will be made before 01 April 2013, what happens during this interim period (i.e. between now and 31 March 2013)?**

The PCT will be the employing authority until 1<sup>st</sup> April 2013. However, prior to 1 April 2013, specific arrangements will need to be in place for two specific phases:

1. The first phase, prior to establishment of the CCG as a statutory body when the CCG will not be in a position to finalise issues such as policies, procedures and terms & conditions and all actions will be as a sub-committee of the PCT.
2. The second phase, following establishment of the CCG as a statutory body which occurs at authorisation, up until 31 March 2013. During this period the CCG will be a statutory body but it has been agreed will not process finances through its own accounts.

These two phases should be supported by the PCT as follows:

#### ***Phase prior to establishment***

Until the point of establishment as a statutory body, a CCG can only identify those individuals designated to be Chief Officer\* and Chief Finance Officer and the salaries, terms & conditions it expects to pay at the point at which it becomes a statutory body. Identifying these individuals will be a matter for the CCG.

During this period, designate Chief Officer\* and Chief Finance Officer should be 'assigned' to the CCG by their current employing organisation on their current terms and conditions. It will be a matter for the host organisation in conjunction with the CCG to identify whether any additional duties payment will be appropriate for this period based on the terms & conditions of the employing organisation.

Any changes made by the PCT to the salaries of designate Chief Officer\* and Chief Finance Officer during this period will be subject to the general principles governing remuneration of staff employed by PCTs (i.e. Very Senior Managers Pay Framework, or where appropriate Agenda for Change). Salary increases in line with the VSM Pay Framework, will require specific justification and approval by the PCT remuneration committee and Board, and by the SHA (and where appropriate HM Treasury).

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### ***Phase post establishment (but prior to 1<sup>st</sup> April 2013)***

Once the CCG becomes a statutory body it will have the ability to ratify its own terms & conditions, and ratify salaries with the individuals appointed to these posts. The CCG becomes a statutory body on establishment following authorisation.

However, prior to April 2013 and even after the CCG is established, it will not process finances through its own accounts, and therefore cannot undertake the full employing authority role.

During this time, the appointed Chief Officer's\* and Chief Finance Officer's employment will remain with their current employer (or host PCT if necessary and different). From this point, the CCG should be preparing to implement its agreed terms and conditions from 1 April 2013.

The Chief Officer\* and Chief Finance Officer will be managed and overseen by the CCG, with the PCT acting as a passive host providing 'pay and rations' functions. The individuals will operate under CCG policies and procedures. Until the Chief Officer\* and Chief Finance Officer can be formally employed by the CCG, their employment by the host PCT will be subject to the usual governance principles applying to VSM appointments (or where appropriate Agenda for Change) by PCTs.

The individual will transfer to the CCG on 1<sup>st</sup> April 2013 in line with the requirements of the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) and/or the Cabinet Office Staff Transfers in the Public Sector Statement of Practice (COSOP) guidance.

#### **4. Many CCGs wish to appoint clinical leaders in to these roles, does this guidance cover these appointments?**

CCGs may choose to run and manage their organisation in a manner which best suits their local needs and circumstances. All CCGs will have a lead clinician and lead manager. Some will choose to discharge the accountable officer role through the lead clinician, the Chief Clinical Officer. Others will ask the lead manager to take on the role of accountable officer – the Chief Officer.

The remuneration guidance is intended for *Chief Officers (where the senior manager also undertakes the accountable officer role)* for the CCG. It is not intended as the basis of remuneration for accountable officers where being a clinician has been deemed an essential requirement. Guidance on the reimbursement of clinicians undertaking these

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roles is included in the document *Clinical commissioning groups governing body members: Roles outlines attributes and skills* as well as this set of FAQs.

## **5. Please clarify the options for terms of employment or engagement for GPs undertaking these roles.**

The guidance "*Clinical commissioning groups governing body members: Roles outlines attributes and skills*" set out a range of options that a CCG might consider. It is important to establish the correct employment status for a worker from the outset otherwise wrongly identifying a worker as self-employed when they in fact should have been treated as employed can leave the engager (e.g. the CCG) facing large tax and NI liabilities. Therefore, the employment status of all CCG posts should be considered to determine the correct contractual status under current legislation. Determination of the contractual status must be in accordance with HMRC rules and should, if necessary be tested with their local office.

A briefing paper for General Practitioners undertaking these roles and the full range of tax, NIC and superannuation implications is being worked on in partnership with a senior primary care accountancy firm and will be available shortly on the NHS Commissioning Board Authority's website.

## **6. Is a CCG obliged to appoint somebody with previous Board experience as their Chief Officer?**

Being the most senior manager in a CCG is a very senior role which will require considerable experience irrespective of whether the individual undertakes the role of accountable officer or not. These roles and the role of Chief Finance Officer are vital roles for the CCG in terms of ensuring that the CCG operates efficiently and effectively in all aspects of its corporate and statutory duties as an NHS body.

The NHS Commissioning Board would expect that individuals appointed to these roles whose background is working in NHS statutory bodies will have operated at Board level and that those with different backgrounds can demonstrate a full understanding and the relevant experience key to discharging those duties. CCGs need to set out the essential criteria in the job description and person specification. The NHSCB will need to consider at authorisation, the risks which would face the CCG if it were not to have access to the skills, knowledge and experience of individuals with experience of working at Board or equivalent level.

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*Any further questions should be directed through the relevant PCT/SHA HR lead.  
Further questions can also be sent to [ccgdevelopment@nhs.net](mailto:ccgdevelopment@nhs.net).*

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