

Appendix D
NHS North Central London
Integrated Care Board
Individual Funding Request Panel
Terms of Reference

1. Introduction

- 1.1 The Individual Funding Requests Panel ('Panel') is established in accordance with the Constitution of NHS North Central London Integrated Care Board ('ICB'). It is a sub-committee of the Strategy and Development Committee.
- 1.2 These Terms of Reference set out the membership, remit, responsibilities and reporting arrangements of the Panel.

2. Purpose

- 2.1 The purpose of the Panel is to consider and make decisions on Individual Funding Requests ('IFR') applications.

3. Role

- 3.1 The Panel will:
 - a) Make decisions on individual funding requests applications;
 - b) Properly consider and follow the ICB's IFR Policy when determining the outcome of individual funding requests applications;
 - c) Remit decisions for individual funding requests over the panel's financial authority limits to the appropriate decision makers;
 - d) Act within its delegated authorities from the Board of Members;
 - e) Have due regard to any relevant quality and safety issues which may arise as agreed by panel members.

4. Financial Authority Limits

- 4.1 The Panel has the authority to approve IFR requests up to a maximum value of £50,000 (fifty thousand pounds) per year per case. The Panel may not approve IFR applications that exceed this limit.
- 4.2 The Panel may consider IFR applications which have a greater financial value than the delegated financial authority limits set out in section 4.1 above but does not have the power to approve them. The Panel's decision making powers are set out in section 6 below.

5. Duty as to Affordability and to Meet Financial Control Total

- 5.1 The Panel has a duty to ensure the IFRs it approves are affordable and will not cause the ICB to breach its financial control total.

6. Decisions

- 6.1 The Panel may make the following decisions on IFRs that are within their delegated financial authority limits:

- a) To reject the application;
- b) To reject the application due to insufficient information;
- c) To defer decision on the application pending further information;
- d) To approve the application without conditions;
- e) To approve the application with conditions.

6.2 The Panel may make the following decisions on IFRs that are in excess of their delegated financial authority limits:

- a) To reject the application;
- b) To reject the application due to insufficient information;
- c) To defer decision on the application pending further information;
- d) To recommend the application for approval without conditions;
- e) To recommend the application for approval with conditions.

6.3 If IFR is outside of the Panel's delegated financial authority limits the decision on whether to approve or reject an application shall be made by the Strategy and Development Committee.

7. Membership

7.1 The Panel shall comprise of the following voting members:

- a) An Independent Member;
- b) Three clinicians;
- c) Commissioning representative;
- d) Medicines Management Representative.

7.2 The roles referred to in the list of voting members above describe the substantive roles and any equivalent successor roles and not the individual title or titles.

7.3 In accordance with the ICB's Constitution all voting members of the Panel must be approved by the ICB's Chair.

7.4 The list of voting members is set out in Schedule 1. Schedule 1 does not form part of the Terms of Reference and may be amended without the need to formally amend these Terms of Reference.

7.5 Voting members may nominate deputies to represent them in their absence.

8. Participants and Observers

8.1 The following people shall attend Panel meetings as standing participants:

- a) An IFR Specialist.

8.2 Participants at Panel meetings are non-voting.

8.3 The roles referred to in the list of standing participants above describe the substantive roles and any equivalent successor roles and not the individual title or titles.

8.4 The list of standing participants is contained in Schedule 1. Schedule 1 does not form part of the Terms of Reference and may be amended without the need to formally amend these Terms of Reference.

8.5 Standing participants may nominate deputies to represent them in their absence.

- 8.6 The Panel may invite or allow additional people to attend meetings as participants. Participants may present at meetings and contribute to the relevant discussions but are not allowed to participate in any formal vote.
- 8.7 The Panel may invite or allow people to attend meetings as observers. Observers may not present at meetings, contribute to any discussion or participate in any formal vote.
- 8.8 The Panel may call additional experts to attend meetings on a case by case basis to inform discussion.

9. Chair

- 9.1 The Panel Chair shall be the Independent Member or a clinician. The Chair may nominate a deputy to represent them in their absence.

10. Voting

- 10.1 The ICB has agreed to use a collective model of decision making that seeks to find consensus between system partners and make decisions based on unanimity as the norm. This includes working through difficult issues where appropriate. If it is not possible to achieve unanimity a vote will be required. Voting shall be as per clause 7.2 below.
- 10.2 Each voting member of the Panel shall have one vote with resolutions passing by simple majority. In the event of a tied vote the Panel Chair shall have the casting vote.

11. Quorum

- 11.1 The Panel will be considered quorate when at least three voting members are present which must include:
 - a) Chair;
 - b) A clinician or where the Chair is a clinician an Independent Member;
 - c) An officer.
- 11.2 Notwithstanding section 8.1 above, for drugs cases the Medicines Management Representative must be present
- 11.3 If any representative is conflicted on a particular item of business they will not count towards the quorum for that item of business. If this renders a meeting or part of a meeting inquorate a non-conflicted person may be temporarily appointed or co-opted onto the Panel to satisfy the quorum requirements.
- 11.4 If a meeting is not quorate the Panel Chair may adjourn the meeting to permit the appointment or co-option of additional members if necessary.

12. Secretariat

- 12.1 The Secretariat to the Panel shall be provided by the IFR Coordinator.

13. Frequency of Panel Meetings

- 13.1 Panel meetings will be scheduled as needed to ensure timely decision making. The Panel Chair may call additional meetings or cancel meetings as necessary.

14. Notice of Meetings

14.1 Notice of a Panel meeting shall be sent to all Panel members no less than 5 working days in advance of the meeting.

14.2 The meeting shall contain the date, time and location of the meeting.

15. Agendas and Circulation of Papers

15.1 Before each Panel meeting an agenda setting out the business of the meeting will be sent to every Panel member no less than 5 working days in advance of the meeting.

15.2 Before each Panel meeting the papers of the meeting will be sent to every Panel member no less than 5 working days in advance of the meeting.

15.3 If a Panel member wishes to include an item on the agenda they must notify the Panel Chair via the Secretariat no later than 5 working days prior to the meeting. The decision as to whether to include the agenda item is at the absolute discretion of the Panel Chair.

16. Minutes of Meetings

16.1 The minutes of the proceedings of a meeting shall be prepared by the Secretariat and submitted for agreement within 5 working days of the meeting.

17. Authority

17.1 The Panel is accountable to the Strategy and Development Committee and will operate as one of its sub-committees. The Panel must act within the remit of these terms of reference and has no executive powers other than those specifically set out in these terms of reference.

17.2 The Panel is authorised by the Board of Members to obtain at the ICB's expense outside legal or other professional advice on any matters within the Panel's Terms of Reference.

18. Reporting Responsibilities

18.1 The Panel will report to the Strategy and Development Committee on all matters within its duties and responsibilities.

18.2 The Panel may make recommendations to the Board of Members, Strategy and Development Committee and/or any other committee it considers appropriate on any area within its remit.

19. Delegated Authority

19.1 The Panel may agree to delegate its authority to a Panel member or members to make decisions on the Panel's behalf outside of a Panel meeting at its absolute discretion on a case by case basis.

20. Virtual Meetings and Decision Making

20.1 Panel meetings may be held in person or virtually.

20.2 There are circumstances where time-critical decisions need to be made and it is not possible and/or reasonably practicable and/or a good use of resources to hold a physical meeting (either in person or virtually) in sufficient time. In these circumstances decisions may be made virtually using the protocol for virtual decision making.

21. Sub-Committees

21.1 The Panel may not appoint sub-committees. The Panel may not delegate any of its functions, powers or decision making authority to a sub-committee.

22. Conflicts of Interest

22.1 Conflicts of Interest shall be dealt with in accordance with the Conflicts of Interest Policy and NHS England statutory guidance for managing conflicts of interest.

22.2 The Panel shall have a Conflicts of Interest Register that will be presented as a standing item on the Panel's agenda. In addition, an opportunity to declare any new or relevant declarations of interest will be listed as a standing item on the Panel's agenda

23. Gifts and Hospitality

23.1 Gifts and Hospitality shall be dealt with in accordance with the Conflicts of Interest Policy, and NHS England statutory guidance for managing conflicts of interest.

23.2 The Panel shall have a Gifts and Hospitality Register and Panel members will have an opportunity to declare any new or relevant declarations of relevant gifts and hospitality as a standing item on the Panel's agenda

24. Standards of Business Conduct

24.1 Panel members and any attendees or observers must maintain the highest standards of personal conduct and in this regard must comply with:

- a) The law of England and Wales;
- b) The NHS Constitution;
- c) The Nolan Principles;
- d) The standards of behaviour set out in the ICB's Constitution;
- e) The Standards of Business Conduct Policy;
- f) The Conflicts of Interest Policy;
- g) The Counter Fraud, Bribery and Corruption Policy;
- h) Any additional regulations or codes of practice relevant to the Panel.

24.2 The Panel will have access to sufficient resources to carry out its duties and Panel members will be provided with appropriate and timely training.

25. Review of Terms of Reference

25.1 These Terms of Reference will be reviewed from time to time, reflecting the experience of the Panel in fulfilling its functions and the wider experience of the ICB.

25.2 These Terms of Reference will be formally reviewed every two years. These Terms of Reference may be varied or amended by the Board of Members.

Date Approved by Board of Members:

Date of Next Review:

**Schedule 1
List of Members**

The voting members of the Panel are:

Position	Name
Independent Member	Ian Bretman
Clinician	Dr Peter Christian
Clinician	Dr Chitra Sankaran
Clinician	Claire Johnston
Commissioning Representative	Penny Mitchell
Medicines Management Representative	Paul Gouldstone

Panel Chair:

Position	Name
Clinician	Dr Peter Christian

The standing participants are:

Position	Name
IFR Specialist	Head of IFR
IFR secretariat	Sarah Williams, IFR Coordinator