

GP Members Council

Terms of Reference

The GP Members Council is a Committee of the CCG and is established in accordance with NHS St Helens Clinical Commissioning Group's (the CCG) Constitution. It represents all of the member practices of the group and its role is to act as a clinical leadership advisory group to the CCG's Governing Body.

The Council has powers of approval in accordance with the Scheme of Reservation and Delegation.

The Terms of Reference set out the membership, remit, responsibilities and reporting arrangements of the Council.

1 Membership

- CCG Governing Body GP (Chair)
- GP Governing Body Member (Vice-Chair)
- All Practice Clinical Leads (1 representative per practice)*
- Accountable Officer (Clinical Chief Executive)
- CCG Chief Finance Officer (or Deputy)
- Chief Nurse

In attendance

- Director Commissioning & Performance
- Consultant in Public Health
- Lead Pharmacist
- CCG Clinical Leads
- Governing Body Lay Member
- Associate Director, Corporate Governance

Other relevant officers may be invited to attend as appropriate

*** Practice Clinical Lead Member**

Each practice is required to nominate and appoint internally a clinician as a CCG Practice Lead who will act on behalf of the practice as a member of this Committee, and to identify a nominated deputy.

The role of the practice representative is to:

- a) Act on behalf of the practice as a member of key decision making processes
- b) Ensure that the practice is actively engaged with and involved in the work of the CCG
- c) Ensure that all practice staff are fully informed and engaged via internal systems
- d) Ensure representation at meetings to enable engagement and involvement in decision making for the practice in the membership. Monitoring of attendance will be required for governance purposes.

- e) Work to ensure all commissioning and governance requirements are met and support the CCG in discharging its duties effectively.

2. Quorum

The Chair or Vice-Chair plus 55% (currently 18) clinicians must be present.

3. Remit and Responsibilities

The duties of the Committee will be driven by the priorities of the Clinical Commissioning Group, as identified by the CCG.

The remit of the Committee is to provide **clinical leadership** to:

- ensure member practices are supporting the setting of the commissioning agenda for the organisation and supporting the setting of operational delivery within a robust governance framework
- ensure the two way communication with, and involvement of member practices
- agree key areas of clinical focus for the organisation, reviewing service improvements and development and advising the Governing Body on options

3.1 Service Improvement Plan

The Committee shall approve the Operational Plans. To fulfil this requirement the Committee will:

- Recommend options and plans for delivery (outside of the scheme of reservation & delegation) to the Governing Body
- Contribute to the delivery of the Improvement Plan, and if necessary identifying and escalating to the Governing Body any substantial and immediate risk to the CCG.
- Review from a commissioning, quality, reputational or finance perspective with a view to making appropriate decisions to ensure the safety of the local population and the organisation.
- Monitor the impact of changes measuring whether success is achieved, taking appropriate steps where necessary to make changes

Clinical leads will present to the Committee updates on delivery of objectives for their specific areas and any risks to the delivery of these objectives

3.2 Pathway Development

The Committee will support and enable pathway development locally and regionally through Committee members working with clinical networks and appropriate forums, for example, the Alliance LDS as part of the Cheshire & Mersey STP footprint, or St Helens Cares, the local care management system in the borough.

In particular the Committee will:

- Review pathways and approve their adoption. The Quality & Performance Committee will engage with the Committee in delivering improvements to the quality and safety of care.
- Be mindful of all NICE and other guidance and review the implementation and impact of this guidance as appropriate.

3.3 **Governance Framework**

The Committee has specific responsibility for:

- Approving the CCG constitution and proposed changes to the constitution including the powers reserved to the membership and those delegated to Committees, governing body, members, employees, or other persons specified in the constitution
- Standing orders, scheme of reservation and delegation as set out in the Constitution.
- The composition of its governing body
- Electing GPs to represent member practices on the governing body of the group, including process for election
- Informing strategic direction, for example major service reconfiguration, investment/disinvestment decisions that are approved by Governing Body

4. **Governance Decisions put to the membership**

The aim of the Council is to achieve consensus decision making wherever possible. However voting will be used in the following circumstances:

- a) *Confirming the appointment of GP governing body members*; one vote per GP who works as a GP Principal in St Helens and/or is on the performers list and carries out majority of general practice sessions within St Helens as validated by the LMC.

- b) *Major decisions as indicated in the Constitution by practice vote*. Where a practice vote is required, no business shall be transacted at the meeting of the Member's Council unless 55% of the voting practice member representatives are present, i.e. 18 out of 34 practices to be represented. In the event that a conflict of interest prevents 55% of the practice member representatives voting, the views of the members would be taken into consideration but the decision sent to an appropriate Committee for approval.

5. **Administration**

The GP Members' Council will be supported by an appropriate Secretary who will be responsible for supporting the Chair in the management of the committee's business.

6. Frequency and notice of meetings

The Committee shall meet 6 times per year.

Members shall be notified at least 14 days in advance that a meeting is due to take place. Agendas and reports shall be distributed to members 10 working days in advance of the meeting date.

7. Reporting

The GP Members Council will submit a Key Issues Report to the Governing Body and ratified minutes will be made available to the Governing Body. The Council will also prepare advisory reports at the request of Governing Body.

8. Conduct

All members are required to make open and honest declarations of the interest at the commencement of each meeting or to notify the Committee Chair of any actual, potential or perceived conflict in advance of the meeting.

All members are required to uphold the Nolan Principles and all other relevant NHS Code of Conduct requirements.

9. Date

These Terms of Reference were approved by the GP Members Council and ratified by NHS St Helens CCG Governing Body on 13th September 2017.