

## NHS Lincolnshire Integrated Care Board - Public Primary Care Commissioning Committee

**Date: Wednesday 20<sup>th</sup> December 2023**

**Time: 11.40 am – 12.30 pm**

**Location: MS Teams**

### AGENDA

| ITEM NUMBER                             | ACTION   | ENC/<br>VERBAL | LEAD         |                   |
|---|--|----------------|--------------|-------------------|
| <b>STANDING ITEMS</b>                   |  |                |              |                   |
| 1.                                      | Welcome, Introduction and Apologies for Absence: Sandra Williamson, Sarah Starbuck   | -              | Verbal       | Dr Gerry McSorley |
| 2.                                      | Declarations of Pecuniary and Non-Pecuniary Interests and Conflict of Interests  | -              | Verbal       | Dr Gerry McSorley |
| 3.                                      | To approve the minutes of the last Public Primary Care Commissioning Committee meeting dated 18 <sup>th</sup> October 2023 | Approve        | Enc          | Dr Gerry McSorley |
| 4.                                      | To consider matters arising not on the agenda.   | -              | Verbal       | Dr Gerry McSorley |
| <b>GENERAL ISSUES/PROGRESS UPDATE</b>   |  |                |              |                   |
| 5.                                      | To receive an update from the Director of Primary Care, Community and Social Value   | Receive        | Enc          | Sarah-Jane Mills  |
| <b>STRATEGIC ISSUES</b>                 |  |                |              |                   |
| 6.                                      | None noted   |                |              |                   |
| <b>SERVICE DELIVERY AND PERFORMANCE</b> |  |                |              |                   |
| 7.                                      | To receive a presentation in relation to the Primary Care Access Recovery Plan   | Receive        | Presentation | Nick Blake        |
| 8.                                      | To receive an update in relation to the Delegation of the Pharmacy, Optometry and Dental Services                          | Receive        | Verbal       | Nick Blake        |
| <b>QUALITY</b>                          |  |                |              |                   |
| 9.                                      | To receive a presentation in relation to Quality, Patient Safety, Experience and Effectiveness                             | Receive        | Presentation | Wendy Martin      |

| <b>FINANCE</b>  |   |         |        |                   |
|---|---|---------|--------|-------------------|
| 10.   | None noted  |         |        |                   |
| <b>GOVERNANCE AND ASSURANCE</b>                       |   |         |        |                   |
| 11.   | To receive the Risk Register  | Approve | Enc    | Nick Blake        |
| <b>MINUTES FROM COMMITTEES AND ESCALATION REPORTS</b> |   |         |        |                   |
| 12.   | None noted  |         |        |                   |
| <b>INFORMATION</b>                                    |   |         |        |                   |
| 13.   | Any New Risks   | Note    | Verbal | Dr Gerry McSorley |
| 14.   | Items of Escalation to the ICB Board  | Note    | Verbal | Dr Gerry McSorley |
| <b>INFORMATION</b>                                    |   |         |        |                   |
| 15.   | The next meeting of the Public Primary Care Commissioning Committee will take place on Wednesday 20 <sup>th</sup> December 2023 at 11.40 am | Note    | Verbal | Dr Gerry McSorley |

**Please send apologies to: Sarah Bates, ICB Deputy Board Secretary via email at: [s.bates@nhs.net](mailto:s.bates@nhs.net)**

The quorum of the Committee is a minimum of four voting members. This must include the Chair or Vice Chair.

#### **Membership**

| <b>Name</b>                           | <b>Position</b>  |
|---------------------------------------|--|
| Dr Gerry McSorley                     | Non-Executive Member (Chair)                               |
| Julie Pomeroy                         | Non-Executive Member                                       |
| Anita Day                             | Non-Executive Member                                       |
| Martin Fahy/Nominated Deputy          | Director of Nursing and Quality                            |
| Sarah-Jane Mills                      | Director of Primary Care, Community and Social Value       |
| Sandra Williamson                     | Director of Health Inequalities and Regional Collaboration |
| Emma Rhodes                           | Assistant Director of Finance                              |
| Anna Nicholls/Bal Dhami /Gary Lucking | NHSE/I   |
| Councillor Sue Woolley                | Health and Wellbeing Board Representative                  |
| Dean Odell                            | HealthWatch  |
| Dr Reid Baker/Kate Pilton             | LMC  |
| Wendy Martin                          | Associate Director of Nursing                              |
| Dr John Parkin                        | Clinical Leader  |

#### **\*Definition of a Conflict of Interest**

Conflicts of interest can arise in many situations, environments and forms of commissioning, with an increased risk in primary care commissioning, out of hours commissioning and involvement with integrated care organisations, as clinical commissioners may here find themselves in a position of being at once commissioner and provider of primary medical services. Conflicts of interest can arise throughout the whole commissioning cycle from needs assessment, to procurement exercises, to contract monitoring.

Interests can be captured in four different categories:

**Financial interests:**

This is where an individual may get direct financial benefits from the consequences of a commissioning decision. This could include being:

- A director, including a non-executive director, or senior employee in a private company or public limited company, partnership or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations;
- A shareholder (of more than [5%] of the issued shares), partner or owner of a private or not for profit company, business or consultancy which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations.
- A consultant for a provider;
- In secondary employment (see paragraph 52-53)
- In receipt of a grant from a provider;
- In receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role; and
- Having a pension that is funded by a provider (where the value of this might be affected by the success or failure of the provider).

**Non-financial professional interests:**

This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career. This may include situations where the individual is:

- An advocate for a particular group of patients;
- A GP with special interests e.g., in dermatology, acupuncture etc.
- A member of a particular specialist professional body (although routine GP membership of the RCGP, British Medical Association (BMA) or a medical defence organisation would not usually by itself amount to an interest which needed to be declared);
- An advisor for the Care Quality Commission (CQC) or the National Institute for Health and Care Excellence (NICE);
- A medical researcher.
- GPs and practice managers sitting on the governing body or committees of the ICB should declare details of their roles and responsibilities held within member practices of the ICB.

**Non-financial personal interests:**

This is where an individual may benefit personally in ways which are not directly linked to their professional career and do not give rise to a direct financial benefit. This could include, for example, where the individual is:

- A voluntary sector champion for a provider;
- A volunteer for a provider;
- A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation;
- A member of a political party;
- Suffering from a particular condition requiring individually funded treatment;
- A financial advisor.

**Indirect interests:**

This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a commissioning decision (as those categories are described above). This should include:

- Spouse/partner

- Close relative e.g., parent, [grandparent], child, [grandchild] or sibling;
- Close friend;
- Business partner.
- Whether an interest held by another person gives rise to a conflict of interests will depend upon the nature of the relationship between that person and the individual, and the role of the individual within the ICB.