

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

**Date: Wednesday 21st December 2022** 

Time: 11.40 am - 12.45 pm

**Location: MS Teams** 

## **AGENDA**

ITEM NUMBER		ACTION	ENC/ VERBAL	LEAD		
STAN	STANDING ITEMS					
1.	Welcome, Introduction and Apologies for Absence: Professor Van-Tam,	-	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 19 <sup>th</sup> October 2022	Approve	Enc	Dr Gerry McSorley		
4.	To consider matters arising not on the agenda.	-	Verbal	Dr Gerry McSorley		
GEN	ERAL ISSUES/PROGRESS UPDATE					
5.	<ul> <li>To receive a Progress Update including:-</li> <li>Sidings Procurement Update</li> <li>Spalding Update including         Expression of Interest Process     </li> </ul>	Receive	Verbal	Nick Blake/ Shona Brewster		
6.	To receive an update in relation to PCN Development	Receive	Verbal	Sarah Button		
STRA	STRATEGIC ISSUES					
7.	To receive an update in relation to GP Appointments Data Publication	Receive	Verbal	Sarah-Jane Mills		
8.	To receive an update in relation to Winter Planning	Receive	Verbal	Shona Brewster		
9.	To receive an update in relation to System Planning	Receive	Verbal	Sarah-Jane Mills		

SER	/ICE DELIVERY AND PERFORMANCE					
10.	No issues to escalate					
FINANCE						
11.	No issues to escalate					
QUA	LITY					
12.	To receive an update in relation to Lakeside Medical Practice	Receive	Verbal	Wendy Martin		
13.	To receive an update in relation to the Hawthorn Medical Practice CQC Inspection	Receive	Enc	Sarah Starbuck		
GOV	ERNANCE AND ASSURANCE					
14.	To receive the Risk Register	Receive	Enc	Nick Blake		
15.	To receive and approve the Terms of Reference	Approve	Enc	Dr Gerry McSorley		
MINU	TES FROM COMMITTEES AND ESCALA	TION REP	ORTS			
16.	None noted					
INFO	RMATION					
17.	Any New Risks	Note	Verbal	Dr Gerry McSorley		
18.	Items of Escalation to the ICB Board	Note	Verbal	Dr Gerry McSorley		
INFO	RMATION					
19.	The next meeting of the Public Primary Care Commissioning Committee will take place on Wednesday 15 <sup>th</sup> February 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

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

Membership

Name	Position		
Dr Gerry McSorley	Non-Executive Member (Chair)		
Professor Sir Johnathan Van Tam	Non-Executive Member		
Julie Pomeroy	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 ccommissioners 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.