

## Governing Body meeting (held in public)

**DATE: 24 September 2015**

<b>Title</b>	<b>Governing Body Membership</b>	
This paper is for <b>Discussion and Decision</b>		
Recommended action for the Governing Body	<p>That the Governing Body:</p> <p>The governing body are therefore asked to <b>decide</b> whether:</p> <ul style="list-style-type: none"> <li>• To elect a clinical vice chair immediately</li> <li>• To delay electing a clinical vice chair until after the Clocktower locality lead has been appointed</li> </ul>	
Potential areas for Conflicts of interest	None identified in the report.	
Executive summary	<p>The CCG governing elections were held on Thursday 10 September 2015 and as a result a new Chair and three locality leads were also elected for Clocktower, Frognal and North Bexley. The turn-out was 96%.</p> <p>Dr Nikki Kanani has been elected as Chair          Dr Peter Fish has been re-elected as Locality Lead (Clocktower)          Dr Sid Deshmukh has been re-elected as Locality Lead (Frognal)          Dr Varun Bhalla has been re-elected as Locality Lead (North Bexley)</p> <p>The election of the new Chair has created a vacancy for a Clinical Vice-Chair and a Locality Representative for Clocktower previously held by the new Chair.</p> <p>The governing body needs to review the position and make a decision on how to fill the two vacancies established in the CCG's constitution.</p>	
How does this paper support the CCGs	<b>Patients:</b>	The two vacancies on the governing body in the long term if not covered may impact on decision making affecting the wellbeing of patients within Clocktower and Bexley in general.

## Clinical Commissioning Group

objectives?	<b>People:</b>	The newly appointed chair and locality leads may empower staff to work to enable it achieve its targets.	
	<b>Pounds:</b>	A full complement of the governing body may encourage and support staff to work more effectively, efficiently and economically.	
	<b>Process:</b>	The governing may support and encourage staff to commission services leading to better outcomes for the people and patients of Bexley.	
What are the Organisational implications	Key risks	Failure to fill the two vacancies.	
	Equality	None identified in the report.	
	Financial	None identified in the report.	
	Data	None identified in the report.	
	Legal issues	None identified in the report.	
	NHS constitution	None identified in the report.	
Engagement	None.		
Audit trail	The report will be published and available for audit purposes.		
Comms plan	The report will be published for public consumption.		
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Date	11 September 2015		

# Governing Body Membership

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## Introduction

The CCG's governing body elections for a new CCG Chair and three locality leads were held on Thursday 10 September 2015. 26 out of the 27 member GP practices voted. The results of the election were declared at the end of the GP engagement event. The current chair did not stand for election and a new Chair was elected and the three locality leads to the governing body were re-elected.

## Appointment process

The appointment process for the chair and locality leads is by nomination, selection and election.

The CCG membership vote to elect the chair and each locality (Clocktower, Frognal and North Bexley) elects their locality lead. To be eligible to stand the chair and locality lead must be a GP working within Bexley.

The election process was held in accordance with the CCG's constitution, subjected to consultation with the membership, approved by the remuneration committee and in part overseen by the LMC:

### **Stage 1: Nomination process:**

The constitution makes provision for any eligible person to nominate themselves with no seconder required to support the nomination. The nominated person should then apply to the CCG by completing the application form. The applicant should ensure the application addresses the clinical experience and essential criteria required for the position.

### **Stage 2: A selection (interview) process**

All applications received were assessed by a panel, convened by the governing body to assess them against the essential criteria within the person specification. This panel included a member of the LMC as an observer, two members of the governing body and an independent member. The panel decided whether those who applied met the criteria. Candidates who have previously passed the selection stage are not required to submit to a further interview. One nominated candidate did not pass the selection. This decision was upheld on appeal.

### **Stage 3: Election**

The election was held on 10 September 2015. Each candidate was required to receive at least 50% of the votes to receive a mandate and be elected. There was in attendance a representative of the LMC present who scrutinised the process to ensure fairness and that the process as stated in the constitution was followed.

### The election results

Voting started at 10.00am and ended at 3.05pm (electronic voting closed the previous day). At the close of voting, the votes were counted and results were as follows:

Candidates	Dr Nikki Kanani	Dr Peter Fish	Dr Sid Deshmukh	Dr Varun Bhalla
	Chair	Clocktower Locality	Frognaal Locality	North Bexley Locality
<b>Turnout (percentage)</b>	26/27 (96%)	9/9 (100%)	6/6 (100%)	11/12 (92%)
<b>No of potential votes</b>	117	40	27	50
<b>Total Votes Cast</b>	114	40	27	47
<b>Yes votes cast</b>				
<b>Yes votes cast</b>	111	40	27	36
<b>No votes cast</b>				
<b>No votes cast</b>	0	0	0	8
<b>Abstentions</b>				
<b>Abstentions</b>	3	0	0	3
<b>Percentage of yes votes</b>				
<b>Percentage of yes votes</b>	97%	100%	100%	77%

- Dr Nikki Kanani was elected as the new CCG Chair with 97% of the votes
- Dr Peter Fish was elected as the Locality Lead for Clocktower with 100% of the votes
- Dr Sid Deshmukh was elected as the Locality Lead for Frognaal with 100% of the votes
- Dr Varun Bhalla was elected as the Locality Lead for North Bexley with 77% of the votes

The elected candidates will take up their positions on 1 October 2015 for tenure of three years.

## **Current vacancies**

The newly elected chair was previously the Locality Representative for Clocktower and the Clinical Vice-Chair for the CCG, her election has therefore created two vacancies on the governing body:

- Clinical Vice-Chair; and
- Locality Representative for Clocktower.

## **Clinical Vice-Chair**

The CCG's constitution states that:

- i) The clinical Vice-Chair stands in for the chair of the governing body where the chair is unable to act due to absence or conflicting diary arrangements;
- ii) The Clinical Vice-Chair will chair governing body meetings in the absence or unavailability of the of the Chair, unless both the Chair and Clinical Vice-Chair have a conflict of interest or are otherwise unable to act, as set out in the Conflicts of Interests policy; in which case the Deputy Chair shall chair the meeting.
- iii) The Clinical-Vice Chair shall be a GP member of the Governing Body and will be elected by the elected members of the governing body;

In addition, the Clinical Vice-Chair will chair meetings of the Primary Care Advisory Group when the chair is absent or otherwise unable to fulfil that function due to a conflict of interest or other reason.

## **Appointment process**

NHS Bexley CCG's constitution states in Section 6.8.2 that 'one of the elected GPs (excluding the Chair) will be elected by members of the governing body as the Clinical Vice-Chair of the CCG'. In addition Section 7.6.1 states that only elected members of the governing body (Chair, Locality Leads and Locality Representatives) may be involved in the appointment process. Voting will be by a simple majority.

There are currently four GPs (three locality leads and one locality representative) on the governing body eligible for the Clinical Vice-Chair position. There is also a Locality Representative vacancy may or may not be filled with a GP.

The governing body are therefore asked to decide whether

- To elect a clinical vice chair immediately
- To delay electing a clinical vice chair until after the Clocktower locality lead has been appointed

If the second option is chosen then the governing body needs to decide the way forward:

- The three locality leads may take it in turns to cover the position or
- The three locality leads may share the position in an interim until the governing body makes a final decision.

## **Locality Representative for Clocktower**

### **The role of the Locality Representative**

The CCG's constitution states that the role is to:

- i) Lead on a portfolio of agreed responsibilities across areas potentially including:
  - Finance
  - Quality and Safety
  - Contracting (Acute/Community/Mental Health)
  - Quality, Innovation, Productivity and Prevention (QIPP)
  - Communications/engagement/Patient and Public involvement
  - Lead on pathways development and service redesign
  - Effective governance and assurance
- ii) Provide the link between the clinical leadership and assigned locality to support implementation of strategic plans.

### **Appointment process**

The appointment process for the locality representation is by election. The appointed locality representation must be elected by the locality membership of Clocktower. The locality representative must either be a GP, Practice Nurse or a Practice Manager working within Members' Practices in Clocktower.

The locality representatives have an active role in the management and operation of the CCG. As members of the CCG's governing body, he/she brings his/her unique understanding of the CCG's member practices in Clocktower to the discussion and decision making of the governing body.

The election process has three stages in accordance with the constitution as approved by the membership and described earlier in the report:

- Stage 1 – Nominations;
- Stage 2 – The Selection process;
- Stage 3 – Election

The governing body should consider the option of waiting with a time limit to see if any clinicians from Clocktower will come forward to express interest in the position. The position is open to GPs, Practice Managers and Practice Nurses within Clocktower. Once interests have been expressed an election can be planned.

## **Summary**

The 2015 CCG elections have been successful with an excellent turn-out by the member practice representatives to vote. However the success has created two vacancies and the governing body needs to consider the options for the way forward for a decision.