

Governing Body meeting (held in public)

DATE: 24 March 2016

Title	Update on Governing Body Membership
This paper is for Noting and Decision	
Recommended action for the Governing Body	<p>That the members of the Governing Body:</p> <p>Note the update.</p> <p>That the elected members of the Governing Body:</p> <p>Elect a Clinical Vice Chair.</p>
Potential areas for Conflicts of interest	None
Executive summary	<p>The CCG has been in the process of recruiting to a number of governing body positions - the Clocktower locality representative and the lay member with lead responsibility for patient and public involvement. I am pleased to announce that appointments have now been made to both of these posts.</p> <p>Lisa Wilson, practice manager at the Albion Surgery has been successfully elected by Clocktower practices as the locality's representative on the governing body. As well as her work supporting the locality, Lisa has been very involved in the primary care working group and working with colleagues on the development of primary care in Bexley. She will take up her post shortly.</p> <p>The CCG's new lay member with lead responsibility for patient and public involvement is Katie Perrior. She will replace our current lay member, Sandra Wakeford, who is stepping down from her post at the end of the month. Katie's appointment follows a recruitment process, which saw us interview a number of high-calibre candidates.</p> <p>Katie is co-founder of a communications consultancy based in Westminster. In April last year, Katie was appointed as a non-executive</p>

director for the Ebbsfleet Development Corporation, and is their community champion, promoting engagement and involvement with residents as plans for a new Garden City for 100 years emerges. Previously, Katie was a Bexley councillor, where she was cabinet member for children's services. She is also a school governor for West Lodge School in Sidcup.

I am confident that with Katie's wealth of experience she will continue, and build on, the work of our outgoing lay member, Sandra Wakeford, to ensure patients and the public are truly at the centre of everything we do.

I would also like to take this opportunity to thank Sandra for her support and determination to make sure patients are heard, listened to and able to directly influence local healthcare. Sandra has been a huge asset to the CCG and in particular, local people. We wish her well for the future.

The recruitment process for the vacant Clocktower locality lead post is progressing well and has reached the selection stage. An advert is currently on NHS Jobs for the role of secondary care doctor.

Finally the role of Clinical Vice Chair has been vacant since the previous holder was elected as Chair of the CCG last September. The Clinical Vice Chair role is non-remunerated but designed to support the Chair by an elected clinical member of the governing body. The clinical vice chair will:

- stand in for the chair of the governing body where the chair is unable to act due to absence or conflicting diary arrangements
- 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 in which case the Deputy Chair shall chair the meeting;
- chair Primary Care Advisory Group 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 in which another member of the CCG will be asked to chair that meeting or part thereof.

The Clinical Vice Chair must be a GP member of the Governing Body and will be elected by the elected members of the governing body (Chair, Locality Leads and Locality Representatives by a simple majority);

GP members of the Governing Body are asked to self-nominate, if they wish to be considered for this role to Simon Evans-Evans by 12.00 on 24th March 2016.

An election by either secret ballot or show of hands will be held at the Governing Body meeting on 24th March 2016.

Clinical Commissioning Group

How does this paper support the CCGs objectives?	Patients:	Core objective applicable to all members of the governing body.	
	People:	Core objective applicable to all members of the governing body.	
	Pounds:	Core objective applicable to all members of the governing body.	
	Process:	Core objective applicable to all members of the governing body.	
What are the Organisational implications	Key risks	Two of these roles are statutory (lay member PPI and Secondary Care doctor) and therefore must be filled.	
	Equality	Elected members are not screened for equality issues. Other members are shortlisted “blind” in that the short-lister does not have access to personal information only career history.	
	Financial	In accordance with Rem Com.	
	Data	N/A	
	Legal issues	See key risks.	
	NHS constitution	Applicable to all members of the governing body.	
Engagement	N/A		
Audit trail	This paper has not been seen by other committees.		
Comms plan	Notifications will be made to relevant stakeholder.		
Author: Simon Evans-Evans Director of Governance and Quality	Clinical lead: Dr Nikita Kanani NHS Bexley CCG Chair	Executive sponsor: Simon Evans-Evans Director of Governance and Quality	
Date	14 March 2016		