

# THE SUFFOLK LOCAL MEDICAL COMMITTEE

## CONSTITUTION

8 April 2021

### 1. PREAMBLE

This document sets out the Constitution of the Suffolk Local Medical Committee (the 'Committee') for the area of the county of Suffolk, excluding Waveney.

### 2. RECOGNITION

In accordance with section 97 of the Act as amended by paragraph 41, Part 4 of Schedule 4 of the Health and Social Care Act 2012 (and any subsequent amendments), the NHSE formally recognises the Committee formed for its Area as representing the general medical practitioners (GPs) in its Area. For the avoidance of doubt, the Committee is also independently recognised and has the relevant authority to act on behalf of Local GPs as set out in this Constitution.

For as long as the Committee is recognised by NHS England as being representative of the practitioners in an area, this Constitution shall not be rendered invalid by any changes to the structures and boundaries of the NHS.

### 3. FUNCTIONS

Save where the Committee shall otherwise determine the services provided by the Committee shall not be provided to practitioners who do not make a full contribution in accordance with this Constitution to the expenses of the Committee.

For the avoidance of doubt, the Committee shall represent Local GPs in any given relevant capacity in the Area (Represented GPs), which for the avoidance of doubt shall include without limitation as follows:

- as providers and/or performers of primary care services
- in their capacity as members of a CCG or members of a governing body of a CCG or any other successor body.
- as shareholders and/or members of any provider arm organisation created for the purposes of bidding and/or tendering for primary care or secondary care services by any NHS commissioner or other organisation within the Area or otherwise.
- in their capacity as service providers under any arrangement via a provider arm organisation or otherwise.

- in any commissioning roles unless a Local GP advises NHSE and the Committee that he no longer wishes to be represented by the Committee and/or withdraws any authority so given to the Committee to act on his behalf.
- within Primary Care Networks

#### 4. INTERPRETATION

The paragraph headings shall be taken into account in the interpretation of this Constitution and where the context so requires:

- the male gender shall be deemed to include the female gender and vice versa;
- the singular number shall include the plural number and vice versa; and
- references to statutes or parts or sections of statutes shall include any statutory modifications or re-enactments thereof or any regulations orders or directions made there under for the time being in force.

#### 5. DEFINITIONS

<b>Act</b>	The National Health Service Act 2006.
<b>Area</b>	The county of Suffolk, excluding Waveney.
<b>BMA</b>	The British Medical Association.
<b>Clinical commissioning group</b>	The body corporate known as a Clinical Commissioning Group established in accordance with chapter 142 of Part 2 of the Health and Social Care Act 2012.
<b>Chief executive</b>	A person engaged by the Committee to act as its chief executive or where applicable its secretary and where the context so requires the words 'appointed' and 'appointment' shall be construed accordingly.
<b>Committee</b>	The Suffolk Local Medical Committee recognised by NHS England (or any successor organisation) as formed within the Area and representative of all GPs, as defined in section 91 of the Act, performing primary medical services in the area for which the Committee was formed.
<b>Committee year</b>	1 <sup>st</sup> April to 31 <sup>st</sup> March

<b>GPC</b>	The General Practitioners Committee of the BMA.
<b>GPC voting register</b>	A list of represented GPs (including medically qualified LMC officers) who are eligible to stand, vote or nominate another Represented GP or another qualifying practitioner as a GPC regional representative.
<b>Medical register</b>	The list of registered medical practitioners compiled and held by the General Medical Council.
<b>Member</b>	A person elected or co-opted onto the Committee in accordance with the provisions of this Constitution.
<b>NHS England</b>	The commissioning organisation, recognised by the Health and Social Care Act 2012 on behalf of the NHS, and responsible for commissioning primary care services from, and holding contracts with, GP practices or organisations providing primary medical services (including single handed GPs) or any successor organisation.
<b>Officers of the Committee</b>	Chair, Vice Chair, Treasurer
<b>Performers lists</b>	The lists maintained by NHS England of medical practitioners providing primary medical services (as defined in section 91(3) of the Act)
<b>Practitioner entitled to vote</b>	A medical practitioner who is on the performers list and practices in the area <i>providing primary medical services for an average of one clinical session a week for a period of at least six months</i>
<b>Register</b>	The combined register of represented GPs and Committee members which shall be maintained in several parts as necessary for administrative purposes.
<b>Represented GPs</b>	All GPs as set out in clause 5 herein
<b>Returning officer</b>	A person whose name is not included on any part of the register of members invited by the Committee to act, in person or through a deputy, at elections.

## 6. THE COMMITTEE

### The Committee shall consist of:

(a) Elected Members

Up to 20 Medical Practitioners registered within the GMC and included on the Performers List, dependent on his having provided and/or performed primary medical services for an average of one clinical session a week for at least six months within the area for which the Committee was formed.

(b) Registrar Representatives

A registrar from each of the two Vocational Training Schemes (VTS) in Suffolk will have a seat on the Committee for a period of 12 months.

Every 12 months the Chief executive will approach the senior tutor for each VTS at a mutually agreed time to ask for the VTS registrars to propose a representative from amongst themselves to sit on the Committee for the following 12 months.

The proposed registrars will have the same voting rights as elected members.

(c) Co-opted members

The following may at the discretion of the Committee (acting reasonably) co-opt the following onto the Committee:

- Up to 2 representatives appointed by the medical staffs of the 2 district hospitals serving the area of the Committee –attending in such manner as to ensure that one is present at any meeting (counting as one co-option and therefore one seat).
- A representative of the BMA Suffolk Division
- If following the Election of Members there are not at least two Members who are employed or self-employed non-principals, the Committee shall be entitled to co-opt accordingly to ensure that this group is fairly represented.
- A further 4 individuals which should include the BMA General Practice Committee representative for the area if not already an elected Member.

(d) Observers

The Committee may in its absolute discretion invite such persons as it thinks fit to attend the whole or part of any Committee meeting; observers will not have voting rights.

(e) Re-election and Re-appointment

Any member of the Committee shall be eligible for re-election or re-appointment.

### **Constituencies**

For the purpose of electing members of the Committee the area of the LMC shall be divided into constituencies. Each constituency is set out in Appendix 1.

In the month of January in each year in which an election of the Committee occurs, it shall consider the number of members to be elected in each constituency under the last preceding sub-paragraph in relation to the number of practitioners entitled to vote in such constituency on 1 January of such year and they shall have power to modify the figures and the constituency areas in the said appendix so as to ensure that the number of persons elected by each constituency is (as nearly as may be) related to the number of practitioners entitled to vote in such constituency.

### **Method of Election**

The Returning Officer shall be a person, other than an elector, appointed by the Committee for the purpose and, in the event of his absence or inability to act, the Committee or Chief Executive shall appoint some person, other than an elector, to act in his place.

The election of the Committee shall take place during the month of March in every third year.

Voting shall be by electronic postal ballot.

The Returning Officer shall identify the persons entitled to vote and their addresses defined as Practitioners entitled to vote (this being the list of electors) as at the first day of January of the year in which the election takes place and the persons whose names are thus identified are in this Constitution referred to as "the electors".

The said list of electors shall also show in respect of every person whose name appears thereon their precise employment status as in paragraph 1. The constituency in which principals and registrars are entitled to vote shall (subject to the next succeeding sub paragraph) be governed by the address of their main surgery premises.

Employed doctors will be entitled to vote in one only of the constituencies in which they are employed. Self-employed doctors will be entitled to vote in the

constituency in which they live, if within Suffolk; otherwise in the constituency of their choice. Only self-employed doctors who wish their address known to the LMC can be approached by the LMC and are therefore eligible to vote.

It shall be the responsibility of each practitioner entitled to vote to ensure that his name is included in the said list of electors. If a practitioner desires to vote in a constituency other than that appropriate to his address on the electoral roll, he shall make application to the Returning Officer who shall alter the said list of electors accordingly if he is satisfied that the practitioner resides or carries on practice in the constituency in which he desires to vote.

Only those persons whose names appear on the said list of electors shall be entitled to vote for candidates for election.

The Returning Officer shall send written notice of the election to each voter and such notice shall be sent so as to be delivered to the elector not less than twenty eight clear days before the date of the election.

Such notice shall:

- state the date of election
- state the date by which nominations for election must be submitted to the Returning Officer
- set out the provisions with regard to nomination contained in the next succeeding paragraph hereof
- enclose a nomination form.

Every candidate for election shall be nominated by at least two electors who shall be practitioners entitled to vote in the constituency for which such candidate is nominated.

Every nomination form must be accompanied by a statement in writing signed by the candidate that, if elected, he is prepared to accept office.

A candidate nominated for election shall be a person entitled to vote in the constituency for which he is nominated.

If the number of nominated candidates qualified for election in accordance with this Constitution does not exceed the number of vacancies (being, in the case of candidates qualified, vacancies in the constituency for which they are nominated) the Returning Officer shall declare those candidates to be elected.

For the purpose of filling any vacancy or vacancies in respect of which more than the corresponding number of duly qualified candidates is nominated, a vote shall be taken in the manner hereinafter provided.

Each elector shall be entitled to cast a number of votes equal to the number of vacancies to be filled by those for whom he is entitled to vote, but may not cast more than one vote for any one candidate.

## **Voting**

Voting shall be in accordance with the following rules:

- a. Separate voting papers shall be prepared by the Returning Officer containing the names of the duly nominated candidates who are practitioners entitled to vote, and the constituencies for which they have been nominated.
- b. Each voting paper shall contain:
  - i. a statement of the number and identity of candidates for whom the elector may validly vote; and
  - ii. a statement that the same must be returned to the Returning Officer so as to reach him by the date of the election (which shall be specified in the voting papers and shall be not more than fourteen days after the issue of such papers).

The Returning Officer shall send to each elector a voting paper containing the names of those candidates for whom he is entitled to vote.

- a. A voting paper shall be invalid if:
  - i. the elector has purported by it to cast more votes than is permitted under paragraph 6xiv
  - ii. it is not signed
  - iii. in any other respect it does not comply with this Constitution or is marked in such a manner as to cause uncertainty as to the candidates for whom the elector desires to record his vote. Provided that the Returning Officer may, if he thinks fit, treat a voting paper so marked as valid for the purpose of any vote other than that in connection with which the uncertainty arises
  - iv. it is received by the Returning Officer after the date of the election.

The Returning Officer shall examine the voting papers received on or before the date of the election and, after rejecting any that are invalid, shall count the votes recorded on the remaining papers and shall prepare a return of the candidates according to the number of votes which each has received, the person receiving the greatest number of votes being placed highest on the return.

If the votes received by any two or more candidates are equal and the addition of one vote to any one of such candidates would enable that candidate to be declared elected, the Returning Officer shall decide by lot which of the candidates shall take the highest place.

Any question as to the validity of any nomination or voting paper or otherwise in connection with an election shall be determined by the Returning Officer.

The Returning Officer shall forthwith give notice in writing of the result of the elections to all candidates.

Where any document is, under this Constitution, required to be sent to a practitioner, it shall be deemed to have been duly sent if it has been delivered or posted, directed to the address of the elector on the list of electors prepared in accordance with paragraph 6.

No election shall be invalid by reason of any mis-description or non-compliance with the provisions of this Constitution, or by reason of any miscount or of the non-delivery, loss or miscarriage in the course of post of any document required or authorised by this Constitution to be despatched by post, if the Returning Officer is satisfied that the election was conducted substantially in accordance with the provisions of this Constitution.

## **7. FIRST MEETING OF THE NEW COMMITTEE**

The Returning Officer shall give not less than seven clear days' notice to the members of the Committee of the time and place of the first meeting.

It shall be the duty of the Committee to inform the electors of the identity of its members and the Committee shall at its first meeting decide by what means this shall be done and shall give the appropriate instructions for their decision to be implemented.

At the first meeting of a new Committee nominations for the positions of the Chair, Vice Chair and Treasurer will be invited by the Chief Executive.

Where a single candidate is proposed for a position and is seconded by two other Committee members they will be considered elected by the Committee.

Where more than one candidate is nominated for a position, a ballot of Committee members will be held, with the successful candidate obtaining a simple majority of Committee member votes.

### **Term of office**

The elected members of the Committee shall hold office for 3 years.

## **Vacancies**

Where the number of persons elected under paragraph 6.1(a) is less than the number of persons mentioned in such paragraph by reason that no or insufficient qualified candidates have been nominated, the Committee, may within six months after the election, co-opt persons who are not disqualified to fill the vacancies.

A casual vacancy will occur on:

- a. The resignation, retirement, suspension from or removal from the performers lists or death of an elected member of the Committee, or
- b. temporary absence (3 consecutive Committee meetings) due to sickness or other similar circumstance (including maternity, adoption or paternity leave), or
- c. on the appointment of an elected member to the office of secretary.

Within three months of such a vacancy occurring, the Committee shall fill the same by the co-option of a practitioner who as far as possible represents the same class of practitioners as the person in post prior to the vacancy arising.

Pending the filling of any vacancy, the proceedings of any Committee shall not be invalid by reason of such vacancy.

A person co-opted to a vacancy shall hold office for the remainder of the period for which the person in whose place he is co-opted would have been entitled to hold office.

## **Retirement**

A member of the Committee whether elected or co-opted may retire on giving written notice delivered to the chief executive or secretary and the retirement shall take effect on the date specified in the notice if a date is given or if not, on the date when the notice is received by the chief executive or secretary.

## **Disqualification**

A member of the Committee shall be disqualified if:

- a. He ceases to be a registered medical practitioner [or a registered general ophthalmic practitioner] or is removed from the Medical Register.
- b. He ceases to perform the minimum number of clinical sessions providing/performing medical services under the Act, as set out in S.6.1(a), or being a performer of such services, advises NHS

England that he no longer wishes to be represented by the Committee.

- c. He has had his name removed from a performers list and has not subsequently had his name included in such a list.
- d. If within one month of receiving a due call he fails to pay to the Committee any current statutory or voluntary levy due to the Committee together with any arrears that may be outstanding.
- e. He fails to attend a meeting of the Committee for a period of three meetings unless the officers of the Committee excluding the absent member are satisfied that the absence was due to a reasonable cause and that the absent member will be able to resume attending meetings of the Committee within such period as it considers reasonable.

A co-opted member of the Committee shall be disqualified if:

- a. He ceases to hold the office or qualification which entitled him to be a member of the class of co-opted members.
- b. He is disqualified from the Company under the Company bye-laws, or by general company law.
- c. His registration with the General Medical Council is suspended he shall not be entitled to resume his membership of the Committee for the remainder of the period for which he was originally appointed but he shall be permitted at the discretion of the Committee to stand afresh in the next following election if the suspension has ended prior to the date when the Returning Officer sends a written notice of election to each elector.
- d. He is suspended from either the Medical Register or the Performers List then he shall stand down from the Committee until determination of the enquiry leading to the suspension has been made. If there are no restrictions on his medical practice and he remains eligible to stand, he shall be permitted at the discretion of the Committee to stand afresh in the next following election if the suspension has ended prior to the date when the Returning Officer sends a written notice of election to each elector.
- e. In the reasonable opinion of the remaining members of the Committee, the member of the Committee brings the Committee into disrepute or damages the reputation of the Committee or, acts in a manner that is inconsistent in respect of the functions or processes of the Committee.

## **8. INFORMATION TO BE SENT TO THE COMMISSIONING ORGANISATION**

The chief executive of the Committee shall inform NHS England of the names and addresses of all newly elected, appointed and/or co-opted members of the Committee, and, when casual vacancies arise in the membership of the Committee, of the names and addresses of the persons, if any, appointed to fill those vacancies.

## **9. ROLE OF THE COMMITTEE IN RELATION TO CCGS OR THEIR SUCCESSORS**

The Committee shall recognise:

- a. CCG's role as commissioners of services and their duty to regulate and performance manage any commissioning contracts they may agree with any provider.
- b. Its need to liaise actively with CCGs on a regular basis.
- c. CCG's role in dealing with commissioning contract issues raised by constituent members.

## **10. MEETINGS**

The Committee will meet in person or virtually from time to time as the need dictates but no less frequently than twice in any three month period.

The chief executive of the LMC shall give not less than seven clear days notice to the Members of the Committee of the time and place of each meeting.

It shall be the duty of the Committee to inform the represented GPs of the identity of its members and the Committee shall at its first meeting decide by what means this shall be done and shall give the appropriate instruction for the decision to be implemented.

### **Chair and Vice Chair**

The Chair of the Committee shall chair meetings of the Committee. In the absence of the Chairman, the Vice Chair of the Committee shall act as Chair.

### **Quorum**

A quorum shall be one quarter of the number of members of the Committee or, if one quarter is not a whole number; the next whole number above one quarter shall form a quorum of the Committee. However, if a decision to be taken by the Committee affects only one constituency, then at least one member representing that constituency must be present.

## **Voting**

Only elected members of the Committee may vote at Committee meetings.

## **Observers**

The Committee may in its absolute discretion invite such persons as it thinks fit to attend the whole or any part of any Committee meeting.

## **In camera**

The Committee may require all or any of the invited observers to withdraw from any meeting if it wishes to consider any business in camera.

## **Secretary**

In the absence of there being a chief executive, the Committee shall, from time to time and for such period and upon such terms as they may determine, elect from amongst their member a person to act as secretary.

## **Minutes**

The chief executive or secretary on behalf of the Committee shall keep minutes of each meeting which shall be drawn up and submitted for agreement at the next meeting of the Committee where, if agreed, they shall be signed by the person presiding over it.

## **11. REPORTING TO ELECTORS**

Shall take place by:

- Monthly electronic newsletters
- On specific issues when deemed necessary by the Committee or Executive Office
- The issuing of an Annual Report

## **12. ANNUAL REPORT**

In each year the Committee shall prepare a report of their proceedings since the publication of the preceding report together with a statement of accounts and such report and statement shall be circulated to those whose names are listed in the Register not later than three months after the Committee shall have approved the same. A copy of the report and statement of accounts shall be sent to NHS England.

### **13. GENERAL AND EXTRAORDINARY MEETINGS**

#### **Frequency**

General meetings ten times a year, usually monthly except for early January or in August.

#### **Attendance**

In addition to the represented GPs the following persons shall have the right to attend:

- [any Committee member;
- the chief executive or the secretary; and
- such other persons as the Committee may in their absolute discretion determine.]

#### **Business at general meetings**

The following business may be transacted at a general meeting:

- the receipt and consideration of the annual report;
- together with such other business of which 7 days notice has been given to the Committee and which the Committee in its absolute discretion accept as appropriate for discussion.

#### **Extraordinary meetings**

Upon the written request of not less than 30 represented GPs who are not disqualified, the Committee shall convene an extraordinary meeting on not less than 21 and not more than 28 days notice. The only business that may be transacted at such a meeting is that specified in the written request to the Committee a copy of which shall be circulated to all those who receive notice of the meeting.

### **14. THE CHIEF EXECUTIVE AND/OR SECRETARY**

#### **Appointment**

The Committee shall appoint a person to act as Chief Executive to the Committee; and in the event of the death, resignation or removal from office of the Chief Executive so appointed, the Committee shall appoint a person to act as Chief Executive in his place; and any person appointed Chief Executive shall forthwith notify his appointment to NHS England.

If the person appointed as Chief Executive is not a registered medical practitioner the Committee shall nominate one of its members who is in general practice and who is willing so to act to be available to offer help and advice on matters on which any elector may particularly wish for the guidance of a professional colleague.

## **15. FUNDING**

### **The Statutory Levy**

The administrative expenses of the Committee may (if required and necessary), be collected from the practices of all Local GPs whose names appear on the Register and in-line with policies agreed from time to time by the Committee.

### **The Voluntary Levy**

The Committee currently collects a voluntary levy from the practices of Local GPs whose names appear on the Register to cover any services, expenses or benefits which the Committee in its sole discretion may determine are appropriate and beneficial to its Local GPs and may apply that funding accordingly.

### **Collection**

The method of collection of the levies shall be determined from time to time by the Committee.

### **Amount**

The amounts of the levies shall be determined by the Committee having regard to the requirements of openness, transparency and equity and upon an estimation of the proportion of administrative and other expenses.

## **16. DISCLOSURE OF INTEREST**

If an officer of the Committee or committee member sits on or works for any stakeholder or relevant organisation or has a pecuniary or other significant interest, direct or indirect, in any contract, proposed contract, stakeholder or relevant organisation or other matter and is present at a meeting of the Committee [or subcommittee] when the contract, proposed contract, or other matter is the subject for consideration he shall at the meeting and as soon as practicable after its commencement disclose that fact.

If any officer of the Committee or a Committee member has any doubts about whether or not he has such an interest he shall report the matter to the chairman who shall advise as to whether or not the matter should be declared.

The Committee shall publish and maintain a conflicts of interests policy, a document which shall be available for inspection to members and represented GPs.

Further the Committee shall maintain a register of members' interests available for inspection on the Committee website.

## **17. AMENDMENTS TO CONSTITUTION**

This Constitution may be amended in the following manner, but not otherwise:

- a. Proposals for such amendment shall be sent to the Chief Executive of the Committee who shall place them before the

Committee for consideration at the earliest opportunity but the Committee will not consider the same until at least seven clear days' notice of such proposals shall have been received by the members of the Committee.

- b. The Chief Executive to the Committee shall, if requested so to do by not less than 15 of the members of the Committee or 30 of the electors, embody in a letter any proposed amendment to this Constitution which the Committee has approved and circulate such letter to all practitioners on the electoral roll and all practitioners entitled to elect members of the Committee with an invitation to such practitioners to submit to the Chief Executive their comments on such proposals within 14 days after the date of the despatch of such letter
- c. The Committee shall at a meeting, held not later than 4 months after the date of the despatch of such letter, consider all replies received by the Chief Executive within such period of 14 days and shall decide whether the said proposed amendment (either as circulated in such letter or as varied as the result of the consideration of such replies) shall be adopted and if so the approval of NHS England to such amendment shall be sought by the Chief Executive of the Committee.
- d. Any amendment duly carried above of which NHS England shall signify their approval shall be notified by the chief executive to the Committee at the next meeting of the Committee and thereupon such amendment shall forthwith take effect.
- e. The chief executive shall notify the proposer of any amendment duly carried of the decision of NHS England thereon forthwith upon the communication of such decision to the LMC.

## **18. WINDING UP**

If upon any amalgamation or reorganisation of the Committee there remain any residual funds or liabilities the same shall be distributed between such other committees as may be involved in the amalgamation or reorganisation so as equitably to reflect the proportions in which Represented GPs are transferred to other committees.

**CONSTITUTION OF  
THE SUFFOLK LOCAL MEDICAL COMMITTEE 1 September 2013**

**Appendix 1 Constituencies**

**The following constituencies will have the right to elect Members:**

- Ipswich
- Coastal
- Mid-Suffolk
- Bury St Edmunds
- West Suffolk