

Terms of Reference for South West London Primary Care Advisory Panel

Introduction

1. NHS Kingston CCG, NHS Merton CCG, NHS Richmond CCG, NHS Sutton CCG and NHS Wandsworth CCG have all taken on delegated primary care commissioning (level 3) from 1st April 2016. NHS Croydon continue to operate as joint commissioners with NHS England (level 2) for 2016/17, shadowing the arrangements being established for full delegation.
2. As part of the operating model for primary care commissioning in south west London (SWL) in 2016/17, the six CCGs have agreed to establish a Primary Care Advisory Panel on a collaborative basis.

Role of the SWL Advisory Panel

3. The SWL Advisory Panel (the Panel) will support colleagues in individual CCGs who may be dealing with challenging or contentious local primary care commissioning issues. Examples may include: complex contract or performance issue with a local practice; premises issues or potential conflicts of interest.
4. The Panel will comprise of a peer group of clinical and managerial leaders & lay members who will act as a point of reference to consider and advise on any issues that an individual CCG wishes to bring forward.
5. The Panel will make recommendations as to a proposed course of action. The final decision will remain the responsibility of the relevant local CCG primary care committee.
6. The Panel will:
 - Support local delegated and/or joint commissioning for the six CCGs in SWL
 - Act as a peer group to consider and advise on any issues of concern brought forward by an individual CCG
 - Make recommendations as to a proposed course of action
 - Provide advice
 - Share learning across the SWL CCGs

Membership

7. The membership of the Panel shall consist of clinical, managerial and lay member representation drawn from the six CCGs, with external

perspectives provided by members appointed by NHS England and from independent representation outside the South West London area

The membership shall comprise:

- a) Chair – to be selected by members of the panel from amongst the non-clinical nominations of the CCGs
- b) 2 representatives from each CCG – to be nominated from clinical and managerial leads or lay members (total 12)
- c) 2 representatives from NHS England - 1 clinical leader, 1 managerial (total 2)
- d) 2 externally appointed members from outside SWL - 1 clinical leader, 1 managerial (total 2)

[Maximum 16 members]

In attendance:

LMC representative x2
Healthwatch representative x2

The above will not be formal members of the panel but can attend with speaking rights.

Advisers and other colleagues may be invited to attend to support the work of the panel by agreement of the Chair.

8. The Chair of the meeting will be agreed at the first meeting of the Advisory Panel.

Meetings and Quoracy

9. The Panel will be quorate if the following are in attendance:
 - 8 members – including 1 representative from each CCG (6), 1 NHS England representative (1), 1 external representative (1) – with a minimum of 2 clinical, 2 managerial and 2 lay members in attendance.
10. Members have a collective responsibility for the operation of the Panel. They will participate in discussion, review evidence and provide objective expert input to the best of their knowledge and ability.
11. There is no provision for voting as this is an advisory panel only. Decision making is reserved for the relevant CCG primary care committee.
12. Meeting Frequency – As currently there is an unknown likely demand of issues that could arise, it is proposed that 3 dates for the Panel are set at intervals of every 4 months throughout the year; In the event there is insufficient business the meeting will be cancelled.
13. The Panel will meet in private. Recommendations arising from the work of the Panel will be considered in public at the appropriate CCG Primary

Care Committee.

14. The SWLCC shall act as Secretary to the Panel and will:
 - a) Circulate to all members, the minutes and action notes of the working group within 10 working days of the meeting
 - b) Circulate agendas and papers for each meeting 5 days before a scheduled meeting, where enabled.

Responsibilities of members

15. Commit to attending meetings of the Panel as scheduled, as far as practicable
16. Be able to take a pragmatic approach to reaching consensus and working in partnership
17. Have a good understanding of the commissioning of primary care services from a clinical and / or managerial perspective
18. Provide advice and guidance that ultimately supports the commissioning of primary care services in SWL in an effective and efficient manner for local populations

Decisions

19. The Panel is not a decision making body. Wherever possible, the Panel will reach a recommendation based upon consensus of all members present.
20. The Panel is accountable to the six SWL Primary Care Commissioning Committees.
21. The SWL SRO for Transforming Primary Care is responsible for the management of the Panel and ensures it operates within the remit described in the Terms of Reference.

Reporting

22. The Panel will:
 - Report recommendations on identified issues to the relevant CCG Primary Care Committee
 - Produce an annual report of work of the panel to the 6 CCG Primary Care Committees

Review of Terms of Reference

23. These Terms of Reference will be formally reviewed at the inaugural meeting of the Panel and annually thereafter. The Terms of Reference may be amended by mutual agreement at any time to reflect changes in circumstances which may arise. Any resulting changes to the terms of reference should be agreed by the Panel. The Terms of Reference must be included in the Standing Orders for the 6 SWL Primary Care Committees.

Conflicts of Interest

24. Conflicts of interest shall be dealt with in accordance with NHS Wandsworth CCG's conflict of interest policy, which shall be applied *mutatis mutandis* to the Advisory Panel.