# Extraordinary Meeting of the NHS Rushcliffe Clinical Commissioning Group Governing Body

**to be held on Thursday 15 June 2017 at 2-30pm**  
Easthorpe House, 165 Loughborough Road, Ruddington, Nottingham NG11 6LQ

## AGENDA

### PUBLIC SESSION

<table>
<thead>
<tr>
<th>ADMINISTRATION</th>
<th>2.30pm</th>
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| RCCG/GB/17/100 Welcome                                                         | Sheila Hyde  
Lay Vice-Chair |
| RCCG/GB/17/101 Apologies for Absence                                           | Lynne Sharp  
Head of Governance and Engagement |
| RCCG/GB/17/102 Declaration of Interest                                         | All |
| i) Register of interests                                                      |        |
| ii) Declarations of interest from sub-committees                             |        |
| iii) Declarations of interest for this agenda                                |        |

### FINANCE

<table>
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<th>FINANCE</th>
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| RCCG/GB/17/103 Finance Recovery Programme                              | Jonathan Bemrose  
Director of Finance |
Paper |

### FOR APPROVAL

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<th>FOR APPROVAL</th>
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| RCCG/GB/17/105 Integrated Commissioning Proposal                       | Dr. Stephen Short  
GP Chair |
| RCCG/GB/17/106 Policy for Commissioning of NHS Continuing Healthcare and Joint Packages of Health and Social Care Services | Nichola Bramhall  
Director of Quality and Nursing |

### ANY OTHER BUSINESS

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<tr>
<th>ANY OTHER BUSINESS</th>
<th>3-40pm</th>
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<td>RCCG/GB/17/107 Any Other Business</td>
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### CONFIDENTIAL MEETING

<table>
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<th>CONFIDENTIAL MOTION:</th>
<th>3-45pm</th>
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<td>The Governing Body will resolve that representatives of the press and other members of the public be excluded from the remainder of this meeting, having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest (Section 1 [2] Public Bodies [Admission of Meetings] Act 1960)</td>
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Date and Time of Next Meeting:  
Open Meeting Thursday 20 July 2017 - 1.30 pm  
Clumber Room Easthorpe House, Loughborough Road, Ruddington NG11 6LQ
DEFINITION OF A CONFLICT INTEREST FOR AGENDA ITEM

A conflict of interest occurs where an individual’s ability to exercise judgement, or act in a role is, could be, or is seen to be impaired or otherwise influenced by his or her involvement in another role or relationship. In some circumstances, it could be reasonably considered that a conflict exists even when there is no actual conflict. In these cases it is important to still manage these perceived conflicts in order to maintain public trust.

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 commissioners may here find themselves in a position of being at once commissioner and provider of 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:

i) **Financial interests** - this is where an individual may get direct financial benefits from the consequences of a commissioning decision. This could, for example, include being:

- A director, including a non-executive director, or senior employee in a private company or public limited company or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations.
- A shareholder (or similar ownership interests), a partner or owner of a private or not-for-profit company, business, partnership or consultancy which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations.
- A management consultant for a provider. This could also include an individual being:
  - In secondary employment
  - In receipt of secondary income from a provider;
  - In receipt of a grant from a provider;
  - In receipt of any payments (for example honoraria, one-off payments, day allowances or travel or subsistence) 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).

ii) **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, for example, 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, who are members of the governing body or committees of the CCG, should declare details of their roles and responsibilities held within their GP practices.
iii) **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;
- Suffering from a particular condition requiring individually funded treatment;
- A member of a lobby or pressure group with an interest in health.

iv) **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) for example, a:

- Spouse / partner
- Close relative - parent, grandparent, child, grandchild or sibling
- Close friend
- Business partner - a declaration of interest for a “business partner” in a GP partnership should include all relevant collective interests of the partnership, and all interests of their fellow GP partners

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 CCG.

The above categories and examples are not exhaustive and the CCG will exercise discretion on a case by case basis, having regard to the principles set out in the CCG’s Conflicts of Interest.