

Terms of Reference

Conflicts of Interest Screening Panel

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1. CONSTITUTION

- 1.1 The Conflicts of Interest Panel (the Panel) duly authorised committee of the West Leicestershire Clinical Commissioning Group (the CCG) established in accordance with West Leicestershire Clinical Commissioning Group's Constitution (the Constitution) section 8.2.2, to make arrangements to manage conflicts and potential conflicts of interest.

2. PURPOSE

- 2.1 The purpose of the Panel is to ensure that any actual or perceived conflicts of interest shall be managed effectively, openly, and transparently so as to ensure that decisions made by the CCG are taken without the influence of conflicted interests.
- 2.2 The Panel is an advisory body to the Board . The Panel (Chair or Member) will make its recommendations to the Board regarding the management of each conflict. Such recommendations are to be ratified by the Board and such recommendations and ratifications shall be recorded in the meeting minutes.

3. AUTHORITY

- 3.1 The Panel shall operate within the Corporate Governance Framework (i.e. The Constitution, Standing Orders, Standing Financial Instructions, and Scheme of Delegation & Reservation) of the CCG.
- 3.2 The Committee is authorised by the Board to undertake the duties set out in these terms of reference.

4. DUTIES

- 4.1 The Panel shall follow all applicable national guidance relating to the management of Conflicts of Interest and procurement of healthcare services.
- 4.2 All members and attendees of the Panel shall be required to follow the Code of Business Conduct and Nolan Principles as articulated in the Constitution.
- 4.3 Panel members shall declare their own interests to the business at each meeting with such notice as to allow time for substitution where required.
- 4.4 The Panel shall undertake the following duties:
 - 4.4.1 Review the agendas of meetings of the Board and its committees to identify potential conflicts of interest;
 - 4.4.2 Make recommendations to the Board on how best to manage such potential conflicts of interest;
 - 4.4.3 The Panel shall review each agenda to determine:
 - 4.4.3.1 Who is conflicted;
 - 4.4.3.2 To what extent they are conflicted (supported by a detailed procedure as outlined in the CCG's Conflicts of Interest Policy);
 - 4.4.3.3 What level of involvement should the individual have with the item/s concerned, i.e. to be present and involved, present and not involved or to absent themselves;
 - 4.4.3.4 If the Board or committee is required to make a decision, whether there will be any issues relating to its quorum as a

result of the conflict of interest;

4.4.3.5 Whether it is considered prudent to delegate the decision to the Procurement and Investment Committee

4.4.4 For each conflict identified and discussed by the Panel, the Panel shall maintain a record of:

4.4.4.1 The category of conflict (as per the procedure outlined in the Conflicts of Interest Policy);

4.4.4.2 The materiality (as per the procedure outlined in the Conflicts of Interest Policy);

4.4.4.3 The Panel's recommendations to the Board regarding management of the conflict;

4.4.4.4 The Panel's justification for the course of action it recommends for managing the conflict.

5. PRINCIPLES

5.1 When assessing actual, perceived, or potential conflicts of interest, the Panel shall adhere to the following principles:

5.1.1 As a clinically led organisation, clinical input must be evident throughout the entire process of decision-making. This includes establishing strategy, planning, service specification, procurement, decision-making and execution;

5.1.2 Clinicians must always be involved in discussions strategic and planning unless not appropriate

5.1.3 Clinicians must always be involved in decision making unless not appropriate

5.1.4 Individuals concerned have are responsible for declaring any actual, perceived, or potential conflict of interest;

5.1.5 Where there is doubt as to a conflict of interest, the Panel and members shall err on the side of caution and proceed as though there is a conflict of interest;

5.1.6 The Panel shall uphold the principles of good governance as set out in the Constitution at all times.

5.2 If the Panel has a concern regarding the overruling of a recommendation it has made to the Board, the Panel has the right to escalate this matter to the Audit Committee for further investigation.

6. REPORTING

6.1 The Panel is accountable to the Board for discharging the duties set out in these terms of reference.

6.2 The Panel shall report to the Board by summary written report to the next available meeting of the Board following each meeting of the Committee in sufficient time as to allow for the effective management of identified conflicts of interest.

7. MEMBERSHIP

- 7.1 The following shall be voting members of the Panel:
- 7.1.1 Chair - Board Lay Member, normally Lay Member for Audit & Governance, however, in their absence another Lay Member may be asked to deputise
 - 7.1.2 CCG Deputy Chair (clinician) (or suitably qualified nominated deputy, which must be another GP Board Member)
 - 7.1.3 The Chief Finance Officer (or suitably qualified nominated deputy)
 - 7.1.4 The Assistant Director Corporate Affairs (or suitably qualified nominated deputy)
- 7.2 Attendees:
- 7.2.1 Other members of CCG may be required in attendance as necessary.

8. QUORUM AND VOTING

- 8.1 The quorum necessary for the conduct of business shall be the chair or their deputy, 1 non-GP member of the Board and 1 clinician. Where a voting member has nominated a suitably qualified deputy, they will be entitled to vote.

9. SECRETARIAT SERVICES

- 9.1 The Assistant Director of Corporate Affairs (the Secretary) shall act as Secretary to the Committee.

9.2 Notice and Conduct of Meetings – The Secretary shall:

- 9.2.1 Call routine meetings of the Panel at the request of the Chair.

- 9.3 The agenda shall be agreed by the Chair of the Panel in consultation with the Secretary.

- 9.4 Unless otherwise agreed, notice of each meeting confirming the venue, time and date, together with an agenda of items to be discussed, shall be available to each member of the Panel, and where appropriate, other persons required to attend, no later than five [5] working days before the date of the meeting. Where appropriate, the meeting may convene by conference call.

- 9.5 Supporting papers shall be provided to members and to other attendees as appropriate, at the same time (i.e. no later than three [3] working days before the date of the meeting).

- 9.6 The Chair may call extraordinary meetings in the event of urgent business with no prior notice.

9.7 Minutes of Meetings – The Secretary shall:

- 9.7.1 Minute the proceedings and decisions of the Panel, including the names of members present and others in attendance;
- 9.7.2 Maintain and monitor a log of agreed actions and performance-manage each action to completion;
- 9.7.3 Make available the Minutes of meetings and the Log of Actions in draft format no later than three [3] working days after the date of the meeting.

10. PROCEDURAL DOCUMENTS AND CORPORATE RECORD KEEPING

10.1 The Panel shall:

- 10.1.1 Prepare, review and approve procedural documents (strategies, policies, protocols and procedures) as set out in the Procedural Document Framework i.e. Policy for Polices;
- 10.1.2 Maintain the corporate records and evidence required to demonstrate how it has discharged its duties to the CCG; and,
- 10.1.3 Pursue gaps in evidence and assurance to demonstrate the successful achievement of the Panel's objectives.

11. FREQUENCY OF MEETINGS

11.1 The Panel shall meet monthly and at such other times as the Board shall require.

12. REVIEW OF TERMS OF REFERENCE

12.1 At least once a year, the Panel shall review its own constitution, performance, and terms of reference to ensure it is operating at maximum effectiveness and recommend any changes it considers necessary to the Board for approval.

Last Review: November 2017

Next Review: By Novmeber 2018