



## LIVERPOOL LOCAL MEDICAL COMMITTEE SCHEME FOR CONSTITUTION

### 1) GENERAL

In the following scheme, unless the context otherwise requires:

~~"The Health Authority" means the Strategic Health Authority for the National Health Service area of Cheshire & Merseyside.~~

~~"Liverpool PCT" means the Primary Care Trust area for the National Health Service area of Liverpool.~~

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.

References to statutes or parts of sections of statutes shall include any statutory modifications or re-enactments thereof, or any regulations, orders or directions made thereunder for the time being enforce.

"The Committee" means the Local Medical Committee formed for the area of the Liverpool ~~PCT~~.

"The Secretary of State" means the Secretary of State for Health.

~~"GMS Practitioner on the Performers List" means a registered medical GMS practitioner whose responsible PCT from 1 April 2006 is the Liverpool PCT, and who is under agreement with the Liverpool PCT, to provide general medical services in accordance with the new GMS contract.~~

~~"Practitioner on the General Ophthalmic List" means a registered medical practitioner who is under agreement with the Liverpool PCT, to provide general ophthalmic services.~~

~~"PMS Practitioner on the Performers List" means a registered medical PMS practitioner who is in contract with, or employed as a practitioner by an organisation approved by, the Liverpool PCT, to provide personal medical services".~~

~~"Non Principal Practitioner" means a registered medical practitioner on the Performers List who is either employed as a salaried practitioner (a retaine, assistant or associate) or self-employed (locum) working within practices either in agreement with or within an organisation approved by the Liverpool PCT.~~

In accordance with Paragraph 97 of the Act (as amended by Paragraph 41, Part 4 of Schedule 4 of the Health and Social Care Act 2012 and an subsequent amendments) NHS England formally recognises the Committee formed for its area as representing the general medical practitioners in its area.

For the avoidance of doubt, the committee shall represent all General Practitioners in any given relevant capacity in the area. This shall include GPs in their capacity as members of a clinical commissioning group or members of a governing body of a clinical commissioning group. All General Practitioners must be on a Performers List of medical practitioners maintained by NHS England as providing primary medical services (as defined in Section 91 (3) of the Act, or Ophthalmic Services in the area.

The male gender shall be deemed to include the female gender, where this is not otherwise indicated.

The singular number shall include the plural and vice versa.

**2) TITLE**

The Committee shall be known as the "Liverpool Local Medical Committee".

**3) PERSONS ELIGIBLE FOR MEMBERSHIP**

- (a) The members of the Committee shall be registered medical practitioners.
- (b) Any member of the Committee shall be eligible for re-election or re-appointment.

**4) CONSTITUTION OF COMMITTEE**

The Committee shall consist of:

(a) Elected Members

- (i) ~~24 practitioners, comprising Principal practitioners (GMS and PMS) on the Performers List, whose responsible Primary Care Trust is the Liverpool PCT duly elected in accordance with the procedure hereinafter laid down, of whom one half shall retire every second year and shall be eligible for re-election.~~

28 General Practitioners comprising GMS & PMS contractors, and sessional and salaried practitioners duly elected in accordance with the procedure hereinafter laid down, of whom one half shall retire every second year and shall be eligible for re-election.

- (ii) One general ophthalmic practitioner on the ~~general ophthalmic list~~ duly elected in accordance with the procedure hereinafter laid down.

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- ~~(iii) Four non-principal practitioners on the Performers List, of whom one half shall retire every second year and shall be eligible for re-election.~~

and (if the Committee so wish):

(b) Co-Opted Members

- (i) Up to four practitioners nominated by the Acute NHS Trusts or Foundation Trusts with no more than one from each of the Royal Liverpool & Broadgreen University Hospital, the Liverpool Women's Hospital, Alder Hey Children's Hospital, and University Hospital, Aintree.
- (ii) The Director of Public Health from the Liverpool ~~PCT~~ Local Authority.
- (iii) Up to two practitioners undergoing training for general practice within the area of Liverpool ~~PCT~~ (GP Registrars/Trainees).
- (iv) The Professor of Primary Medical Care (or his/her appointee).
- (v) The Chair of Liverpool CCG (or his/her appointee) if not already an elected member of the Committee.
- (vi) Such other members as the Committee may from time to time decide:

Provided that:

- (a) The number of co-opted members in categories (b) (i), (ii), (iii), (iv) ~~and~~ (v) and (vi) above, do not exceed one-third of the total number of members of the Committee.

and

- (b) That if it does not prove possible to elect a general ophthalmic representative, ~~of practitioners on the general ophthalmic list,~~ provision shall be made for the co-option, if possible, of a general ophthalmic practitioner ~~on the general ophthalmic list.~~

## 5) METHOD OF ELECTION

- (a) The Returning Officer shall be a person, other than an elector, appointed by the Committee for the purpose and in the event of his/her absence or inability to act he/she shall appoint some person, other than an elector, to act in his/her place.
- (b) Except for the election of the first Committee under this Scheme (see item-~~14~~ ~~15~~ below), the election of one-half of the Committee shall take place during the months of February or March in every second year.
- (c) Voting shall be by postal ballot ~~or secure electronic means.~~
- (d) (i) The Returning Officer shall prepare a list of the persons entitled to vote (and their addresses) and such lists shall include all those known to the Returning Officer to have been GMS, PMS, ~~GOP or salaried or locum practitioners on the Performers list (and who are working in a Liverpool practice) or non-principal practitioners on the list, or practitioners on the general ophthalmic list~~ on the first day of January of the year in which the election takes place and ~~such persons shall be referred to as "the~~

electors".~~the persons whose names are on such list are in this Scheme referred to as "the electors".~~

- (ii) The said list of electors shall also show in respect of every person whose name appears thereon whether he/she is a GMS, PMS, ~~GOP, Salaried or Sessional practitioner on the Performers list. —or non-principal practitioners on the list, or practitioners on the general ophthalmic list.~~
  - (iii) It shall be the responsibility of each GMS ~~or PMS, GOP, Salaried or Sessional practitioner on the Performers list~~ ~~practitioner on the list, non-principal practitioner, or practitioner on the general ophthalmic list~~ to ensure that his/her name is included in the said list of electors.
  - (iv) Only those persons whose names appear on the said list of electors shall be entitled to vote for candidates for election under item 4 (a) (i) (either GMS or PMS ~~contractor or Salaried or Sessional practitioner~~ ~~practitioners~~ on the list) and only those whose names appear on the said list as ~~general ophthalmic practitioners, —on the general ophthalmic list~~ shall be entitled to vote for candidates for election under item 4 (a) (ii). ~~and only those whose names appear on the said list as non-principal practitioners shall be entitled to vote for candidates for election under item 4 (a) (iii).~~
- (e) The Returning Officer shall send written/~~electronic~~ notice of the election to each voter and such notice shall be sent so as to be delivered to the elector not less than 14 clear days before the date of the election. Such notice shall:
- (i) State the date of the election.
  - (ii) State whether the elector is entitled to vote as a ~~general practitioner under 4 (a) (i) or a general ophthalmic practitioner under 4 (a) (ii)~~ ~~GMS or PMS practitioner, a non-principal practitioner on the list, or as a practitioner on the general ophthalmic list.~~
  - (iii) State the date by which nominations for election must be submitted to the Returning Officer.
  - (iv) Set out the provisions with regard to nomination contained in the next succeeding paragraph hereof.
  - (v) Enclose a nomination form.
- (f) Every candidate for election should be nominated by at least two electors who shall ~~be entitled to vote as a general medical practitioner on the Performers list, or, (in the case of the candidate for election nominated under item 4 (a) (ii)) be a general ophthalmic practitioner on the Performers list~~ ~~entitled to vote as a GMS or PMS practitioners on the list for which such candidate is nominated, or, (in the case of the candidate for election nominated under item 4 (a) (ii) be practitioners on the general ophthalmic list), (or in the case of the candidate for election nominated under item 4 (a) (iii) be non-principal practitioner)~~ and every

nomination form must be accompanied by a statement in writing signed by the candidate that, if elected, he/she is prepared to accept office. A candidate nominated for election under item 4 (a) (i) ~~or (ii) or (iii)~~ shall be a person entitled to vote.

- (g) If the number of nominated candidates qualified for election in accordance with item 4 (a) (i) and/or 4 (a) (ii) ~~and/or 4 (a) (iii)~~ of this scheme does not exceed the number of vacancies, the Returning Officer shall declare those candidates to be elected and 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.
- (h) 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/she is entitled to vote, but he/she may not cast more than one vote for any one candidate.
- (i) Voting shall be in accordance with the following rules:
  - (i) Separate voting papers shall be prepared by the Returning Officer containing the names of the duly nominated candidates:
    - (I) Who are ~~general medical practitioner of the Performers list~~ ~~GMS or PMS practitioners on the list.~~
    - ~~(III) Who are non-principal practitioners.~~
    - (II) Who are ~~general ophthalmic practitioners on the Performers list.~~ ~~practitioners on the general ophthalmic list.~~
  - (ii) Each voting paper shall contain:
    - (I) A statement of the number and identity of candidates for whom the elector may validly vote.
    - (II) A statement that the same must be returned to the Returning Officer so as to reach him/her by the date of the election (which shall be specified in the voting papers and shall be not more than 14 days after the issue of such papers).
- (j) The Returning Officer shall send to each elector a voting paper containing the names of those candidates for whom he/she is entitled to vote.
- (k) A voting paper shall be invalid if:
  - (i) The elector has purported by it to cast more votes than is permitted under item 5 (h).
  - (ii) It is not signed.
  - (iii) In any other respect it does not comply with this Scheme or is marked in such a manner as to cause uncertainty as to the candidates for whom the elector desires to record his/her vote, except that the Returning Officer

may, if he/she 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.
- (l) 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 in each category according to the number of votes which each has received, the person receiving the greatest number of votes being placed highest on the return.
- (m) If the votes received by any two or more candidates are equal and the addition of one vote to any one 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.
- (n) Any question as to the validity of any nominations or voting paper or otherwise in connection with an election, shall be determined by the Returning Officer.
- (o) The Returning Officer shall forthwith give notice in writing of the result of the elections to all candidates.
- (p) Where any document is, under this Scheme, required to be sent to a practitioner, it shall be deemed to have been duly sent if it has been delivered or posted, **electronically or otherwise**, direct to the address of the elector on the list of electors prepared in accordance with item 5 (d) (i).
- (q) No election shall be invalid by reason of any mis-descriptions or non-compliance with the provisions of this Scheme, 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 Scheme to be despatched by post, if the Returning Officer is satisfied that the election was conducted substantially in accordance with the provisions of this Scheme.

6) **FIRST MEETING OF THE COMMITTEE**

- (a) 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.
- (b) 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 instruction for their decision to be implemented.

7) **UNFILLED VACANCIES**

Where the number of persons elected under item 4 (a) (i) or 4 (a) (ii) ~~or 4 (a) (iii)~~ is less than the number of persons mentioned in such paragraphs by reason that no or insufficient qualified candidates have been nominated, the Committee may within three

months after its Constitution appoint duly qualified persons to fill the vacancies.

**8) APPOINTMENT OF SECRETARY**

The Committee shall appoint a person to act as Secretary to the Committee, and in the event of the death, resignation or removal from office of the Secretary so appointed, the Committee shall appoint a person to act as Secretary in his/her place; and any person appointed as Secretary shall forthwith notify his/her appointment to the **NHS England and Liverpool CCG**. ~~Secretary of State and the PCT~~. If the person appointed as Secretary is not a registered medical practitioner, the Committee shall nominate one of its members who is in general **medical** 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 and the name of the person so nominated shall be notified to the electors in the same manner as is prescribed in item 6 (b) above.

**9) APPOINTMENT OF HONORARY TREASURER**

The Committee shall appoint a person to act as Honorary Treasurer (such officer to be a member of the Committee, if necessary by co-option) and in the event of the death, resignation or removal from office of the Honorary Treasurer so appointed, the Committee shall appoint a person to act as Honorary Treasurer in his/her place.

**10) APPOINTMENT OF CHAIRMAN**

The Committee shall appoint a person to act as Chairman (such officer to be a member of the Committee) and in the event of the death, resignation or removal from office of the Chairman so appointed, the Committee shall appoint the Vice-Chairman to act as Chairman in his/her place.

**11) APPOINTMENT OF VICE-CHAIRMAN**

The Committee shall appoint a person to act as Vice-Chairman (such officer to be a member of the Committee) and in the event of the death, resignation or removal from office of the Vice-Chairman so appointed, the Committee shall appoint a person to act as Vice Chairman in his/her place.

~~APPOINTMENT OF HONORARY EDITOR~~

~~The Committee may appoint, from amongst their members, a person to act as Honorary Editor to the Committee.~~

**12) OFFICE ACCOMMODATION AND CLERICAL ASSISTANCE**

The Committee shall be empowered to make arrangements for such office accommodation and clerical assistance as may be required.

**13) QUORUM**

One-third of the number of members of the Committee, or if one-third is not a whole number, the next whole number above one-third shall form a quorum of the Committee, provided that at least three-quarters of the members present shall be

elected representatives of ~~GMS or PMS~~ general medical practitioners on the Performers list, and elected (or co-opted) representatives of general ophthalmic practitioners on the Performers list. ~~general ophthalmic list, and elected non-principals on the list.~~

**14) TERM OF OFFICE**

The elected members of the Committee shall hold office for four years, save that after the first election one-half shall hold office for two years. In the first election the top ~~12~~ 14 practitioners on the voting list shall hold office for four years and the next ~~14~~ 12 practitioners on the voting list shall hold office for two years.

**15) DISQUALIFICATION OR RETIREMENT OF MEMBERS**

A member of the Committee shall cease to be a member, thereby creating a casual vacancy, if:

(a) Having been qualified for election under paragraph 4 (a) (i) he/she ceases to be a general medical practitioners on the Performers list, entitled to vote. ~~GMS or PMS practitioner on the list entitled to vote.~~

(b) Having been qualified for election under paragraph 4 (a) (ii) he/she ceases to be a general ophthalmic practitioner on the ~~general ophthalmic~~ Performers list.

~~(c) Having been qualified for election under paragraph 4 (a) (iii) he/she ceases to be a non-principal practitioner.~~

(~~d~~c) He/she has been absent from three consecutive meetings of the Committee unless the Committee, being satisfied that his/her absence was due to illness or other reasonable cause, resolve that he/she shall continue to be a member of the Committee.

(~~e~~d) He/she resigns his/her office by notice in writing signed by him/her and delivered to the Secretary of the Committee which shall take effect immediately.

**16) METHOD OF FILLING CASUAL VACANCIES**

(a) Where by reason of the resignation, death or disqualification of a member of the Committee elected under item 4 (a) a casual vacancy in the membership of the Committee occurs, the Committee may, within three months after its occurrence, fill the vacancy by the appointment of a general medical ~~GMS or PMS~~ practitioner on the Performers list, ~~a non-principal practitioner~~, or a general ophthalmic practitioner on the ~~general ophthalmic~~ Performers list according to the classification of the member of the Committee whose registration, death or disqualification has caused the vacancy. The person appointed to the Committee to fill a casual vacancy arising by reason of the resignation, death or disqualification of a member elected under paragraph 4 (a) ~~(i) (ii) or (iii)~~ shall be a person entitled to vote.

(b) A casual vacancy caused by the resignation, death or disqualification of a member of the Committee appointed under item 4 (b) may within three months of its occurrence be filled by a further appointment of a practitioner in the relevant



category.

- (c) Pending any such appointment, the proceedings of the Committee shall not be invalid by reason of a vacancy.
- (d) A person so appointed shall hold office for the remainder of the period for which the member in whose place he/she is appointed would have been entitled to hold office.

17) **APPOINTMENT OF OFFICERS**

- (a) The appointment of a Chairman, Vice-Chairman, Secretary, **and** Honorary Treasurer ~~and Honorary Editor~~, shall be made by the elected members of the Committee each of whom so appointed shall hold office for 4 years or until his/her successor is appointed.
- (b) In the event of a casual vacancy occurring in the office of Chairman, Vice-Chairman, Secretary, **or** Honorary Treasurer ~~or Honorary Editors~~, the Committee shall as soon as conveniently ~~thereafter may be~~ after the vacancy occurs choose one of its elected members to fill such vacancy unless by a majority vote of the elected members of the Committee, it is decided that such office be not filled. An officer so appointed shall hold office for the remainder of the period for which the person in whose place he/she has been appointed would have been entitled to hold office.

18) **LMC EXECUTIVE**

The Chairman, Vice-Chairman, Secretary, **and** Honorary Treasurer shall constitute the LMC Executive, which shall be a sub-committee of the main Committee. The LMC Executive shall be empowered to conduct the business of the Committee in the months that the Committee does not meet. Any decisions made will be presented to the Committee at its next meeting. A quorum of the Executive shall be three-quarters of the sub-committee.

19) **DISCLOSURE OF INTEREST**

If an Officer of the Committee or a Committee member sits on, or works for any stake holder 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 when the contract, propose contract or other matter is a subject for consideration, he/she 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 will advise whether or not the matter should be declared.

20) **INFORMATION TO BE SENT TO NHS ENGLAND THE STRATEGIC HEALTH AUTHORITY AND THE LIVERPOOL CCGPCT**

The Secretary to the Committee shall, as soon as may be, inform **NHS England and**

~~Liverpool CCG the Strategic Health Authority and the Liverpool PCT~~, of the names and addresses of all newly elected, appointed and/or co-opted members of the Committee and of any casual vacancies in the membership of the Committee which may from time to time occur, and of the names and addresses of the persons, if any, appointed to fill those vacancies.

21) **ROLE OF THE COMMITTEE IN RELATION TO LIVERPOOL CCG**

The Committee is recognised by Liverpool CCG as a representative body representing all Liverpool GPs. Being a member of the CCG Governing Body shall not be a reason for being disqualified from membership of the Committee. No Officer member of the LMC shall be an elected member of the CCG Governing body. The Secretary shall subject to the CCG Constitution, be in attendance at the CCG Governing Body, but shall not be a voting member of that body, nor of any CCG Sub Committees.

22) **FINANCIAL YEAR**

The financial year shall be the period from the first day of April to the thirty-first day of March in the year next following.

23) **ANNUAL REPORT**

The Committee shall prepare in each year, a report of their proceedings since the publication of the last report, together with a statement of accounts and this report and statement of accounts shall be circulated to those on the list of electors not later than three months after the Committee shall have approved the same.

24) **ORDINARY MEETINGS OF THE COMMITTEE**

- (a) An ordinary meeting of the Committee shall be held not less frequently than once each month, except for the months of January and August, unless otherwise specifically directed by resolution of the Committee.
- (b) The meetings of the Committee shall be convened by summons which shall be issued by the Secretary and shall be delivered or posted so as to reach the last known place of the abode or practice address of each member of the Committee six clear days before the day of the meeting except an emergency meeting in which case one clear day's notice shall be given.

25) **EXTRAORDINARY MEETINGS OF THE COMMITTEE**

An extraordinary meeting of the Committee shall be summoned on the requisition in writing to the Secretary by not less than a quorum of members of the Committee or on the direction of the Chairman and shall be notified by the Secretary in the manner provided for the notification of ordinary meetings.

26) **VOTING**

Every question arising at a meeting of the Committee shall be determined by a majority of the votes of the members of the Committee present and voting on the question.;  
~~provided that where by a majority of the whole Committee voting on the motion of any~~

~~member that the question relates exclusively to general medical practice, or PMS practice, only the 24 elected members of the Committee (see item 4 (a) (i)) shall be entitled to vote on that question.~~

27) **EXTRAORDINARY GENERAL MEETING OF THE ELECTORATE**

- (a) If the Chairman so decides or if one-half of the elected members of the Committee so decide and inform the Chairman of that decision at a meeting of the Committee or in writing to the Secretary, or if 25 members of the electorate request in writing that an extraordinary general meeting of the electorate shall take place, such meetings shall be held at a time and place to be determined by the Committee and the Secretary shall inform the electorate and all members of the Committee accordingly, provided that the notice shall state the business to be transacted at such meeting.
- (b) It shall be proper at any extraordinary general meeting for any member of the electorate to raise matters and make recommendations that such matters shall be referred to the Local Medical Committee for consideration and any recommendations so made and approved by a majority of the members present and voting at such meetings shall be included in the Agenda for the meeting of the Committee next following.

28) **AMENDMENT OF SCHEME**

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

- (a) Proposals for such amendment shall be sent to the Secretary 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 7 clear days notice of such proposals shall have been received by the members of the Committee.

After such proposals have been considered by the Committee:

- (b) The Secretary to the Committee shall, if requested so to do by not less than two-thirds of the members of the Committee or 25 of the electors, embody in a letter any proposed amendment of this Scheme of which the Committee has approved and circulate such letter to all practitioners on the electoral role and all practitioners entitled to elect members of the Committee under item 4 (b) with an invitation to such practitioners to submit to the Secretary their comments on such proposals within 14 days after the date of the despatch of such letters.
- (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 Secretary 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 ~~the Health Authority~~ NHS England to such amendment shall be sought by the Secretary of the Committee.
- (d) Any amendment duly carried under item ~~28 27~~ (c) of this paragraph of which ~~the NHS England Health Authority~~ shall signify its approval shall be notified by the

Secretary to the Committee at the next meeting of the Committee and thereupon such amendment shall forthwith take effect.

- (e) The Secretary shall notify the proposer of any amendment duly carried under item ~~28 27~~ (c) of this paragraph of the decision of ~~NHS the Strategic Health Authority and the Liverpool PCT~~ thereon forthwith upon the communication of such decision to him/her.

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