

North East Locality Group Election for : Locality Clinical Director To commence January 2019 – one post

Election Pack

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The NELG Constitution states that:

a) The Locality will appoint a Chair and one Deputy for 5 sessions of clinical leadership per week, subject to a 2/3 year tenure (allowing for succession planning). (Note – due to Oxfordshire Care Alliance forming, the post term will be for one year initially). The sessions will be split 3 x LCD + 2 x Deputy.

Eligibility to take up a Locality Clinical Director or Deputy post is open to any GP within the Locality who is either a partner or holds a permanent contract with a member practice. Candidates will need to demonstrate that they can meet the competencies required of the post (Job description and role responsibility available). There will be a selection process to determine eligibility to stand as a Locality Clinical Director or Deputy, which will be overseen by OCCG. Selection of eligible candidates will then be made via the voting process outlined above. The OCCG will then formally appoint to the role.

The process of appointing a new Clinical Director will be preceded by widespread advertising of the opportunity to stand for the post to all doctors within the Locality, via the Locality main meetings and email.

b) The Locality will have responsibility to approve and to amend this Agreement. It will require a vote in favour of at least 70% of the weighted vote membership to amend the Constitution but a system will be developed to allow those unable to attend to vote "in Absentia" by the Chair of the Management Group receiving in writing notice of their voting intentions. This will then be ratified by OCCG Governing Body.

1. Summary of process

The North East Locality Group needs to elect a Locality Clinical Director (LCD) due to the current post reaching completion of term.

Julie-Anne Howe is acting as Election Manager.

- 2. The election is open to "An appropriately qualified clinician who is actively supported by member practices within the locality"
- 3. Candidates may stand for one post.
- Candidates should send their expressions of interest on the appropriate separate form by 5pm Friday 2 November 2018.
- 5. A panel made up of the OCCG Chair, a Locality Clinical Director and LMC representative will assess whether the candidates meet the competence requirements for the post and can stand for election.
- 6. The Election Manager will e-mail all NE practices around 12 November 2018 with the names of confirmed candidates, their expressions of interest and voting details.
- 7. Practices should consider which candidate they would prefer for this post.
- 8. Practices should cast votes at the locality meeting on 12 December 2018, or by arrangement they may e-mail in advance.

The election of the Locality Clinical Director will follow a formal process of application, review and vote by the membership. A majority vote of 70% will apply.

For the deputy role they may show flexibility in applying the criteria given the opportunity for development the post offers.

Practices should consider which candidate they would prefer for each of the posts.

Practices may vote and respond to the Election Manager by email.

9. Timeline –		
10 th October 2018	Verbal call by Election Manager for Expressions of Interest.	
October 2018	Verbal EoIs received and papers sent	
October 2018	Written EoI received for consideration	
2 November 2018	Closing date for expressions of interest	
November 2018	Panel established and assesses whether candidates meet competency requirements. A competency interview will be required.	
12.11.18 with Voting in by 23.11.18	The Election Manager will circulate the list of candidates and their expressions of interest to Practice Leads at least two weeks before the Election Meeting.	
w/c 3 .12.18	The Election Manager will calculate the weighted votes for each candidate. The candidate receiving most weighted votes will be appointed.	
12 th December 2018	Practices vote at NE main Locality meeting with their responses collected by the Election Manager (this is called the Election meeting)	
	Election Manager supports candidate through HR process, ensuring all necessary papers are in place. HR process can take 4-6 weeks	
	A handover period will be available if required, by the standing LCD.	
1 January 2018	Successful candidate formally takes up the post – subject to availability and arrangements.	
	The appointment will be formally confirmed by OCCG and take effect from a date mutually agreed between the successful candidate and	

the OCCG Accountable Officer.

The previous incumbent will normally continue in post until that date to ensure continuity. Where there is a change of incumbent, the OCCG Accountable Officer and other Locality Clinical Directors will ensure appropriate induction and handover.

Section 3

JOB DESCRIPTIONs - Locality Clinical Director (approved JD)



Section 4 -

Types of Interest

Type Interest	of	Description
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 owner interest), 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
		In secondary employment
		In receipt of secondary income 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
		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)
Non- financial profession interests	nal	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, 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 National Institute for Health and Care Excellence (NICE)

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 or 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 groups with an interest in health

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, this should include:

- Spouse / partner
- Close relative e.g. parent, grandparent, child, grandchild or sibling
- Close friend
- Business partner