

**CONSTITUTION**  
**NEWCASTLE AND NORTH TYNESIDE LOCAL MEDICAL COMMITTEE**  
**JUNE 2024 (ESTABLISHED 1994)**

**PREAMBLE**

This document sets out the Constitution of the Newcastle and North Tyneside Local Medical Committee (the "Committee") for the areas Newcastle and North Tyneside.

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.

**RECOGNITION**

In accordance with section 97 of The Act (as amended by paragraph 41, Part 4 of Schedule 4 of the Health and Social Care Act 2012 and any subsequent amendments), NHS England formally recognises the Committee formed for its area as representing the general medical practitioners (GPs) in its area. Furthermore, the Committee is recognised by its members by virtue of a separate authority nominating the Committee as representative of GPs in the manner as set out in this Constitution.

For as long as the Committee is recognised by NHS England as being representative of the practitioners in an area, and/or for as long as the Committee carries a separate and distinct authority from its members, then this Constitution shall not be rendered invalid by changes to the structures and boundaries of the NHS.

**FUNCTIONS**

**1. Statutory Functions**

The LMC must be consulted on the following issues:

- Administration of GP Contracts under The NHS (GMS Contracts) Regulations 2004
- The Pharmaceutical Services Regulations (e.g. applications to dispense or provide pharmaceutical services)
- The Statement of Financial Entitlements
- Professional Conduct and Complaints

In addition, the LMC has representative functions with a variety of other local organisations:

- a) Integrated Care Boards
- b) Local Hospital Trusts
- c) Regional Team of NHS England
- d) Local Authorities
- e) North East Commissioning Support Unit
- f) other local craft committees e.g. Local Pharmaceutical Committee

It also has a representative role with the General Practitioners Committee (GPC) to allow local opinions to be heard at a national level through the LMC Conference.

**2. Non-Statutory Functions**

The LMC has a number of non-statutory roles relating to the Profession on both a collective and individual basis. The LMC upholds the core values of the Profession in terms of:

## **Equity and fairness, openness and equal opportunities.**

It also offers a pastoral role to GPs for a range of professional issues: **dispute resolution, remuneration, terms of service, complaints, premises, partnerships, employment and health problems.**

Save where the Committee shall otherwise determine the services provided by the Committee shall not be provided to practitioners who do not make a full contribution in accordance with this Constitution.

For the avoidance of doubt, the Committee shall represent all general practitioners (GPs) in any given relevant capacity in the Area. This shall include GPs in their capacity as members of an Integrated Care Board or members of a governing body of an Integrated Care Board.

## **INTERPRETATION**

The paragraph headings shall be taken into account in the interpretation of this Constitution and where the context so requires

- the male gender shall be deemed to include the female gender and vice versa
- the singular number shall include the plural number and vice versa
- references to statutes or parts or sections of statutes shall include any statutory modifications or re-enactments thereof or any regulations orders or directions made there under for the time being in force

## **DEFINITIONS**

The Act	The National Health Service Act 2006 and subsequent amendments.
Administrative Expenses of the Committee	Including travelling and subsistence allowances payable to members of the Committee.
Appointed Secretary	A person employed by the Committee to act as its Secretary and where the context so requires the words “appointed” and “appointment” shall be construed accordingly.
Area	The areas of Newcastle and North Tyneside
BMA	The British Medical Association
Committee	The Newcastle and North Tyneside Local Medical Committee recognised by NHS England (or any successor organisation) as formed within the Area and representative of all GPs, as defined in section 91 of the Act, performing primary medical services in the area for which the Committee was formed.
Committee Member	A person elected or co-opted onto the Committee in accordance with the provisions of this Constitution together with the

	Secretary who if an Appointed Secretary shall be a non-voting member.
Committee Year	Shall conclude on 31 March in each year and where an Officer of the Committee or a Committee Member is elected or co-opted for a term of office (whether the term shall be for one year or more) the said term shall conclude on the relevant 31 March.
GMC	The General Medical Council
GPC Voting Register	A list of Represented Members (including medically qualified LMC Officers) who are eligible to stand, vote or nominate another Represented Member as a GPC regional representative.
Integrated Care Board <b>(ICB)</b>	The body corporate known as an Integrated Care Board, and any successor organisation, established in accordance with Section 19 of Part 1 of the Health and Care Act 2022.
Medical Register	The list of registered medical practitioners compiled and held by the GMC.
NHS England	The commissioning organisation, recognised by the Health and Social Care Act 2012 (or successive Acts) on behalf of the NHS, and responsible for commissioning primary care services from, and holding contracts with, GP practices or organisations providing primary medical services (including single handed GPs) or any successor organisation.
Officers of the Committee	The Chair, Vice Chair and Secretary jointly and flexibly.
Performers Lists	The lists maintained by NHS England of medical practitioners providing primary medical services (as defined in section 91(3) of the Act) or ophthalmic services in the Area.
Register of Members	The combined Register of Represented Members and Committee Members which shall be maintained in several parts as necessary for administrative purposes.
Represented Members	All GPs, including those GPs sitting on a governing body of an ICB (or any successor organisation) or a GP sitting in his capacity as an ICB member, as defined in section 91

of the Act, performing primary medical services in the area for which the Committee was formed.

Returning Officer

A person whose name is not included on any part of the Register of Members invited by the Committee to act, in person or through a deputy, at elections for Committee Members.

Secretary

A person elected under Clause 3.8 or appointed under Clause 6.1 by the Committee to act as its Secretary.

## **1. THE COMMITTEE**

### **1.1 Membership**

The Committee shall consist of:

#### **1.1.1 Elected Members**

20 Represented Members who subject to the next following paragraph and to the disqualification provisions in clauses 1.6.1 to 1.6.5 are elected in accordance with the provisions of this Constitution. Where the context so requires the expression "Elected Members" shall include those persons co-opted to fill a vacancy in accordance with clause 1.4

An Elected Member's eligibility to stand for election shall in addition to the disqualification provisions in clauses 1.6.1 to 1.6.5 be dependent on his having paid at the time of his nomination all current Statutory and Voluntary Levies due to the Committee together with any arrears that may be outstanding, and the Returning Officer shall verify the fact of such payment before circulating electors who are not disqualified with election nomination papers. The requirement to have paid the current levies together with any arrears shall not apply to Co-opted Members.

#### **1.1.2 Co-opted Members**

The committee may co-opt additional Committee Members whom it may consider to provide additional expertise for its functioning. Those co-opted individuals may be either clinicians or other health service professionals, provided always that the number of Co-opted Members does not exceed one quarter of the number of the elected Committee Members. A co-opted GP Registrar shall be a voting member.

1.3 Term of Office A period during which an Officer of the Committee or a Committee Member holds office concluding at the end of the Committee Year.

1.4 Vacancies Where the number of persons elected under paragraph 1.1.1 is less than the number of persons mentioned in such paragraph by reason that no or insufficient qualified candidates have been nominated the Committee may within three months after the election co-opt persons who are not disqualified to fill the vacancies.

A "casual" vacancy will occur on the resignation, suspension from or removal from the Performers Lists or death of an Elected Member of the Committee.

Within three months of a vacancy occurring the Committee shall fill the same by the co-option of a practitioner who as far as possible represents the same class of practitioners as the person in post prior to the vacancy arising.

Pending the filling of any vacancy the proceedings of any Committee shall not be invalid by reason of such vacancy.

A person co-opted to a vacancy shall hold office for the remainder of the period for which the person in whose place he is co-opted would have been entitled to hold office, except if the remainder of the period is less than one year then the period of the office shall be the remainder plus two years.

1.5 Retirement A Committee Member whether elected or co-opted may retire on giving written notice delivered to the secretary and the retirement shall take effect on the date specified in the notice if a date is given or if not on the date when the notice is received by the Secretary.

1.6 Disqualification/Suspension 1.6.1 Disqualification

A Committee Member shall be disqualified if:

1.6.1.1 they cease to be a registered medical practitioner or is suspended from the Medical Register

1.6.1.2 they cease to perform general medical services under any primary medical services contract under The Act or being a performer of such services, whose name appears in the Medical Register either advises NHS England that he no longer wishes to be represented by the Committee.

1.6.1.3 They have had their name removed from a Performers List and has not subsequently had his name included in such a list

1.6.1.4 They are suspended from a Performers List

1.6.1.5 if within one month of receiving a due call they fail to pay to the Committee any current Statutory or Voluntary Levy due to the Committee together with any arrears that may be outstanding

1.6.1.6 they fail to disclose a pecuniary interest or other significant interest in a matter which is the subject of consideration at a meeting of the Committee or of one of its Sub-committees and takes part in the consideration or discussion of that matter or votes on any question with respect to that matter or acts in any way contrary to the anti-conflict policy adopted from time to time by the Committee.

1.6.1.7 Members are required to attend a **minimum of 7 out of 10 scheduled Committee meetings per Committee Year.** If the Officers of the Committee excluding the absent Committee Member are satisfied that the absence was due to a reasonable cause and that the absent Committee Member will be able to resume attending meetings of the Committee within such period as it considers reasonable.

A Co-opted Member shall be disqualified if he ceases to hold the office or qualification which entitled him to be a member of the class of Co-opted Members.

If any Committee Member's registration with the GMC is suspended, he shall not be entitled to resume his membership of the Committee for the remainder of the period for which he was originally appointed but he shall be permitted to stand afresh in the next following election if the suspension has

ended prior to the date when the Returning Officer sends a written notice of election to each elector.

#### 1.6.2 Suspension

A Committee Member shall be suspended if:

1.6.2.1 he fails to notify the secretary of any GMC referral.

1.6.2.2 in the opinion of the committee, the reason for referral to the GMC is of such a nature or seriousness that it prejudices his standing as a Committee Member.

1.6.2.3 he commits any act that, in the opinion of the committee, is of such a nature or seriousness that it prejudices his standing as a Committee Member.

The suspended Committee Member will have the right of appeal to the regional committee, within 28 days, whose opinion shall be acceptable by both parties. In addition, the suspended Committee Member shall be paid any monies due to him as if he had not been suspended. The suspended Committee Member will be re-instated when the Committee are of the opinion that the reason for suspension is no longer applicable.

1.6.2.4 the Committee Member (in the opinion of the Committee) brings the Committee into disrepute or acts in a manner that is contrary to the interests of the Committee; for the avoidance of doubt this clause shall also apply to the removal or suspension of Chair, Vice Chair and Secretary of the Committee.

## **2. ELECTIONS**

### 2.1 Constituencies

The Committee may, if it wishes, divide the area into a number of Constituencies for administrative and electoral purposes. If it does so it shall use its best endeavours to ensure, across each Constituency, the fair and equitable representation of each class of Represented Member.

2.2 Term of Office

Elected Members shall hold office for a term of four years save that after the first election of a new Committee one half (to be determined by lot) shall hold office for two years.

2.3 Frequency

Save as provided in the case of a new Committee the election of one half of the Committee shall take place in the same month in every second year and Elected Members shall commence their term of office on the next following 1 April.

2.4 Method

Voting shall be by postal or electronic ballot, as determined by the Returning Officer of those qualified Represented Members whose names appear in the Performers List of the Area recognised by NHS England on 1 January in each year that an election takes place and subject to the next following paragraph the persons who are so qualified and whose names are so included on the Performers' List are referred to as "the electors".

A Represented Member shall not be eligible to vote in or stand in an election if he is disqualified under the provisions of paragraphs 1.6.1 to 1.6.6 and as to the provisions of paragraph 1.6.5 the Returning Officer shall verify the fact of payment or otherwise before circulating qualified electors with election nomination papers.

The Returning Officer shall send written notice of the election to each elector 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.

Each notice shall

- state the date of the election
- state the number of vacancies
- state the date by which nominations must be submitted to the Returning Officer
- set out the nomination provisions, as set out below, and
- enclose a nomination form

Each candidate shall be nominated by at least two electors and each nomination form

must be accompanied by a statement in writing that he is prepared to accept office.

If the number of nominated candidates qualified for election in each category where there are vacancies does not exceed the number of vacancies the Returning Officer shall declare those candidates to be elected. In other cases, a vote shall be taken.

#### Method of Voting

- (a) Each voter shall have one transferable vote.
- (b) The voter in recording his/her vote on a printed voting paper or electronic ballot as determined by the Returning Officer:
  - i) must place on his/her voting paper or online ballot the figure 1 opposite the name of the candidate for whom he/she votes;
  - ii) may indicate the order of his/her preference for as many other candidates as he/she pleases by placing against their respective names the figures 2,3,4 and so on.

#### Sorting the Papers

- (a) The Returning Officer shall utilise electronic ballot software or examine the papers and shall sort them into parcels according to the first preference recorded for each candidate, rejecting any that are invalid.

#### Counting the Papers

- (a) The Returning Officer shall utilise electronic ballot software or count the papers in each such parcel and shall credit each candidate with a number of votes equal to the number of valid papers on which a first preference has been recorded for that candidate.
- (b) If the vote for any one candidate equals or exceeds the votes of all the other candidates combined, that candidate shall be declared elected.

- (c) (i) If not, the Returning Officer shall exclude together the two or more candidates with the least votes if the total vote of such two or more candidates does not exceed the vote of the candidate next above; otherwise he/she shall exclude the candidate having the fewest votes.
- (ii) The electronic votes or papers of the excluded candidates shall be transferred to whichever of the continuing candidates is marked by the voter as his/her next available preference, and the votes thus transferred shall be added to the first-preference votes of those candidates.
- (iii) Any electronic vote or paper on which no further preference is marked shall be set aside as non-transferable and the total of such papers shall be recorded.
- (iv) This process shall be continued until the vote for some one candidate exceeds or equals the votes for all other continuing candidates combined, and that candidate shall then be declared elected.

#### Ties

- (a) If, when a candidate has to be excluded, two or more, candidates have each the same number of votes and are lowest on the poll, the candidate with the lowest number of votes at the earliest stage in the count, at which the candidates in question had an unequal number of votes, shall be excluded.
- (b) If two or more candidates are still equal and lowest, the Returning Officer shall decide by lot which shall be excluded.

An electronic vote or voting paper shall be invalid if:

- i) the elector has purported by it to cast more votes than is permitted;

- ii) it is not signed if a paper ballot;
- 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 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 in connection with which the uncertainty arises;
- iv) it is received by the Returning Officer after the date of the election.

Any question as to the validity of any nomination or voting paper or otherwise in connection with an election shall be determined by the Returning Officer.

The Returning Officer shall immediately give notice in writing of the result of the elections to all candidates.

Where any document is, under this scheme, required to be sent to a practitioner, it shall be deemed to have been delivered 'or posted, direct to the address or email address of the elector on the list of electors.

No election shall be invalid for reason of any mis-description 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 dispatched by post, or email non-delivery, if the Returning Officer is satisfied that the election was conducted substantially in accordance with the provisions of this scheme.

### **3 MEETINGS**

#### **3.1 First Meeting**

The Returning Officer shall give not less than seven days clear notice to the Committee Members of the time and place of the first meeting. The Secretary shall inform the electors of the identity of each of the Committee Members.

#### **3.2 Quorum**

A quorum shall be one third of the Committee Members but if one third is not a whole number the next whole number above one third.

- 3.3 Voting
- Only Committee Members may vote at Committee meetings. Committee Members to include those duly elected or appointed under sections 1.1.1; 1.1.2; and 1.4.
- If at any Committee meeting there is an equality of votes the presiding Officer of the Committee shall have a second and casting vote.
- 3.4 Observers
- The Committee may in its absolute discretion invite such persons as it thinks fit to attend the whole or any part of any Committee meeting; observers will not have voting rights.
- 3.5 In Camera
- The Committee may require all or any of the invited observers to withdraw from any meeting if it wishes to consider any business in camera. Where confidential minutes are taken they, and all copies, will be retained by the Secretary.
- 3.6 Chair
- The Committee shall elect a Chair from amongst its number. If for any part of any meeting neither the Chair, Vice-Chair nor the Secretary be present, the Committee shall elect another of their number to act as the presiding officer for the duration of that meeting.
- 3.7 Vice-Chair
- The Committee shall elect a Vice-Chair from amongst its number. If for any part of any meeting neither the Chair, Vice-Chair nor the Secretary be present, the Committee shall elect another of their number to act as the presiding officer for the duration of that meeting.
- 3.8 Secretary
- The Committee shall, from time to time and for such period and upon such terms as they may determine, elect from amongst their member a person to act as Secretary. Alternatively, the Committee may decide to appoint a Secretary.
- 3.9 Minutes
- The Secretary on behalf of the Committee shall keep minutes of each meeting which shall be drawn up and submitted for agreement at the next meeting of the Committee where, if agreed, they shall be signed by the person presiding over it.

#### **4. SUB-COMMITTEES**

#### 4.1 Executive

The Committee may appoint an Executive Sub-committee which shall comprise the Chair, Vice Chair and Secretary and up to two other Committee Member (or their deputies) preferably appointed so as to reflect the distribution and classes of Represented Members in the Area.

The Sub-committee shall have power to co-opt such other Committee members as may be necessary to assist with the Sub-committee's duties.

The Sub-committee shall consider matters referred to it by the Committee and by the Officers of the Committee.

The Sub-committee shall have power to act on behalf of the Committee between Committee meetings and shall circulate with the agenda for each Committee meeting and minutes of its own meetings held since the circulation of the last Committee agenda.

A quorum for the Sub-committee shall be one third of its membership but if one third is not a whole number the whole number immediately above one third.

#### 4.2 Regulations and Directions

The Committee may appoint a Regulations Sub-committee which shall comprise the Chair, Vice-Chair and Secretary together with the immediate past Chair of the Committee provided that such past Chair is a member of the Committee.

The Sub-committee shall have power to co-opt a past Vice Chair and/or a past Secretary as may be necessary to assist with the Sub-committee's duties, provided that the persons co-opted are at that time Committee Members.

The Sub-committee shall in respect of matters referred to it by the Committee, by an Officer of the Committee, or by the Executive Sub-committee, act on behalf of the Committee in respect of matters arising in Regulations and Directions which affect the contractual arrangements of Represented Members and which are of a particularly confidential nature.

The Sub-committee shall submit an annual report on its proceedings on each year ending 31 March for consideration by a Committee meeting held prior to 30 June in each year.

At least 2 members of the Sub-committee shall consider each case referred to it.

#### 4.3 Section 45A(9)

The Committee may appoint a Sub-committee to deal specifically with matters arising under Section 45A(9) of The Act namely:

- i) the consideration of any complaint made to it by any medical practitioner against a medical practitioner specified below providing services under a contract in the relevant area involving any question of the efficiency of those services;
- ii) the reporting of the outcome of the consideration of any such complaint to the Regional Team of NHS England with whom the contract is held in cases where that consideration gives rise to any concerns relating to the efficiency of services provided under a contract;
- iii) the making of arrangements for the medical examination of a medical practitioner specified below, where the contractor or the Regional Team of NHS England is concerned that the medical practitioner is incapable of adequately providing services under the contract and it so requests with the agreement of the medical practitioner concerned; and
- iv) the consideration of the report of any medical examination arranged in accordance with sub-paragraph (iii) and the making of a written report as to the capability of the medical practitioner of adequately providing services under the contract to the medical practitioner concerned, the contractor and the Regional Team of NHS England with whom the contractor holds a contract.

The medical practitioner referred to in paragraphs (i) and (iii) above is a medical practitioner who is:

- (a) a contractor
- (b) one of two or more individuals practising in partnership who hold a general medical services contract or
- (c) a legal and beneficial shareholder in a company which holds a general medical services contract which Sub-committee shall comprise the Chair, the Secretary and a Medical Advisor appointed by the Committee.

4.4 Other

The Committee shall have power from time to time to delegate any of their functions, with or without restrictions or conditions, to other Sub-committees composed of Committee Members.

4.5 Disclosure of Interest

The provisions of paragraph 9 of this Constitution shall apply to Sub-committees as it applies to the Committee.

**5. GENERAL AND EXTRAORDINARY MEETINGS**

5.1 Frequency

Not less than once in every year the Committee shall consider convening a meeting of the Represented Members.

5.2 Attendance

In addition to the Represented Members the following persons shall have the right to attend:

- any Committee Member
- the Secretary (if appointed)
- such other persons as the Committee may in their absolute discretion determine

5.3 Disqualification

A Represented Member who otherwise would be entitled to attend any General Meeting of the Committee or any Extraordinary Meeting of the Committee shall be disqualified from doing so in the circumstances set out in clauses 1.6.1 to 1.6.1.6 as if those clauses applied to Represented Members as well as to Committee Members.

- 5.4 Business at General Meetings
- The following business may be transacted at a General Meeting:
- business of which 14 days' notice has been given to the Committee and which the Committee in its absolute discretion accept as appropriate for discussion

- 5.5 Extraordinary Meetings
- Upon the written request of no less than 30 Represented Members who are not disqualified the Committee shall convene an Extraordinary Meeting on not less than 21 and not more than 28 days' notice. The only business that may be transacted at such a meeting is that specified in the written request to the Committee a copy of which shall be circulated to all those who receive notice of the meeting.

## **6. THE SECRETARY**

- 6.1 Appointment
- The Committee shall, from time to time and for such period and upon such terms as they may determine, appoint a person to act as an Appointed Secretary or, in accordance with Clause 3.8, elect a Secretary from amongst its number. On assuming office such Secretary shall notify the Regional Team of NHS England thereof. If an Appointed Secretary is not a Medical Practitioner, the Committee shall invite such a practitioner to act as a Medical Advisor and his name shall be notified to the Represented Members.

- 6.2 Functions
- The Secretary, whether elected or appointed, shall maintain the Register of Members and the GPC Voting Register and shall carry out such functions as the Committee from time to time requests.

## **7. FUNDING**

- 7.1 The Statutory Levy
- The Administrative Expenses of the Committee may be collected on a statutory basis from all Represented Members whose names appear on the Register of Members and in line with policies agreed from time to time by the Committee. The Committee shall have absolute discretion as to how the levies are applied for the ultimate benefit of its Represented Members as necessary from time to time.

- 7.2 The Voluntary Levy
- The Committee may raise an additional Voluntary Levy from Represented Members whose names appear on the Register of Members to cover its other expenses and in line with policies agreed from time to time by the Committee. The Committee shall have absolute discretion as to how the levies are applied for the ultimate benefit of its Represented Member as necessary from time to time.
- 7.3 Collection
- The method of collection of the Statutory Levy and the Voluntary Levy shall be determined from time to time by the Committee.
- 7.4 Amount
- The amounts of Statutory and the Voluntary Levy shall respectively be determined by the Committee having regard to the requirements of openness, transparency and equity and upon an estimation of the proportion of administrative and other expenses attributable to each class of Represented Member.
- 7.5 Accounting
- The Committee shall maintain separate accounts for the Statutory Levy and the Voluntary Levy if both are raised. The accounts for the Statutory Levy must clearly identify the statutory element paid by practitioners respectively on the Register of Members. Once approved by the Committee, the Annual Accounts shall be made available to Represented Members on request.
- 8. NOTICES**
- Where a document is required to be sent to an elector, it shall be deemed to have been duly sent if it was delivered or posted to the address or email address of the elector shown in the Register of Members.
- 9. DISCLOSURE OF INTEREST**
- 9.1
- If an Officer of the Committee or a Committee Member sits on or works for any stakeholder 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 (or subcommittee) when the contract, proposed contract, or other matter is the subject for consideration he shall at the meeting and as

soon as practicable after its commencement disclose that fact.

9.2 If any Officer of the Committee or a Committee Member has any doubts about whether or not they have such an interest he shall report the matter to the Chair who shall advise as to whether or not the matter should be declared.

9.3 The committee shall publish and maintain a conflicts of interests policy, a document which shall be available for inspection to members and represented GPs.

9.4 Further the Committee shall maintain a register of members' interests available for inspection on the Committee website.

**10. AMENDMENTS TO CONSTITUTION** This Constitution may be amended in the following manner:

10.1 A proposal for the amendment made by not less than 30 Represented Members or by a Committee Member shall be sent to the Secretary who shall place the same before the Committee for consideration at the next available meeting after the same was circulated to the Committee.

10.2 After the proposals have been considered the Secretary, if requested to do so by the Committee or if required to do so by no less than two thirds of the electors, shall circulate any proposed amendment together with its view thereon to all the Represented Members inviting the same to submit to the Secretary their comments within fourteen days.

10.3 The Secretary shall notify the Committee of any amendment duly carried at the next meeting and thereupon such amendment shall forthwith take effect.

**11. WINDING UP**

11.1 Amalgamation or reorganisation requires NHS England to signify their approval.

11.2 If, following NHS England approval of any amalgamation or reorganisation of the Committee, there remains residual funds or liabilities, then the same shall be distributed between such other Committees as may be involved in the amalgamation or

reorganisation so as equitably to reflect the proportions in which Represented Members are transferred to other Committees.

**Dated: April 2026**