

Royal College of General Practitioners

## COUNCIL STANDING ORDERS 2023-2024

## Agreed by Council 8 March 2024

1. The Interpretation Act 1978 applies to these Standing Orders as to an Act of Parliament.
2. Words and phrases used in the Charters, Ordinances and Byelaws mean the same in these Standing Orders.

## 3. COUNCIL MEETINGS

3.1. The Council shall meet not more than five times during each Council year. In these Standing Orders, "Council year" means the period between the end of one annual general meeting of the College and the end of the next annual general meeting.
3.2. The dates of Council meetings shall be fixed by the Council.
3.3. Any of the Chair of Council and Honorary Secretary of Council, or any ten Council members by written notice to the Chief Executive Officer, may call a Special Council Meeting (Extraordinary Meeting) to deal with such business as they may specify.

## 4. OFFICERS OF THE COUNCIL

4.1. The Officers of the Council are:
4.1.1. The Chair of Council,
4.1.2. The Vice-Chairs of Council,
4.1.3. The Honorary Secretary and,
4.1.4. The Honorary Treasurer.

## 5. OBSERVERS ON COUNCIL

5.1. The Council may appoint the following Observers:
5.1.1. A representative of the Joint Armed Services
5.1.2. A representative of the Society for Academic Primary Care (SAPC)
5.1.3. A representative of the Committee of General Practice Education Directors, if not already a Council member (COGPED)
5.1.4. A GP member representative of the British International Doctors Association (BIDA)
5.1.5. Two representatives of the British Medical Association (BMA) General Practitioners Committee (GPC)
5.1.6. The College representatives on the British Medical Association (BMA) General Practitioners Committee, if notalready Council members.
5.1.7. The Editor or Editor Designate of the British Journal of General Practice (BJGP) if not already a Council member
5.1.8. The Deputy Editor or Deputy Editor Designate of the British Journal of General Practice, (BJGP) if not already a Council member
5.1.9. The Lay Chair of the College's Patient \& Carers Partnership Group (PCPG)
5.1.10. The Chief Examiner
5.1.11. A representative from the Allied Healthcare Professions
5.2. Observers are entitled to receive papers (other than those marked Confidential). Council may permit Observers to be present and to speak on invitation from the Chair at its meetings, but such Observers shall not be entitled to vote, nor be counted as part of thequorum.
5.3. The Chair may also invite and/or accept attendance from College members who wish to observe a Council meeting (up to 25 per meeting) to be known as Guest Observers.
5.3.1. Such Guest Observers are entitled to receive papers (other than those marked Confidential), but may not speak, except by specific permission or invitation of theChair. They shall not be entitled to vote, nor be counted as part of the quorum.
5.3.2. Such Guest Observers should normally be the guest of a current Council member,or supported by a specific constituency, such as their local Faculty or employer; orhave been invited by the Chair of Council.
5.4. If Council is conducting confidential business, all Observers may be asked to leave the meeting, and may or may not be readmitted later.
5.5. All Council Observers are expected to agree to and abide by the Guidance for Guest Observers.

## 6. PROCEDURES AT COUNCIL MEETINGS

### 6.1. Quorum

6.1.1. The quorum for Council meetings is a simple majority of Council members, excluding Observers, and no business may be transacted unless a quorum is present. If a Council meeting ceases to be quorate it shall be adjourned.

### 6.2. Chairing of Council meetings

6.2.1. The Chair of Council will take the chair, failing which the Vice-Chairs of Council in order of time served, may preside. In the absence of all the foregoing members, a member of Council shall be elected by the Council to take the Chair.
6.2.2. In these Standing Orders references to "the Chair" means the member chairing the Council meeting.

### 6.3. Adjournment

6.3.1. The Chair may adjourn any Council meeting to a future fixed date and time and must do so if so directed by the Council.
6.3.2. No business shall be transacted at an adjourned Council meeting other than that left unfinished at the adjournment of the original meeting (or any adjournment of it).
6.3.3. Notice of the adjournment of a Council meeting shall be given to all Council members if the adjournment is for one day or more but need not be given otherwise.
6.4. Order of business of first meeting in Council year (November)
6.4.1. The first Council meeting in a Council year is the first Council meeting held after the Annual General Meeting and the agenda for that meeting shall include the following items of business as the first items:
i. Noting the Officers of Council and Chairs of Council Committees and Boards
ii. Noting the appointment of additional Council members under Byelaw 41, if appropriate;
iii. Approval of Council Standing Orders;
iv. Such other items of business as may be determined by the Chair.

### 6.5. Business at Council meetings

6.5.1. The business of a Council meeting shall include the following:
6.5.1.1. Constitutional business, which may consist of:
i. Apologies for absence and appointed deputies
ii. Declarations of Interest
iii. Information Governance Declarations
iv. Chair's announcements
v. Chief Executive Officer's Management Report
vi. Approval of Minutes of and matters arising from the previous meeting
vii. Motions proposed by Faculties or Members

### 6.5.1.2. Decision items

### 6.5.1.3. Discussion items

6.5.1.4. Information / update items not requiring decision shall be noted unless a Council member has previously made a request for such an item to be discussed no later than 48 hours before the meeting. Updates shall include:
i. Matters relating to the various College and Council committees/boards
ii. Reports from the Devolved Council Chairs
6.5.2. The June Council meeting should include on its agenda the dates of Council meetings for the next two years for approval.
6.5.3. Subject to 6.4 and 6.5 the Chair of Council shall have absolute discretion to determine and vary the items and order of business on the Council agenda as they see fit.

## 7. MOTIONS TO COUNCIL

7.1. Motions for a Council meeting must be received by the Honorary Secretary at least 30 clear days before a Council meeting, subject to the emergency motion provision.
7.2. Motions may be submitted by Faculties, Devolved Councils, and Council members, including Faculty representatives on Council. If the motion is from a Faculty or Devolved Council, it must be supported by the board of that Faculty or Devolved Council.
7.3. All motions must be proposed and seconded before they can be discussed. Proposers and seconders (or notified substitutes) must be present at the meeting when their motion is taken.
7.4. The procedures for motions are:
7.4.1. Proposers and seconders must contact the Honorary Secretary to discuss their motion prior to formal submission.
7.4.2. After discussion, motions must be submitted on the College's motion template at
least 30 clear days before the Council meeting.
7.4.3. All motions must identify funding, budget and staffing implications and sources (whether internal or external) prior to submission and movers must have discussed resource implications with the Honorary Secretary in advance of final motion submission.
7.4.4. Motions will be heard in date order of receipt with a maximum of 2 motions at any one Council meeting, subject to the emergency motion provision (see below).
7.4.5. Motions received over the maximum number will be held over to the next meeting of Council.
7.4.6. Motions shall be limited to one per Council member or Faculty per meeting (in order to avoid monopolisation).
7.5. Motions will not be accepted by the Honorary Secretary where:
7.5.1. In the opinion of the Honorary Secretary the subject of the motion has already been dealt with or is being dealt with by the College.
7.5.2. A motion is poorly worded or where the proposed action being put to Council or the College is unclear. The Honorary Secretary may offer to help with re-wording the motion.
7.5.3. The subject or any implications of the motion are not within the remit of Council. Motions whose subject matter properly falls within the remit of the Trustee Board or other College committee/board shall be referred to the Chair of the Trustee Board or other College committee/board Chair) for consideration and determination. Matters referred to the Trustee Board or other College committee/board shall be taken either at the next meeting of the Trustee Board or other College committee/board (where possible) or be dealt with by written reply from the Chair of the Trustee Board or relevant committee/board in a timely manner.
7.5.4. In the opinion of the Honorary Secretary and the Chief Executive Officer the resource implications of the motion cannot be met by available funds and/or staffing.
7.5.5. A motion falls outside the scope of the College's powers or Charitable Object (i.e., ultra vires).
7.5.6. The subject of the motion has been previously discussed by Council within the past 5 years, unless there has objectively been significant change in circumstances in relation to subject of the motion and with the agreement of the Honorary Secretary.
7.6. In the event that a motion is rejected the Honorary Secretary shall provide, in writing, the grounds on which a formally submitted motion was rejected.
7.7. Proposers and seconders may appeal to the Chair of Council, in writing and using the Motion appeal template, any decision by the Honorary Secretary not to accept a motion
within 28 clear days of receiving the decision.
7.8. The Honorary Secretary shall report to Council on all motions formally and correctly received, including the reasoning for any motions which have been rejected.

### 7.9. Emergency motions

7.9.1. The Honorary Secretary, in consultation with the Chair of Council, shall have discretion to admit onto the Council agenda any emergency motions received less than 30 days before the meeting, and to admit more than 2 motions for debate at any one Council meeting in exceptional circumstances.

### 7.10. Motions of no confidence

7.10.1. Motions to propose a vote of no confidence in an Officer (as defined at Standing Order 4.1) are outside the standard Motions to Council procedure set out in these Standing Orders.
7.10.2. Motions proposing a vote of no confidence in an Officer must be submitted to the Honorary Secretary (or Chief Executive Officer in the case of a motion being brought in relation to the Honorary Secretary) at least ten clear days before the meeting and must be signed by at least ten members of Council who confirm their support for the motion.
7.10.3. A motion of no confidence will not be carried unless decided by a simple majority of the members of Council present and voting.
7.10.4. A motion of no confidence must name the Officer and state that the individual (or individuals in the case on a job share) is to be removed from office if the motion is successful. No more than one Officer may be named in any motion of no confidence. No more than one motion of no confidence can be proposed or considered per meeting. In the case of job shares, it is taken that naming one individual subjects both to the motion of no confidence.
7.10.5. If a motion of no confidence is carried, the Officer shall cease to hold office and the Trustee Board will appoint an interim Officer as soon as practicable until an election for a replacement Officer, using the usual process, can take place. Individuals who have been removed by the no confidence process may stand for election again but may not be appointed by Trustee Board as an interim Officer.

### 7.11. Amendments to motions

7.11.1. Any amendment to a motion shall be within the scope of the motion. as approved by the Chair.
7.11.2. A proposal to refer a motion to a committee shall be treated as an amendment.
7.11.3. If an amendment is carried, the amended motion becomes the substantive question before the meeting and may be further amended.

### 7.12. Speeches

7.12.1. The selection of speakers is a matter at the discretion of the Chair, subject to these Standing Orders.
7.12.2. If the Chair indicates whether by rising or through another method during a debate, the speaker shall cease speaking.
7.12.3. No member may speak for more than two minutes on any one matter without the permission of the Chair, except that the mover of a motion may speak for up to five minutes.
7.12.4. The Chair may choose to change the length of time available for members to speak at any time.

### 7.13. Right to speak again

7.13.1. No member may without the permission of the Chair speak more than once on any motion or amendment, except that the mover of a motion has a right of reply to the debate on the motion or to any proposed amendment to it, so long as they do not introduce any new matter. Once the mover has replied to the debate, it shall be closed, and the question put to the vote immediately.

### 7.14. Closure of debate

7.14.1. A member who has not spoken previously in the debate may move closure of a debate by proposing one of the following motions:
i. That the question be now put;
ii. That the meeting proceeds to the next business;
iii. That the debate be adjourned.
7.14.2. A closure motion must be seconded by a member who has not spoken previously in the debate and the motion shall be put to the vote immediately without any debate, except that the mover of the motion which is the subject of the debate has the right to speak before a motion to proceed to the next business or adjourn the debate is put.
7.14.3. If a motion that the question be now put is carried, the motion or amendment which is the subject of the debate shall be put to the vote immediately without any further debate, except that the mover of the motion has the right of reply to the debate.

### 7.15. Voting

7.15.1. All questions before the Council shall be decided by a majority of the members present and voting. In the event of a tie, the Chair has a second, or casting, vote which may be used whether or not they have previously voted. If the Chair declines to use the casting vote in the event of a tie, the question shall be deemed to be decided in favour of retention of the status quo.
7.15.2. In the absence of a faculty representative or any additional representative of that
faculty, the designated deputy faculty representative(s) shall be entitled to vote as if they were a full Council member.
7.15.3. Voting at Council meetings shall be by whatever method is determined by the Chair.

### 7.16. Minutes

7.16.1. Minutes shall be kept of every Council meeting and submitted for approval at the following meeting. Once approved, a copy of the minutes of any Council meeting may be supplied on request to any member of the College.

## 8. COMMITTEEES OF COUNCIL

8.1. There shall be the following Committees of the Council:
8.1.1. The Fellowship and Awards Committee
8.1.2. the Committee on Medical Ethics
8.1.3. the Patient \& Carers Partnership Group
8.1.4. the Scientific Foundation Board

### 8.1.5. the RCGP Specialty Training Board

8.2. The Committees of the Council may exercise delegated powers on behalf of the Council on the matters within their terms of reference, in accordance with Article 17 of the Supplemental Charter. At the discretion of the Committee, a Vice-Chair may be appointed, who can deputise for the Chair, but not at Council meetings.
8.3. The Terms of Reference for committees of Council shall be reviewed a minimum of every three years when they shall be ratified by Council and appended to these Standing Orders.
8.4. Committees of Council shall submit an annual report to Council.
8.5. A recommendation in a report from a committee of Council will be treated as a motion to adopt the report in the name of the Chair of that Committee (or another member presenting the report) and need not be seconded or submitted on the College motion template. Committee motions are subject to all other provisions in relation to motions outlined in Standing Order 7).

## 9. GENERAL PROVISIONS RELATING TO COMMITTEES

9.1. Council members who cease to serve on the Council shall cease at the same time to serve on any Council committee/board.
9.2. All Officers of the Council, as defined in Standing Order 4.1 are entitled to receive papers for and attend all meetings of committees, but unless they are ex officio, or regularly appointed or co-opted members of the committee concerned, they shall not be entitled to vote and shall not be counted as part of the quorum.
9.3. Any Council member may attend any committee meeting as an Observer providing no expense to the College is involved but shall not be entitled to vote and shall not be counted as part of the quorum.
9.4. The decision of the Chair on all matters falling within the purview of the Council and/or committee shall be final and binding.

## 10. REGISTRATION AND DECLARATION OF COUNCIL AND COMMITTEE OF COUNCIL MEMBERS' INTERESTS

10.1. All Council members, faculty representatives. deputies, Observers and members of Council committees shall register details of all interests which might reasonably be perceived as affecting the discharge of their functions. Registration shall be carried out by completion of a pro-forma circulated annually, with the information registered to be amended from time to time as required.
10.2. All Council members, faculty representatives. deputies, Observers and members of Council committees must have completed a Declaration of Interests at least 48 hours in advance of a meeting of Council or a committee of Council in order to attend.
10.3. Whether or not the interest concerned has been registered under Standing Order 10.1, Council members and faculty representatives, deputies, Observers and members of Council committees shall declare their interests, whether personal or prejudicial (financial), each time it arises on an agenda for a meeting they attend and they shall not take part in any decision in which they have an interest, unless the interest may reasonably be regarded as insignificant or immaterial.
10.4. The Chair of a meeting at which a member's declaration of a conflict of interest is made shall consider the nature of the declaration (whether personal or prejudicial/financial), and may require the member to leave the meeting, and not take part in the discussion or decision on the item, which shall be recorded in the minutes of the meeting.

## 11. GENERAL PROVISIONS RELATING TO MEETINGS AND ELECTRONIC COMMUNICATIONS

11.1. Any committee or other meeting within the College may be carried on by telephone or videoconferencing, provided all members of the body concerned have been given the opportunity to participate and have been sent the papers for the meeting. Quorum and procedural provisions relating to meetings outlined in these Standing Orders shall apply to any committee or other meeting carried on by telephone, videoconferencing or electronic conferencing, or by any combination of method of meeting.
11.2. Notice of any meeting and any other relevant documents may be sent to any member by electronic mail, and any other procedure which these Standing Orders state must be carried out in writing, may be carried out electronically at the option of the person carrying out the procedure concerned.

## 12. EXPENSES

12.1. All Officers, Council members, Chairs of Boards (if not Council members) and Working Group Members may be reimbursed their reasonable out of pocket expenses in line with the College's Expenses policy in respect of the following meetings:
12.1.1. Council meetings and Trustee Board meetings;
12.1.2. Committees of the Council and Trustee Board;
12.1.3. Meetings of Working Groups, if the meeting concerned has been requested by the Council or Trustee Board Chair and / or the Working Group Leader;
12.1.4. Meetings with outside organisations where attendance on behalf of the College has been requested by the Honorary Secretary of Council or Chair of Council.
12.2. Out of pocket expenses are not payable in respect of:
12.2.1. Attendance at General Meetings of the College (i.e., the Annual General Meetings);
12.2.2. Attendance at meetings and activities arranged at Faculty level;
12.2.3. Meetings attended by a Council or Trustee Board member out of interest, or at their own initiative, without specific invitation.
12.3. Reimbursement of such expenses or costs shall only be made on submission of the supporting Information and receipts to the College's specified expenses system or process within 3 months of the event.

## 13. DISCLOUSRE OF INFORMATION TO THE MEDIA

13.1. No member or Observer of the Council, or of any Committee, Board, Working Group or Task Group, whether or not a member of the College, shall disclose or send to the press or any broadcast or social media a copy of any information or communication from the College received by virtue of that membership without the consent of the Chair or Honorary Secretary. If necessary, the Chair or Honorary Secretary shall consult other Council members. This prohibition does not apply to the posting of comment on social media platforms by members of Council if undertaken in accordance with the behavioural framework, member Code of Conduct and confidentiality of particular Council/committee items as directed by the Chair.

## 14. AMENDMENT, SUSPENSION AND REVOCATION OF STANDING ORDERS

14.1. These Standing Orders may in most cases be amended, suspended or revoked and remade by motion passed by a majority of the members of the Council present and voting. If the motion proposes the amendment, suspension or revocation of this Standing Order 14.1 or Standing Order 7.14 (or any differently- numbered Standing Orders having similar effect in relation to the closure of debate a majority of not less than two-thirds of the members of the Council present and voting is needed for the motion to pass.

## Fellowship and Awards Committee Terms of Reference

## 1. THE JOINT FELLOWSHIPS \& AWARDS COMMITTEE

1.1. The terms of reference of the Joint Fellowship \& Awards Committee are:
1.1.1. $\quad$ To define the criteria for Fellowship and to review these from time to time;
1.1.2. To advise and assist the Council on all matters pertaining to Fellowship;
1.1.3. To advise and assist the Council on all questions of College Awards, Honours, Insignia and Ceremonies.
1.2. The membership of the Joint Fellowship \& Awards Committee will be:
1.2.1. $\quad$ The President, ex officio who shall act as Chair of the Committee; and
1.2.2. $\quad$ The Officers of Council, as defined in Standing Order 5.1, ex officio;
1.2.3. The Lay Chair of the Patients \& Carers Partnership Group (or other designated PCPG representative);
1.2.4. A co-opted College Member from the Devolved Nations;
1.2.5. A Faculty Fellowship Committee Chair; and
1.2.6. Three other College Members who are Fellows who will serve a 3 -year term of office, renewable for one further period of three years.
1.3. The Committee may also co-opt up to two additional members with specific skills (including a younger College member if one is not identified by the other routes)
1.4. The quorum of the Committee shall be the President and three other members.
1.5. The Committee shall meet twice in each Council year, and at other times consult its members as required.
1.6. The Nominations Committee will act as a final Appeals body to consider any appeals against the adjudication process of the Joint Fellowship and Awards Committee.
1.7. Council can delegate any of its responsibilities to any of the Trustee Board Committees with the written agreement of both the Chair of Council and the Chair of Trustee Board.

Approved: November 2022
Next review date: November 2024

## Committee on Medical Ethics

## Terms of Reference

Updated March 2023

| Accountable to: | RCGP Council |
| :--- | :--- |
| Chair: | The Chair shall be nominated from existing members of the <br> Committee on Medical Ethics and approved by Council. |
| Membership and <br> appointment: | Membership shall be: <br> 1. A Chair (nominated from existing members of the Committee, <br> subject to approval by Council). |
| 2. A Vice-Chair (nominated from existing members of the |  |
| Committee, subject to approval by Council). |  |


|  | Such members of staff and other persons may attend as the Chair <br> may require. <br> The Governance Team will provide governance and secretariat <br> support. |
| :--- | :--- |
| Meeting frequency: | The Committee on Medical Ethics will meet up to four times in a <br> Council year. |
| Authorisation: | The Committee on Medical Ethics may make recommendations to <br> Council. |
| Overall Purpose: | The Committee on Medical Ethics advises Council on ethical issues <br> affecting the RCGP, members, and on any ethical implications of <br> decisions being made or which have been made. |
| Has delegated authority from Council |  |

Created: March 2023
Adopted: April 2023
Due for revision: April 2025

## RCGP Patients \& Carers Group UK (PCPG UK) Terms of Reference

The RCGP Patient Group shall be known as the RCGP Patients \& Carers Group UK (PCPG UK)
Purpose: To communicate and represent to the College generally, patient perspectives and experience when responding to and/or inputting to consultations and other exercises concerning College strategies and policies.

## The Group's aims are:

- To support the College strategic objectives and inform its work through the PCPG patient strategy;
- To develop ideas and lead activities that encourage GPs to work in partnership most effectively with patients and public;
- To influence and respond to College activity in the UK that impacts on the quality of patient care;
- To work together as a team, in an environment of mutual respect and understanding, as underpinned in RCGP's policies and frameworks, to ensure that the activities of the College respond to patient needs;
- To foster and support links with Patient Groups in the Devolved Nations.


## Membership

All members should act as individuals, rather than on behalf of other outside organisations. The Group may invite other Groups or individuals to its meetings to discuss specific topics as appropriate.

Each member will be required to complete a Declaration of Interest and Probity form, and where a conflict of interest occurs, the conflict of interest process should be followed.

The PCPG shall comprise the following membership:

- The Vice-Chair (External Affairs) of Council, ex officio
- A Medical Vice-Chair, elected by Council
- Two RCGP members elected by Council
- Up to eleven Lay members, one of whom shall be elected as the Lay Chair of the RCGP UK patient group.

At the discretion of the Chair, and following consultation with Group members, the Chair may appoint a lay co-opted member to fill a vacancy in the membership of the Group. The co-option could be for the remainder of the term of a vacancy (from whatever point it arose), or for a specified period (i.e. to cover a project or specific piece of work), provided the total overall maximum number of lay members is not exceeded.

- One Observer from the Associates in Training (AiT) Committee
- One co-opted Observer each from the Carers Trust and from Carers UK

In addition to the above, the Chairs (or their delegate) of each of the three Devolved Nation patient groups shall also be constituent members of the RCGP UK patient group.

All GP members should be Members or Fellows of the RCGP in good standing and in active general practice. Formal links with RCGP Council are retained through the Chair of the UK Patient Group, the Vice Chair (External Affairs) and the Medical Vice Chair. The Chair of the PCPG UK is an Observer member on Council.

The Executive Director of Policy \& Engagement, and the Head of Devolved Councils will be invited to attend all meetings of the PCPG as advisors. The group will maintain close links with the other RCGP Devolved Nation patient groups by the sharing of minutes.

## Terms of Office

RCGP PCPG shall elect a Chair from the Lay membership, whose appointment will be confirmed by RCGP Council.

Additionally, the group shall elect one Lay Vice Chair; and Council will appoint one Medical Vice Chair. The term of office for each of these officer posts shall be a single term of three years.

A Chair-Elect should be elected from among the Lay membership six months before the end of an incumbent Chair's term of office in order to aid succession / hand-over.

RCGP Council shall appoint three GP Council members (including the Medical Vice- Chair) as voting members of the PCPG. Members of the PCPG -UK patient group (but excluding the Lay Chair) normally serve for a three-year term, and subject to satisfactory review, may be reappointed for a further term of three years.

Under the following circumstances, and at the discretion of the Chair of RCGP Council only, the following terms of office may be extended:

The Lay Chair, the Medical Vice-Chair, and the Lay Vice-Chair positions for one further year if circumstances (e.g. involvement in a project) warrant it.

The quorum for the quarterly meetings of the RCGP PCPG UK shall be seven including the Chair, of whom two must be College members, and the remainder Lay and co- opted members.

If a member of the Group does not attend three consecutive meetings, the Chair of the RCGP PCPG UK shall make enquiries as to cause of the absence, and unless due to long-term illness, shall review any continued involvement. The PCPG shall aim to meet at least four times per year.

All members of the RCGP PCPG UK have voting rights, except observers and advisors. Decisions shall be taken by majority vote. In the case of an equality of votes, the Chair shall have a second or casting vote.

## Selection of Lay members

Prospective Lay members will be sought by external open advert. Interviews will be by a panel consisting of the Lay Chair, the Medical \& Lay Vice Chairs, and one Devolved Chair.

RCGP UK Patient Group will develop and maintain a pool of interested individuals who may be approached to assist in particular projects of the RCGP PCPG UK and/or for potential future membership of the RCGP PCPG UK.

## RCGP Staff \& Secretariat

The Executive Director Policy and Engagement and the Head of Devolved Councils shall attend all meetings of the RCGP PCPG UK as advisors.

A staff member from the wider Governance team will also attend meetings to provide administrative support and advice as and when required.

RCGP staff attending meetings will not have any voting rights.

## Scientific Foundation

Board
Draft Terms of
Reference
Updated June 2023

| Accountable to | RCGP UK Council |
| :--- | :--- |
| Purpose | The Scientific Foundation Board (SFB) awards grants for research <br> specific to general medical practice which is undertaken from a <br> United Kingdom base and mainly based on subjects within the <br> United Kingdom. <br> The definition of research used by the SFB is wide-ranging and <br> includes descriptive and experimental studies. |
|  | The SFB wishes to encourage applications from those new to <br> research and to those who have not previously received funding. If <br> the Principal Investigator for an application is not a General <br> Practitioner, they are expected to have a General Practitioner or at <br> least a member of a Primary Care Team as a Co-Investigator. <br> Applications are open to anyone involved in primary care research <br> and each application will be assessed against its clinical and scientific <br> merit alongside its alignment with the Royal College of General <br> Practitioner's ('the College') strategic and clinical priorities. Peer <br> review will be in proportion to the scale of the research and risks or <br> burdens involved for participants. Committee member peer review is <br> anonymised, with scoring discussed in-person. Where the funding <br> provided is substantial or the SFB identifies a project within remit <br> but outside their expertise, external peer review will be invited. |
| Authorisation and <br> reporting | The SFB has delegated authority from the College Standing Orders. <br> The SFB is a Standing Committee of RCGP UK Council ("Council") <br> and therefore works within the overall constitutional and policy <br> framework of the College's Charter, Ordinances and Bye-laws. |
| Objectives | An Annual Report of SFB activities will be submitted to Council once <br> a year in February. |
| - Award grants for research specific to general medical practice |  |
| The objectives of the SFB are to: |  |
| The Chair of the SFB is responsible for SFB reports. All reports |  |
| require Chair approval before presentation to Council. |  |


|  | - To support collaboration and generation of partnerships with <br> external bodies that support primary care research, operating <br> within the framework of the College's wider policies; |
| :--- | :--- | :--- |
| - To provide advice to the Research and Innovation team (within |  |
| Policy, Research and Campaigns) on issues that relate to the |  |
| research activities of the College. |  |$|$


| Expectations of <br> members | - To adhere to the seven principles of public life, <br> - <br> To attend the annual meeting, in person, via teleconference or <br> virtually, of the SFB (and extraordinary meetings called by the <br> Chair), <br> - To review grants (for the annual meeting and on an ad hoc basis) <br> with objectivity and maintain confidentiality, <br> To support the objectives of the SFB. |
| :--- | :--- |
| Criteria for <br> extension of SFB <br> tenure of elected <br> members | 1. Expertise area and overlap with members <br> 2. Responsiveness to requests between committee members <br> and college |
| 3. Promptness and quality of review <br> 4. Attendance and contribution at committee meetings <br> 5. Understanding and supporting the fundamentals of <br> transparent open peer review |  |
| 6. Career stage and diversity of SFB |  |
| 7. Number of members remaining on the SFB and the time |  |
| remaining on their tenure |  |

## Research Grants

Research grant applications are reviewed against a set of industry standard criteria which is agreed upon in the annual meeting of the SFB for implementation in the following year.

| 1.1. | Annual Research Grant <br> The SFB shall receive and review annual research grants (ARG) of between $£ 1000$ and $£ 30,000$ on an annual basis; applications will normally be received by the end of July and reviewed for the annual meeting. Applicants will be notified of the outcome within 8 weeks of the meeting. |
| :---: | :---: |
| 1.2. | Practitioners Allowance Grants <br> Applications for grants under $£ 2,000$ will be accepted throughout the year. Applicants will be notified of the outcome within 4-6 weeks. |
| 1.3. | Powers over research grants and reporting to the SFB <br> The SFB has the power to freeze or rescind research grants should the grant holder not meet their reporting obligations, change use of funds without gaining prior consent from the SFB or who use funds inappropriately (outlined in guidance documents for grant holders and contractual terms and conditions). <br> Recommendations for action will be presented via the College's Research Team |
| 1.4. | Application Information <br> All grants awarded which involve human participants or biological samples must be approved by an appropriate ethics committee and this is a requirement of funding. <br> Applicants need to inform the College research administrator of any other funding sources for the same study as the College does not usually co-fund research. <br> Any promotion and communications around awarded Grants must be agreed by the College and advertised and supported by relevant and detailed guidance. |
|  | Administrative and financial arrangements |
| 2.1. | Administrative support for the SFB shall be provided by the College. The SFB will reimburse its members for out-of-pocket expenses incurred in attending meetings and in the business of the SFB, in accordance with the existing College expenses policy. <br> The College shall determine the appropriate sum required to cover the cost of administrative support for the SFB. |

The Terms of Reference will be reviewed every two years.

Created: April 2023
Adopted: July 2023
Due for revision: July 2025

## RCGP Specialty Training Board (RCGP STB)

## Terms of Reference

## Aims:

To develop and oversee College strategy and policy in all areas of work relating to general practice training and the standards set for assessment and registration, and return to, independent practice, and to support the College's work to influence and advise ministers and statutory bodies about that strategy.

To support a seamless transition from undergraduate, through Foundation and into GP training and registration, with vision forwards to post-CCT professional development by co-ordinating work across career boundaries.

To have a proactive approach to future innovation in both service delivery development and research and development as it relates to all GP education and training (including multiprofessional working).

## Governance

i. To be accountable to RCGP Council for developing and implementing the RCGP's strategy and policy for general practice training, assessment and registration.
ii. To oversee and ratify the work of existing reporting committees (currently ACDC) and any reporting committees that may be established in the future.

## Activity

i. Ensure appropriate educational delivery and support for equivalent routes to registration and independent practice, including but not limited to CEGPR, CEGPR(CP), CEGPR(AP) and the I\&R programme;
ii. The guardianship, promotion and ongoing development of the curricula for all Specialty Training in and for general practice;
iii. Review and ratify proposed changes to the general practice curriculum and all assessments for formal submission to the GMC;
iv. Initiate proactive communications and external relations activities in relation to curriculum, assessment and all stages of GP education, training and registration;
v. Advise the GMC on the quality standards for all specialty training in and for general practice, assessment and registration;
vi. Quality manage the registration of GPs following their training to ensure it is carried out to the appropriate standards;
vii. Provide advice and guidance to support educators and trainees working in general practice;
viii. Contribute to the standards and processes for recruitment and selection into specialty training for general practice;
ix. Oversee the RCGP's work on all aspects of undergraduate, Foundation and any other training and assessment programmes that form part of the GP training pathway, or which contribute to the development of generalist capabilities or standards in the wider workforce, and to influence and develop policy in relation to these;
x. To advise on the changing training, assessment and registration needs for the future primary care workforce.

## Partnerships/Communication with stakeholders

i. Work in partnership with Health Education Institutions to further enhance GP as a career option for undergraduate medical students and international doctors;
ii. Work with UKFPO to the benefit of generalist training and to enhance GP as a career
iii. Liaise closely with the GMC, GPC, COGPED, AoMRC and other medical Royal Colleges;
iv. Work closely with lay representatives with expertise relevant to education, training and assessment;
v. Liaise with other stakeholders to ensure there is appropriate understanding of the capabilities and competences needed for generalism and integrated care in the future.

## RCGP Specialty Training Board (GP STB) Membership List

The members of the GP STB are:

## From the RCGP:

- Medical Director for Training and Registration (Chair)
- Vice Chair of Council for Professional Development
- Council representatives (1)
- Chairs or Educational leads of the AiT Committee (2)
- Representative from the First5 Committee (1)
- Lay representative (1)
- Patient Partnership Group representative (1)
- Medical Director of Curriculum
- Quality Management \& Training Standards Clinical Lead
- GPSA Clinical Lead
- Chief Examiner
- MRCGP Clinical Leads (3)
- Executive Director of Professional Training and Standards
- Assistant Director for Postgraduate Training
- Head of GPSA
- Head of Examinations
- Training Manager
- Co-optees for particular discussions


## As observers

- COGPED Chair, and two other representatives from COGPED
- Representative from the BMA's GPC committee (1)


## RCGP Specialty Training Board (GP STB)

Operational Processes

## 1) Frequency

- The RCGP STB shall normally meet three times per annum


## 2) Decision making and Quoracy

- The meeting will be quorate if the chair and 9 members (with a broadly $50 / 50$ split of clinical leads and RCGP executive) are present.
- The RCGP STB will aim to operate by consensus decision-making.
- Between meetings, an executive core group of the RCGP STB, will act as a decision-making body for issues which require an immediate response, or which cannot be postponed to the next full RCGP STB meeting.
- The RCGP STB will ensure that consideration is given to equality, diversity and opportunity in its decision-making so that the Public-Sector Equality Duty is complied with.


## 3) Reporting and Liaison

- The RCGP STB will report, through the minutes, to RCGP Council
- The RCGP STB will report annually to the regulator on quality issues affecting the specialty.
- The RCGP STB will liaise with other College groups appropriate College committees and groups on areas within its remit.


## 4) Sub-committees

- The RCGP STB will determine what sub committees are required, and what structure these need, to oversee the full breadth of the STB's remit.
- Timings of sub-committee meetings will be set up so that they can report into the RCGP STB.
- The RCGP STB will establish and oversee the work of any new committees or short-life working groups that are deemed necessary to ensure the effective delivery of the GP SAC remit.


## 5) Attendance and Behaviours

- If a member cannot attend, they should send an agreed proxy to deputise for them. In some instances, where the STB has specifically appointed, recruited or requested someone for a role, if the role holder cannot attend for three consecutive meetings they will be asked to stand down and a new member appointed, recruited or requested.
- Expected standards of behaviour in terms of respect, courtesy and inclusion are required in line with the Nolan principles of Standards in Public Life, and fully inclusive and cognisant of current equality, diversity and inclusion principles.


## RCGP Specialty Training Board (GP STB) Glossary

- ACDC - Assessment Curriculum and Development Committee
- AoMRC - Academy of Medical Royal Colleges
- CCT - Certificate of Completion of Training
- CEGPR - Certificate of Eligibility for GP Registration
- CEGPR(CP) - Certificate of Eligibility for GP Registration: Combined Programme route
- CEGPR(AP) - Certificate of Eligibility for GP Registration: Approved Programme route
- COGPED - Committee of General Practice Education Directors
- CoPMeD - Conference of Postgraduate Medical Deans
- DPGPE - Director of Postgraduate General Practice Education
- GPST - GP specialty training
- GMC - General Medical Council
- GPC - General Practitioners Committee
- HEE - Health Education England
- HEIW - Health Education and Improvement Wales
- I\&R - Induction and Returner
- NES - NHS Education for Scotland
- NIMDTA - Northern Ireland Medical and Dental Training Agency
- NRO - National Recruitment Office
- QMTS - Quality Management and Training Standards
- RCGP - Royal College of General Practitioners
- UKFPO - UK Foundation Programme Office

