

**DEPARTMENT OF HEALTH, SOCIAL
SERVICES AND PUBLIC SAFETY**

PUBLIC APPOINTMENTS

**GENERAL MEDICAL CARE SUB-COMMITTEE
OF THE CENTRAL MEDICAL ADVISORY
COMMITTEE**

GENERAL MEDICAL CARE SUB-COMMITTEE OF THE CENTRAL MEDICAL ADVISORY COMMITTEE (GMCSC)

BACKGROUND

The General Medical Care Sub-Committee of the Central Medical Advisory was established in 1983 as a sub-committee of the Central Medical Advisory Committee (CMAC). Its function is to provide advise to the Department, including the Health and Social Services Executive (HSSE) on policy matters in relation to the development and organisation of medical services in the community.

The remit of GMCSC includes:

- to act as a standing sub-committee of CMAC;
- to invest its representatives with the authority to participate in CMAC'S deliberations;
- to advise on strategic planning for primary care medical services taking into account current trends and priorities;
- to advise on implementation of health policies which relate to and impact on primary medical services;

- to advise on possible future developments within primary health care provision and to propose appropriate research or feasibility studies
- to advise Department within principles and methods approved by CMAC on manpower issues related to primary care medical services

MEMBERSHIP

The Chairman and members of the sub-committee are appointed by the Department of Health, Social Services and Public Safety. The sub-committee consists of 22 members, inclusive of the Chairman. Members are appointed for their knowledge and experience of medical services in the community and are selected after consultation with the Area Medical Advisory Committee of each HSS Board, the British Medical Association (NI), the Royal College of General Practitioners (NI Faculty), Queen's University, Belfast, and the Directors of Public Health of each HSS Board.

The membership of the Sub-Committee includes eight ex-officio members:

- Chairman of the General Practitioners' Committee of the BMA (NI);
- Chief Executive of the NI Council for Postgraduate Medical and Dental Education;
- Regional Adviser in General Medical Practice;
- Chairman of Royal College of GPs (NI) Faculty
- Director of Public Health of each HSS Board.

The constitution and remit of the sub-committee are set out at Appendix 1.

MEETINGS

The Committee will meet two or three times a year but is empowered to call additional meetings if required. Committee meetings are of a half-day duration. Members must be willing to devote the necessary time to the appointment - approximately 4 days per year.

Members may also be invited to serve on sub-groups appointed by the Committee to advise on particular issues.

REMUNERATION

The Chairman and members are unpaid, however, they are eligible to claim allowances at rates set centrally for travel and subsistence costs necessarily incurred on Committee business.

PERIOD OF APPOINTMENT

Following a selection process, members are usually appointed for a three year term of office and will be eligible to serve for a maximum of two terms, i.e. 6 years. Reappointments will be subject to a satisfactory review of the performance of the individual and his/her suitability for reappointment.

GENERAL MEDICAL CARE SUB-COMMITTEE OF THE CENTRAL MEDICAL ADVISORY COMMITTEE

Role of Members

It is the member's role to:-

- share in corporate responsibility for the provision of informed advice to the Department, the Health and Social Services Executive and the Chief Medical Officer as appropriate;
- provide the views of all interested groups within his/her representative area of medicine (although appointed in a personal capacity);
- assist with the development of mechanisms and priorities to secure this advice;
- assist with the development of a yearly workplan;
- monitor progress towards the achievement of workplan targets.

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**GENERAL MEDICAL CARE SUB-COMMITTEE OF THE CENTRAL
MEDICAL ADVISORY COMMITTEE (GMCSC)**

PERSON SPECIFICATION

Members will be conversant with and be committed to the principles and objectives of the HPSS and will subscribe to the goals and functions of the Committee.

QUALIFICATIONS

Members must hold or be entitled to hold full registration with the General Medical Council and currently be entitled to practice.

COMPETENCIES

Nominees will be required to demonstrate that they possess most of the following skills and attributes:

- an in-depth knowledge of their specific area of practice and a general knowledge of the wider context of health care practice;
- an ability to think strategically and the ability to analyse complex problems;
- an ability to work as part of a team, including chairmanship skills;

- effective communication skills with fluent expression of ideas in both written and oral form;
- good interpersonal skills, developing relationships and networks within and without the Committee;
- the confidence to question and challenge other members in an objective manner, applying their own experience and expertise to the development of an independent view;
- sound personal skills such as time and stress management.

QUALITIES

Commitment

Drive

Diplomacy

Flexibility

Objectivity; and

Vision

Openness

Sensitivity

Self Awareness

Integrity

Probity

Independence

Responsibility

GENERAL MEDICAL CARE SUB-COMMITTEE OF CMAC

Constitution:-

1 GP from each LMC who is a current member of the corresponding AMAC

Chairman of the General Practitioners' Committee of the BMA (NI)

Chief Executive of the Northern Ireland Council for Postgraduate Medical and
Dental Education

Regional Adviser in General Medical Practice

Chairman of the Royal College of General Practitioners NI Faculty

2 members of the General Practitioners' Committee of the BMA (NI)

2 members of the Royal College of General Practitioners (NI Faculty)

2 members from QUB (1 general medical practitioner and 1 community
physician)

4 Directors of Public Health or their nominees

2 clinical medical officers

1 GP Registrar

Chairman of Central Medical Advisory Committee

Remit:-

- to act as a standing sub-committee of CMAC;

- to invest its representatives with the authority to participate in CMAC's deliberations;
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- to advise on implementation of health policies which relate to and impact on primary care medical services;
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