



## ANNUAL CONFERENCE OF LMCs 2013

### INTRODUCTION

General Practitioners Committee (GPC) and LMC representatives meet at the Annual Conference of LMCs. Proposals from individual LMCs across the country are debated, alongside those from the GPC. LMCs who have submitted motions on various topics are expected to debate these motions from the platform, according to Conference rules. The outcome of the debate determines the framework for the profession's negotiations.

The 2013 Conference was held in London on Thursday 23 and Friday 24 May and Sheffield LMC sent 3 representatives (Mark Durling, Tim Moorhead and David Savage).

### SPEECHES

After initial business, Laurence Buckman, GPC Chairman, gave a State of the Nation style address. This was Laurence's final report as Chairman of the GPC, which largely focused on Jeremy Hunt's anticipated speech on out of hours (OOH) care that afternoon. He gave a sterling defence of both the GPC negotiators and the profession and gave a strong warning to the Department of Health (DH) and the Health Minister that we are a demoralised profession, who are overworked, with lack of resources, and feel that we have been let down by the contract imposition, the pensions situation, and the Health & Social Care Act.

The text of the speech is available on the GPC website at:

[http://bma.org.uk/-/media/Files/Word%20files/Events/2013/May/LMCConferenceLaurenceBuckmanSpeech\\_230513.docx](http://bma.org.uk/-/media/Files/Word%20files/Events/2013/May/LMCConferenceLaurenceBuckmanSpeech_230513.docx)

### MOTIONS

The following motions were of particular interest:

#### The NHS in Crisis

*GRAMPIAN: That conference feels that general practice provides the taxpayer with superb value for money, but is concerned that as funding falls as a share of total health spending, governments are more interested in a cheap option, rather than a service which, if appropriately invested in, could provide many of the answers to the challenges facing the health service – Passed unanimously*

Denise Macfarlane proposed this motion, pointing out that of general public opinion, 8 out of 10 trusted their GPs, and only 2 out of 10 trusted their politicians. Surprise was expressed that this was as many as 2 out of 10.

## NHS Reforms/Health and Social Care Act

There followed a morning of concern about the Health & Social Care Act, the risks of Regulation 75 and the fact that general practice and Clinical Commissioning Groups (CCGs) had been set up to fail. Virtually all of these motions were passed unanimously.

## NHS111

There were a number of motions outlining the debacle with NHS111, including:

*MANCHESTER: That conference calls upon the government to commission an independent enquiry into the NHS 111 debacle - Passed unanimously.*

## Primary Care Workforce

There was a lengthy debate on the following motion:

*AGENDA COMMITTEE to be proposed by LEEDS: That conference notes the current workforce crisis in general practice is being accelerated by increasing workload and stress, and falling remuneration and morale, and calls upon the government to take urgent measures to:*

- (i) promote the recruitment of potential GPs – Passed unanimously*
- (ii) support the retention of existing GPs - Passed*
- (iii) reduce the number of GPs retiring early - Lost*
- (iv) reduce the barrier to returning GPs – Passed unanimously*
- (v) reduce the high number of GPs emigrating overseas – Lost*

## Contract Negotiations

One of the most interesting debates was with regard to the performance of the GPC negotiators, and whether they had lost the faith of the profession as a result of the outcome of negotiations over NHS Pension Scheme changes and the contract.

Kingston and Richmond representatives gave an impassioned speech criticising the negotiators' decision to advise the profession to strike over pensions. This was met with a stern rebuke and it was noted that the pensions issue was a national BMA policy and was not policy of the GPC.

Mark Durling spoke to the following motion:

*AGENDA COMMITTEE to be proposed by SHEFFIELD: That Conference:*

- (i) agrees the current GP contract is unfit for purpose - Lost*
- (ii) agrees that the current open ended 'insurance type' contract is unsustainable with falling real term resources - Passed*
- (iii) instructs GPC to ballot GPs on whether they should demand a new contract - Lost*
- (iv) believes that the current GMS contract requires too many deadlines to be met at the end of each contract year - Passed*
- (v) adopts the principle that if disinvestment occurs, such as PMS, then services cease and that this is made clear to the public - Passed*

Mark spoke well, and had a good reception from Conference. However, in reply Laurence stated that to renegotiate the contract at this point in time would not be wise. He feared that it would be playing in to the hands of the government, who would put it out as an Alternative Provider Medical Services (APMS) contract.

## GP Contract Imposition

There was a good speech from Dean Eggitt from Doncaster LMC on the following motion:

*AGENDA COMMITTEE to be proposed by DONCASTER: That conference:*

- (i) deplores the unilateral imposition by this government of the general practice contract whilst the profession was holding negotiations with the government in good faith – Passed unanimously*
- (ii) demands the withdrawal of all unilateral impositions and a return to bilateral contract negotiations – Passed unanimously*
- (iii) believes that in light of the Francis report on Mid Staffs that the government has shown that bullying in the NHS emanates from the top as demonstrated by its imposition of the GP contract for 2013-14 – Passed unanimously*
- (iv) believes that a unilateral GP contract imposition is likely to compromise patient safety and quality of care delivered and that patients are likely to see unintended and negative consequences from the changes imposed on general practice - Passed*
- (v) compels the GPC to investigate the legality of these actions through the European Courts and to take legal action against the Department of Health wherever this is possible - Lost*

### Commissioning of Care

Unfortunately, Tim Moorhead did not get to make his speech on the Quality Premium.

There was an interesting debate on the proposal that the GPC be instructed to take whatever measures are necessary to abolish the requirement for all practices to be members of a CCG. This was lost on an electronic vote 47% to 53%.

### The Future of General Practice and the NHS

Another interesting debate was:

*AGENDA COMMITTEE to be proposed by SCOTTISH CONFERENCE OF LMCs: That conference demands that:*

- (i) the government has a full and frank discussion with the public on how to fund the NHS if it is to remain free at the point of care - Passed*
- (ii) the NHS must define what services it can provide and what services it cannot provide - Passed*
- (iii) the NHS make an assessment of the cost of all services to ensure they are collectively affordable - Passed*
- (iv) it is time for conference to face the unpalatable truth that free at the point of contact can no longer be sustained – Lost on an electronic vote 68% to 32%.*

### Funding for General Practice

The following motion generated a heated debate:

*AGENDA COMMITTEE to be proposed by WILTSHIRE: That conference supports the development of a fairer funding formula for GP practices but:*

- (i) asks GPC to expedite a fairer funding formula that can be introduced before 2017 – Passed*
- (ii) believes that any formula must recognise the needs of the elderly - Passed*
- (iii) believes that any formula must recognise the needs of the rural general practices - Passed*
- (iv) believes that any formula must recognise the needs associated with social deprivation - Passed*
- (v) insists that any resources re-directed from general practices must remain within general practice for use in providing primary medical services – Passed unanimously*

### LMC Conference

In the afternoon it was noted that the next LMC Conference was going to be held in York in 2014.

There was a suggestion that there should be an Annual Conference of English LMCs in line with our Celtic colleagues, but this was lost.

## Restricting Referrals

*WILTSHIRE: That conference rejects the imposition of a scheme that demands systematic, prospective agreement by any third party of all non-two week wait consultant referrals for:*

- (i) referrals made by GP principals - Passed*
- (ii) referrals made by salaried GPs - Passed*
- (iii) referrals made by GPs working as a locum - Passed*

There was a strong voice against referral management systems.

## Clinical and Prescribing

*AGENDA COMMITTEE to be proposed by WAKEFIELD: That conference feels the government should:*

- (i) ensure that the supply chain for all medicines is secured as a matter of urgency*
- (ii) create a better system for informing GPs when medicines will be temporarily unavailable*

David Savage spoke to this motion, which was passed.

## Major Debate – the Hunt Proposals

There was a section of emergency motions following Jeremy Hunt's speech:

*That conference agrees with the Secretary of State that:*

- (i) GPs should not return to being personally on-call during evenings and weekends*
- (ii) GPs should be the champions for their patients*
- (iii) NHS staff are working harder than they ever have before*
- (iv) Targets and requirements of QOF, QP, and enhanced services are getting in the way of dealing with patients' agendas.*

This was passed unanimously.

*That conference accepts that GPs should take back responsibility for Out of Hours provision on the basis that:*

- (i) GPC negotiators can agree safe minimum funding*
- (ii) private providers cannot be involved as GPs will "responsible" for outcomes*
- (iii) all funding from NHS111 is transferred to GP OOH*
- (iv) OOH should be run and organised locally to best meet the needs of patients.*

This was lost.

*That given the English Secretary of State for Health's misrepresentation of GPs to the public and press, this conference has no confidence in him.*

This was lost.

## **SUMMARY**

The Conference was enjoyable from the point of view of the social aspect, networking and the dinner held to mark Trish Edney's last attendance at Conference as our region's GPC Representative. In summary, there was a mood of defiance and, perhaps, the Conference achieved a toning down of some elements of Jeremy Hunt's speech.

As ever, the LMC Executive would be happy to answer questions from GPs or Practice Managers regarding this year's conference resolutions and the formation of GPC policy via email to [manager@sheffieldlmc.org.uk](mailto:manager@sheffieldlmc.org.uk).