

To LMC Members

November 2021

Dear Colleagues

Everything Explained

I have been asked to clarify a number of acronyms and interrelationships involving the LMC and I hope circulating this summary will help.

Surrey and Sussex LMCs are a Confederation of five separate Local Medical Committees (Croydon, East and West Sussex, Kingston and Richmond, and Surrey) which exist independently, collecting levies in their individual names, but are served jointly by one LMC Secretariat. The LMC Board is known as ECCOSS (The Executive Committee of the Confederation of Surrey and Sussex LMCs) and comprises the Chairs of the five LMCs, together with the Deputy Chair of Surrey, in recognition that it is the largest of the five LMCs, with the LMC Chief Executive attending ex-officio.

Surrey LMC was inaugurated in 1912, and the original minutes of the earliest meetings are in the BMA archives. It originally covered the current London Boroughs of Kingston, Richmond, Merton, and Sutton, and much of Croydon. In 1965 these four Boroughs, and an expanded Croydon, joined the Metropolitan area, but Croydon, Kingston and Richmond opted to remain linked to Surrey LMC, and then became two separate LMCs. East Sussex LMC joined the Surrey and Sussex LMC Confederation in 2004, of interest is that prior to that date East Sussex LMC members received no honorarium. Surrey, by that time, was two LMCs, East and West Surrey, which then merged

ECCOSS meets approximately bi-monthly and is currently chaired by Dr Jeremy Harris, Chair of Kingston and Richmond LMC, with Dr Russell Brown, Chair of East Sussex LMC, being the Treasurer.

LMCs are funded by a capitation-based Levy paid by all primary medical service contractors (GMS/PMS/APMS) but only GMS contractors have payment of this levy written into their contract; however, in SSLMCs PMS and APMS contractors also pay this Levy. This is called the Statutory Levy, it is currently 39p per patient, and this has not changed for nine years. Combining the statutory Levy of five LMCs to fund one LMC Secretariat produces significant economies of scale for SSLMCs, which is the third largest UK LMC by population, covering almost 400 practices.

There is a separate levy paid by practices, again on a capitation basis, but not statutorily required by any primary medical service contract. This is currently 5.5p per patient; formerly called the voluntary levy, it is now known as the GPDF (General Practitioners Defence Fund) Levy. This is because it is paid over by the LMCs to the GPDF; the GPDF use this funding to support LMC conferences, and, in part, pay GPC members honoraria and supports the funding of the Secretariat of the BMA General Practitioners Committee (GPC) which negotiates on behalf of General Practice with NHS England, the Department of Health, and other organisations. The GPDF also provides support to LMCs.

The BMA part-funds GPC, but it is a larger committee than those of other branches of practice committees (such as the Consultants) and this disparity results in a split funding arrangement between the BMA and GPDF. It is also designed to create greater independence for GPs within the BMA structure.

Local Medical Committees for
Croydon, Kingston & Richmond, Surrey,
East Sussex and West Sussex

The White House T: 01372 389270
18 Church Road F: 01372 389271
Leatherhead
Surrey KT22 8BB www.sslmcs.co.uk

The GPDF role is to support General Practice and LMCs; further details are available at www.gpdf.org.uk. The current Chair is Dr Douglas Moederle-Lumb.

There has recently been a change in governance arrangements so that the majority of GPDF Board members are now nominated and elected by LMCs, on the basis that LMCs fund GPDF and therefore should direct its operational strategy.

LMCs are not allowed to use the GPDF Levy funds to support their statutory functions (that is, running the Secretariat) but because in recent years the GPDF has abated a proportion of LMC GPDF levies, SSLMCs has a source of funding to support other projects, for example, educational programmes, such as provided by Syder and Young and Practice Index, the Premises and Maternity Workshops, and wellbeing webinars, and can also make grants, for example most recently to support the Grow Your Own Health seed project in Sussex and to the newly formed Institute of General Practice Managers.

The GPC in England is an elected Committee; it includes constituency representatives, which in the SSLMC area are: -

- Dr Clare Sieber, East and West Sussex
- Dr Julius Parker, Croydon and Surrey
- Dr Richard Van Mellaerts, Kingston, Richmond, Merton, Sutton, and Wandsworth.

GPC members can be elected either via constituencies, or from the LMC Conference or the BMA Annual Representative Meeting.

Approximately a quarter of GPC members are LMC Officers. In SSLMCs clearly GPC representatives are closely associated with the LMC and this has significant advantages, one recognised challenge is that LMCs who do not have or foster such close GPC connections can be at a disadvantage in terms of disseminating information to GP colleagues and horizon scanning.

Voting GPC members (some BMA officials also attend GPC but cannot vote) elect a Chairman on a three-year term, the GPC England Chair was until recently Dr Richard Vautrey. Dr Farah Jameel was elected the new Chair and first ever female Chair in November 2021. Until recently the GPC Negotiating Team (now known as the GPC Executive Team) were elected from GPC but these roles are now subject to selection and interview. Each Executive Team member has a portfolio of responsibilities and works closely with a number of Policy Leads, new Executive Team members are recruited by a selection process, currently underway in response to the election of a new CPC Chair

The England and UK LMC Conference Chairs, Deputy Chairs and Agenda Committees are independent of GPC, and are elected roles drawn from those Conferences.

There are separate GPCs for Wales, Scotland, and Northern Ireland, and each of these nations have a number of LMCs, but many fewer than in England, and GPC England is a significantly larger Committee. These individual GPCs negotiate separately with their devolved Governments.

The Cameron Fund is 'The GPs own charity': it is the only medical benevolent fund that solely supports General Practitioners and their dependents, who find themselves experiencing hardship or poverty. The Fund is named after Sir James Cameron, a Sussex GP who was Chair of the General Medical Services Committee (the forerunner of the General Practitioners Committee) from 1964 – 1970. He oversaw the pivotal Charter for Family Doctor Services in 1966, which ushered in what many now consider a golden age of UK General Practice.

These are approximately 120 current LMC members in Surrey and Sussex LMCs, with at the last count approximately 40% being female, a significant evolution over the last two decades. The current Chairs and Deputy Chairs are:

Croydon: Dr Noureen Chaudery, Dr Sam Randle, Deputy Chair
 East Sussex: Dr Russell Brown, Chair; Dr Liz McCulloch, Deputy Chair
 Kingston & Richmond: Dr Jeremy Harris, Chair
 Dr Richard Van Mellaerts, Deputy Chair (Kingston)
 Dr Michelle Nunes, Deputy Chair (Richmond)
 Surrey: Dr Andreas Pitsiaeli Chair; Dr Larisa Han, Deputy Chair
 West Sussex: Dr Paul Vinson, Chair; Dr Mandeep Ahluwalia, Deputy Chair.

SSLMCs Committee members are elected on a constituency basis and membership is open to all GPs working locally who are on the NHS England Medical Performers List, regardless of their contractual status. At present two of the Chairs/Deputy Chairs work sessionally, and all Committees include sessional (employed and locum colleagues) as well as partners. The LMC does not charge an additional levy to locum colleagues and LMC Secretariat support is available to all GPs, Practice/Business Managers and the wider practice team.

SSLMCs is intending to appoint a Diversity Champion, in recognition of the continuing challenges facing GP colleagues with a range of protected characteristics and it is important that all colleagues feel supported and welcome on LMC Committees and that Committees are representative of the profession., though perhaps more vocal and opinionated. The LMC has also just circulated a Code of Conduct to members and is reviewing Committee constitutions.

The current Secretariat comprises:

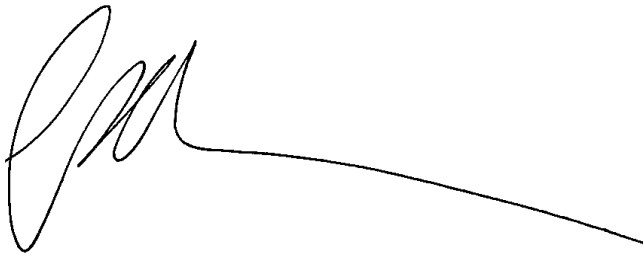
Dr Julius Parker	Chief Executive and Medical Director, Kingston and Richmond LMC
Dr Richard Brown	Deputy Chief Executive and Medical Director, West Sussex LMC [currently on leave]
Dr Darren Tymens	Medical Director, Croydon LMC.
Dr Karthiga Gengatharan	Medical Director, Surrey LMC
Dr Chrissie Clayton Dr Sangeetha Sornalingam	Medical Directors, East Sussex LMC [commencing early 2022]
Julie Freeman	Director: Contract Development & Liaison
Sarah Parsons	Associate Director: Practice Manager Liaison
Sandra Rodbourne	Business Administrator
Marianne Pumphrey	Executive Officer, with responsibility for Croydon, East and West Sussex LMCs
Jane Forster	Executive Officer, with responsibility for Surrey and Kingston and Richmond LMCs
Hilary Nicholls	Accountant

All LMC Directors look to provide a full suite of support to colleagues but have a range of particular professional interests available to assist if needed across the SSLMC area. Julie and Sarah's responsibilities extend across all five LMCs.

The title of this guidance was perhaps a little sweeping, but I hope this does provide a helpful background to SSLMCs and the GPC; I suggest if colleagues have other queries these are asked during Chair's business at forthcoming Committee meetings, so the answers are shared.

SSLMCs Directors and I now have over 40 years of experience working in LMCs and our aim is to provide a comprehensive support and advice service to all GP colleagues and their practices. For myself, the role remains the highlight of my professional career.

With best wishes

A handwritten signature in black ink, consisting of a large, stylized 'J' followed by a series of loops and a long, sweeping horizontal line extending to the right.

Dr Julius Parker
Chief Executive