LMC Representation of GPs

Supporting GPs to deliver safe, compassionate and high quality care to their patients.

Our vision is a profession of well supported and valued GPs in Essex, irrespective of contractual status, delivering safe and high quality care to their patients through -

- Caring for the entire person
- Enabling patients to experience continuous caring relationships with their GPs
- Appropriately skilled and trained GP teams
- Working and communicating effectively with all system partners involved in the health and wellbeing of patients
- Providing financially sustainable services
- Delivering care in premises that are fit for purpose
- Working with the security of robust workforce succession plans

Major functions

- Aiming to ensure sustainable general practice in Essex
- O2 Providing personal and professional support to GPs

The LMCs are funded entirely by GP practices in North and South Essex and receive no NHS or public funding. The work of the Committees increasingly involves closer collaboration with all other health organisations and it is our belief that genuine advancement for GPs will inevitably lead to benefits to patients.

Legislation enables the LMCs to be representative of all GPs. In representing the core values of the profession the LMCs strive to promote the values of -

Support

Commitment

Fairness

Collaboration



LMC Personnel

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North & South Essex Local Medical Committees

Supporting GPs to deliver safe, compassionate and high quality care to their patients

The History of the LMC

When the National Insurance Bill was first introduced in 1911, no provision was made for general practitioners to participate in the administration of the new state health insurance scheme. The British Medical Association was however determined that the profession should have a voice in its day-to-day running. It therefore ensured that locally elected committees of general practitioners (Local Medical Committees) were given statutory recognition in the 1911 National Insurance Act as the representative voice of the 'panel' doctors.

The 1911 Act required the Local Insurance
Committee (the forerunner of the NHS Executive
Council, the Family Practitioner Committee, PCTs and
latterly CCGs) to consult all general practitioners
participating in the health insurance scheme on a
wide range of matters via the LMC. After the LMCs
had been set up, a national committee was
established within the BMA to represent the interests
of 'panel' doctors in negotiations with government.
This national committee, the Insurance Acts
Committee, the forerunner of the General
Practitioners Committee (GPC), was recognised by
government as the authoritative voice of general
practitioners.

The profession supported the introduction of a state medical scheme but was strongly opposed to a salaried service; it recognised that in 1948 the loss of the independent contractor status would undermine the freedom of doctors to practice without state interference, and ultimately put patient

care at risk. This commitment to the contractor status remains a guiding principle of the GPC, but today the LMC represents GPs working in all contractual models, both salaried and self employed.

LMC Today

It is essential that the Committees are kept up to date with issues that are important and relevant to local GPs. Rapid change in the NHS in general, and in primary care in particular, makes the role of local members, in acting as a point of contact for local GPs and in gathering intelligence on local issues of concern, more important than ever.

A few current issues are -

- **01** GP practice funding
- **02** GP workforce/recruitment
- **03** Commissioning/development of primary care
- **Q4** GP workload and GP health
- **05** Primary Care Networks
- **06** CCG Mergers and Integrated Care Systems

The Role of an LMC Member

There are two committees, North Essex and South Essex, made up of locally elected GPs. The LMC aims to ensure that the views of all GPs in Essex are fairly represented on the Committees. GP Partners, Salaried GPs and Locum GPs are eligible to stand and vote. The committees meet monthly.

LMC members -

Promote the LMC - make constituents, other health organisations and professionals allied to medicine aware of who the representatives are and how they can be contacted. Email addresses and mobiles if necessary

- Keep abreast of LMC remit reflecting local intelligence and expertise
- Be available to constituents be responsive to constituents' needs provide the first line of support; mentorship, moral support and appropriate guidance
- Be available to represent Essex GPs eg sitting on specialist sub-committees, representation to NHS England
- Good liaison with the LMC office. Members need to keep the officers informed of local issues
- Contribute to LMC communications via newsletters, web-site and emails etc
- Provide induction/mentorship for new members
- Act at all times with discretion, preserve confidentiality where necessary, and declare any possible conflict of interest

Organisational Structure

