

# YORLMC Ltd – about us and how we support you

YOR Local Medical Committee Limited (YORLMC Ltd) is the brand name for Bradford & Airedale and North Yorkshire LMCs, also referred to as Branches of YORLMC. It is the professional voice for all NHS GPs and practice teams across the areas of North Yorkshire & York and Bradford, Airedale, Wharfedale & Craven. YORLMC Ltd is a gateway to pastoral care and provides personal and totally confidential support for GPs and practices in difficulty or experiencing major change. It also provides personal advice and support for practices on a wide range of issues.

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# 1. Our Roles & Functions

YORLMC is the representative body for all GPs in Bradford, Airedale, Wharfedale & Craven and North Yorkshire & York. Its purpose is to support and advise individual GPs and practices on all matters that affect them. The range of support offered by YORLMC covers a vast range of varied topics including:

- individual pastoral queries
- patient related queries
- practice level queries
- regional level queries

YORLMC Ltd currently supports approximately 1600 GPs, and circa 160 practices across Bradford, Airedale Wharfedale & Craven and North Yorkshire and York.

#### YORLMC is:

- The voice of General Practice locally. Its elected Members work for and support individual GPs, their practice teams and is also the wider professional voice of general practice.
- An Independent Body, representing the interests of General Practice, acting as its advocate. It remains independent from political constraints and the need to satisfy other interests. It is this unique status as independent representative bodies recognised by statute that allows LMCs to be so effective in standing up for and supporting their GPs. They are accountable to the GPs they represent, unlike CCGs who are ultimately answerable to NHS England and the Department of Health leaving LMCs free to speak up on behalf of GPs, practices and their patients when others cannot.
- A Professional Body that promotes quality and maintains standards of professional practice through support and educational activity in collaboration with other professional and educational bodies.
- A Representative Body that listens, debates and responds to feedback. YORLMC represents the views of its GPs, practice managers and the wider practice team to NHS England, CCGs and other national and local organisations.

YORLMC represents and supports General Practice to all stakeholders who wish to work with or alongside General Practice. This includes a wide range from within the NHS and external stakeholders. Our patch currently includes 7 hospital Trusts and 30 Primary Care Networks. External stakeholders include CQC, LPCs, Public Health England and many others. We aim to have a positive, collaborative style of working to produce the best outcomes for our members.

YORLMC Ltd is one of the larger LMC companies and is highly respected at both a local and national level. It is supported by a Corporate Affairs Team, (CAT) which is responsible for the administration of all aspects of YORLMC's work. The CAT is also responsible for keeping GPs and practice teams informed of current issues relating to primary care and beyond. It leads on communicating important messages, producing regular guidance and a monthly newsletter for each Branch area. It issues press releases where appropriate and also maintains the YORLMC website - <a href="www.yorlmcltd.co.uk">www.yorlmcltd.co.uk</a> The CAT is also responsible for corporate administration, membership, electoral services and finance.

YORLMC's role is not just about GMS/PMS services but about the majority of things that GPs and practices do in their normal working day. It takes a pro-active approach and is continually horizon scanning to ensure the Committees are informed, up to date and able to prepare practices for future changes – for example, YORLMC Officers act as spokespersons for local general practice; they are committed to working closely with the media to promote general



practice and they provide timely responses to media articles and provide interviews relating to local and national GP issues.

## 2. How is YORLMC funded

All LMCs across England are cited through various and successive Acts of Parliament as the statutory bodies who represent the interests of General Practice. Those statutes allow LMCs to "levy" a fee for their services from practices. This is deducted at source, meaning whilst it will not appear in your accounts it will be shown on your Open Exeter statements. This is called the statutory levy and was put into baseline as part of the 2004 GP contract and is therefore included in global sum. It is tax deductible as it appears in annual accounts as a practice expense alongside all other expenses. As it is not differentiated in any way it will form part of the total expenses figure.

It funds the cost of delivering the statutory and administrative functions of the LMC, including the finances necessary to run the Corporate Affairs Team which in turn supports the delivery of effective representation and active promotion of General Practice. Essentially, the Statutory levy funds just about every aspect of the LMC's work other than where grants from NHSE/CCGs for specific projects have been made.

Nationally there are in the region of 120 LMCs. They are autonomous organisations, so their structures and the services they provide vary significantly across the country. All LMCs are funded on a pence per patient basis. The patient population covered and the services individual LMCs provide vary significantly.

In addition to the statutory levy, LMCs collect a national Levy. This is a separate levy which is collected to fund the BMA's National Negotiating Committee (GPC) through the GP Defence Fund (GPDF) and supports national negotiations regarding General Practice. It also enables a contribution to be made to medical charities including the <a href="Cameron Fund">Cameron Fund</a>, a charity that supports GPs and their families in times of poverty, hardship and distress by providing short-term interest free loans. This rate is set by the GPDF and is also based on an amount per patient.

For the period 01 April 2019 to 31 March 2020, the statutory levy was 99p per patient. For the same period the national levy was 6ppp. The levy is calculated on raw (actual) list size. The whole amount for both is deducted from practices and paid across to the LMC.

YORLMC is non-profit making. Decisions about the Statutory levy are made by the <u>Board of YORLMC</u>. It has 8 Directors and 6 are GPs who pay or have paid this levy and they are very aware of the fact this is GP money. There is a robust governance structure and how the Statutory levy is used is carefully considered on an annual basis and the Directors are cognisant of their Director responsibilities. They are proud of what they do (as are the employed staff working within the Corporate Affairs Team) and work is delivered within a tight financial envelope.

The annual accounts are drawn up and audited at the end of the financial year on 31 March. They are presented at the AGM. As a limited company, the accounts are posted at Companies House and are available from the Corporate Affairs Team on request.

LMC Members and Officers are paid travel expenses and an honorarium to prepare for and attend meetings. YORLMC's Expenses Policy can be viewed <a href="https://example.com/here">here</a>

In taking decisions regarding the levy the Board of YORLMC takes into consideration changes in funding into General Practice, at times drawing on reserves in order to maintain existing services and to develop new ones. For the year 2020/2021 the Board of YORLMC has taken the decision



to keep the statutory levy the same as the previous year. In addition, the national Levy for 2020/2021 is reducing by 1.5p

# 3. What YORLMC delivers through its levy income:

#### a. Pastoral support

Over the last 2/3 years pastoral work has increased significantly. Whereas previously one LMC Officer largely provided support, more LMC Officers are now needed to support this work. Because this area of work is carried out confidentially GPs/practices will be unaware of the amount of support being given to individuals behind the scenes and the work involved.

# b. Wellbeing

To further strengthen and add much needed capacity to pastoral support, YORLMC has been developing a range of services that will support wellbeing and enable individuals to either look after their own health or know when to seek help before difficulties arise. Given the unprecedented pressures currently being experienced in General Practice as the landscape of the NHS changes rapidly, it is very important that this additional capacity is developed. It is also a feature of this work that it is providing equity of opportunity/benefit in terms of the support delivered to GPs, practice managers and the wider practice team and the feedback being received is excellent.

## c. PCNs

YORLMC remains committed to PCNs and system integration as the only sustainable route for maintaining the resilience of General Practice going forward. Despite the unusual events of the COVID pandemic, YORLMC is convinced that the only way to attract sustainable funding and resource into primary care is via the changes agreed during the contract negotiations in February 2020, and by supporting the system to ensure that the investment promised is fully realised within our communities.

It is clear that the only significant route for the investment of funding into General Practice will be via the PCN DES, and as an LMC we need to ensure that all funding is invested as promised. We are supporting our CD colleagues who currently, due to the pace of change and demands within the system, are being overloaded with unreasonable expectation placed on their time and resources.

It is vitally important as we move forward that all stakeholders within primary care are positively engaged with General Practice and PCNs; promotion of the identity and needs of each individual PCN locally, whilst ensuring the voice of General Practice remains strong at an ICS level is crucial.

The Chairs of YORLMC's North Yorkshire and Bradford & Airedale LMC committees, Sally Tyrer and Steve Patterson respectively are both also CDs. Consequently, they each have an intimate understanding of the day-to-day issues and challenges involved in being a CD and are well placed as first points of contact for CD colleagues. The network of support for CDs is further strengthened as they will work closely with Brian McGregor, YORLMC's Medical Secretary who will integrate the local information with contractual and national guidance from GPC and the BMA to ensure a solid link in communication from locality to ICS levels.

#### d. Legal



The services of LMC Law which includes a range of legal services relevant to practices are funded through the levy in the form of a retainer. HR and employment support are also offered at preferential rates. This provides all practices with effectively unlimited access and represents a significant practice benefit; a practice may not have needed this service but they may do so next week. It is an insurance policy and provides an expert legal opinion without worrying whether it is affordable.

There is also the opportunity to obtain preferential rates on services falling outside of the YORLMC Law service, for example partnership drafting and amendments to existing agreements which will be charged at discounted and competitive rates.

YORLMC has a responsibility to review its services to ensure services remain appropriate and value for money. They are therefore subject to periodic review and re-procurement.

#### e. Buying Group

YORLMC's Buying Group - provides discounted rates to practices and GP federations for a wide range of goods and services that they buy regularly. These are provided by LMC Buying Group approved suppliers whose discounts have been verified as being likely to yield significant savings compared with others in the market; and who have satisfied the Buying Group due diligence checks and customer satisfaction requirements which are reviewed regularly

# LMC Law & the Buying Group offer significant individual savings opportunities for practices

# f. Training and events

YORLMC's training model was developed in 2015 and launched 2016. Having recognised the changing landscape within General Practice since 2016 YORLMC is no longer facilitating training. Instead GPs and practices are signposted to YORLMC's network of training providers.

# g. Corporate Affairs Team

The 2 Branches of YORLMC are supported by the <u>Corporate Affairs Team</u> which is a small, highly focused and dedicated team. Individuals within the CAT have worked hard to secure funding from other sources that will supplement the levy. Specifically, the CAT has over the last 3 years, secured significant funds predominantly by bidding for funding from NHSE. This represents additional funding and is being used to support General Practice in a myriad of ways, including the development and supporting delivery of new services.

#### COVID-19

The established infrastructure has enabled BA & NY LMCs led by their respective Chairs and Officers and supported by the Corporate Affairs Team to initiate:

- Regular updates summarising the latest guidance and advice, signposting as appropriate
- Regular liaison with the CCGs, NHSE, LA PH teams and colleagues working in community pharmacy to ensure a collaborative approach to supporting practices
- Creation of a "Chain of Command" flow chart designed to provide clarity in terms of how you can engage quickly with the relevant individual within YORLMC.
- Daily status report, circulated to all practices and designed to feed into discussions with local partners such as CCGs, PCNs, Federations and NHSE to help practices obtain any



- support they require. This valuable data is also used to feed into and help strengthen the national discussion, for example, NHS staff testing.
- YORLMC has also reviewed and rejuvenated its Wellbeing offer which includes the
  creation of a hub to deliver the 'COVID19 Support Programme' which offers virtual
  mentoring support to GPs and other members of the practice team via video calling
  facilities.

Having an appropriately resourced LMC has enabled measures to be implemented from the start of this emergency to support General Practice, you as individuals, and the wider healthcare system.

# 4. Democracy

YORLMC Ltd is a democratic organisation. It has two primary committees that are elected to represent the membership:

#### Bradford & Airedale LMC

is the representative forum for all GPs in the Bradford, Airedale, Wharfedale & Craven localities (BAWC). It is chaired by Dr Stephen Patterson and has an elected membership of 17 drawn from across BAWC.

Constituent GPs and Practice Managers are encouraged to attend their locality LMC meetings and take part in debate with their elected colleagues. Further information is available <a href="https://example.com/here/beta-bases/">here</a>

# North Yorkshire LMC

is the representative forum for all GPs in the North Yorkshire & York. It is chaired by Dr Sally Tyrer and has an elected membership of 23 members drawn from across NYY

#### Succession planning

A combination of levy and reserves have been used to facilitate succession planning within the 2 LMCs. This involves training & shadowing by LMC Officers & Members to ensure we can continue to offer a professional and high quality service. As with practices, adequate succession planning is essential for us to ensure ongoing effective representation for our profession.

# 5. Our relationship with other organisations

YORLMC is the voice of general practice locally. Its elected Members work for and support individual GPs, their practice teams and also the wider professional voice of general practice.

Confusion occurs when people consider the role of the Clinical Commissioning Groups (CCGs), federations or GP provider companies, the Royal College of General Practice (RCGP) and the General Practitioners Committee of the BMA as representing the profession.

# Clinical Commissioning Groups (CCGs)



CCGs are constituted as clinically led commissioning organisations and all local practices are members of their CCG. This would normally mean either practices or individual GPs elect their peers to sit on the Board of the CCG. Their role is to provide their expertise in order to better commission services to the population. This should not be confused with the role of the LMC who represent GPs as providers.

It is incorrect that GPs who work for CCGs represent GPs, they do not, the CCGs have member practices not GPs as members.

# > GP Federations (or GP provider companies)

GP federation (or GP provider companies) have a role in providing services at scale and can represent only their member practices in terms of provision of services that lie outside essential services, additional services, local contracts (practice level) and QoF. If the provider company is speaking on behalf of practices, they must ensure they have a clear mandate to undertake this role.

#### Royal College of General Practice

The Royal College of General Practice is the national membership body that is focused on quality and training and is committed to improving patient care, clinical standards and GP training.

#### > The BMA & the GPC

The General Practitioners Committee (GPC) is a committee of the British Medical Association (BMA) and is recognised as the negotiating body for all NHS GPs. Amongst other things, the GPC negotiates with the Department of Health through the NHS Employers on GPs' terms, conditions and pay. Local Medical Committees are the link between local GPs and the GPC. Each LMC has a regional GPC representative. Currently our representative for North Yorkshire & Bradford is Brian McGregor. This way, the views and opinions of all GPs can be represented at national level via the 2 LMCs to the GPC.

# 6. Summary

YORLMC is an independent, not for profit organisation. It is not a trade union.

YORLMC has been actively supporting its constituent GPs throughout what has been a difficult transition period as a result of the evolving healthcare landscape.

YORLMC will continue to give advice and develop its services alongside these changing demands and will, through a process of regular review, continue to ensure that services are focussed on meeting constituent GP needs.

YORLMC will continue to ensure that YORLMC supports constituent GPs equally across the following areas:

- GP core contracts and the delivery of primary medical services
- GPs within PCNs
- GPs on federation boards or any other governing structure
- GPs as service deliverers engaging in federation work
- GPs as members of clinical commissioning groups
- Salaried GPs and Locums either within practices or engaged within PCNs or federations



Our role will continue to be to make advice and support accessible, relevant and beneficial to local needs. All other aspects of our role, both as a body recognised by statute, and as an independent representative body will remain unaltered.

For more information about YORLMC and our work, please visit our website.

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