



A monthly newsletter for North Yorkshire & Bradford & Airedale practices



YORLMC represents all GPs and their practices in:

- [Bradford, Airedale, Wharfedale and Craven](#)
- [North Yorkshire and the City of York](#)

Providing:

- ◆ [Support & Advice](#)
- ◆ [Pastoral Care](#)
- ◆ [YORLMC Law](#)
- ◆ [HR & Employment](#)
- ◆ [Training](#)
- ◆ [Events](#)
- ◆ [YORLMC News](#)
- ◆ [YORLMC Buying Group](#)
- ◆ [Regular updates](#)

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Message from Dougy Moederle-Lumb, Chief Executive, YORLMC Ltd

I am delighted to report that our 2018 YORLMC Annual Conference held on 18 October was again a great success with over 100 GPs, practice managers and practice staff attending the event at the Pavilions of Harrogate. The day provided attendees with support, guidance and inspiration with speakers from across the NHS but also from local projects and initiatives.



The day fea-

tured a diverse range of speakers that were able to provide input and insight into new ways of working including how physicians associates, medical assistants and GP associates can benefit the practice team. There were 2 workshop sessions; 1 delivered by MDDUS aimed at PMs on how to handle complaints and risk; and 1 for GPs delivered by the GMC Regional Liaison Officer to guide GPs on how to keep GMC from the front door. There was also a national update from GPC negotiator Dr Krishna Kasaraneni and a session delivered by HEE that sought to address workforce challenges through workforce planning. A further session looked at techniques practices can employ when planning the services they wish to deliver. We also welcomed back Andy Cope from the Art of Brilliance who provided inspirational sessions on 'Bouncebackability' and 'Mojo: a users guide'. I am delighted to share the fantastic feedback which has been received at [Appendix 1](#). Thank you to those who attended and made it a fantastic event, we hope you enjoyed it as much as we enjoyed hosting it.





**Practice staff work-
shop—How to best
handle complaints**

**New ways working:
Physicians Associ-
ates**



**GP workshop—How to
keep the GMC from the
front door—sorting fact
from Fiction**

YORLMC Corporate Affairs Team (CAT) - Contact Changes

We would like to draw your attention to recent changes within the Corporate Affairs Team relating to areas of responsibility:

Stacey Fielding

Associate Director of Liaison

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Stacey has taken up the new role of Associate Director of Liaison and will co-ordinate the work of the Yorkshire & Humber LMC Alliance. This will include the ongoing development of relationships with LMCs across Yorkshire & Humber as well as with NHSE and the BMA. Stacey will also work closely with the Bradford & Airedale Branch Chair & Vice Chair to plan agendas, produce meeting papers and undertake meeting follow up for the regular liaison meetings with the BAWC CCGs, NHSE and the Local Authority. Stacey will attend Bradford & Airedale Branch meetings and undertake meeting follow up. Stacey was previously Executive Officer – North Yorkshire & York.

Kate Mackenzie

Executive Officer – Bradford, Airedale, Wharfedale & Craven

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Kate will continue to work closely with the Bradford & Airedale Branch Officers to plan agendas, produce meeting papers and undertake meeting follow up for the AWC, City and Districts Divisions.

Kate and Stacey are the first point of contact for queries relating to Bradford, Airedale, Wharfedale & Craven GPs and practice teams.

Simon Berriman

Executive Officer – North Yorkshire & York

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Simon will continue to work closely with the North Yorkshire Branch Chair and Vice Chair to plan agendas, produce meeting papers and undertake meeting follow up for the regular liaison meetings with the NYY CCGs and NHSE. As well as attending North Yorkshire Branch meetings and undertaking meeting follow up, Simon also works in close liaison with YORLMC Officers, NYCC, CYC and the practice Federations.

Neil Bostock

Executive Officer – North Yorkshire & York

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Neil works closely with the North Yorkshire Branch Officers to plan agendas, produce meeting papers and undertake meeting follow up for the HaRD, HRW, SR & VoY Divisions. Neil was previously Executive Officer – Bradford & Airedale.

Simon and Neil are the first point of contact for queries relating to North Yorkshire and York GPs and practice teams.

Further information about roles and areas of responsibility within the Corporate Affairs Team can be viewed [here](#)

Safeguarding

YORLMC continues to remind GPs of their professional responsibilities to keep up to date in all important areas of general practice. Practice Managers will be mindful of CQC requirements with regard to practice staff. Further guidance and information relating to local safeguarding resources can be found on YORLMC's website [here](#)

Notice of YORLMC AGM

The 2018 AGM of YORLMC Ltd will be held on the afternoon of Wednesday 21 November at Heaton Mount, Keighley Road, Bradford, BD9 4JU. Please contact the Corporate Affairs Team if you would like to attend.

Partnership agreements

There are certain events in a partnership's lifetime that should trigger a review of the partnership agreement. These include new and retiring partners, disputes and changes in legislation. A properly constructed partnership agreement will reduce both financial and non-financial risk and provide a detailed framework on which the ongoing management and administration of the partnership can be based. Further guidance is available on YORLMC's website [here](#)

Pensions changes

Matt Hancock, Secretary of State, Dept. of Health & Social Care, has written to the BMA setting out his commitment to working with the BMA. The letter can be [read here](#). He also responded to BMA concerns about the impact of pension changes on GP retention. Growing numbers of doctors are facing problems created by recent pension changes and this is having a real impact on workforce retention. One of these problems is that the Annual Allowance is currently set at £40,000 and tapers down to £10,000 for higher earners, and those who exceed the standard Annual Allowance limit or the reduced tapered Annual Allowance are subject to a tax charge. This can either be made by paying the tax from savings via the tax return (taxed at the marginal tax rate) or by applying to use "scheme pays".

Further to several approaches made by the BMA,

including a recent letter to the Chancellor of the Exchequer, NHS BSA has now agreed to permit the use of "voluntary scheme pays" to those who may have exceeded their tapered limit, but not necessarily the standard limit. Additionally, the requirement to have a tax charge of £2,000 or more is no longer required. This will be available from 2017/18 onwards and more details can be found [here](#)

Whilst the BMA continues to challenge the application of annual allowance and other wider pensions issues, this change at least allows those members affected the option not to have to fund the charge from savings, investments or borrowings.

The BMA have updated their guide to annual pension allowance, which provides examples of how to calculate your annual allowance growth. Read the guide [here](#).

Consent form for the disclosure of medical records to solicitors

The BMA and Law Society have updated the joint template consent form for the disclosure of medical records to solicitors (for use in England and Wales). The template has undergone a refresh so that it reflects the General Data Protection Regulation. The aim of the template is to help improve the process of seeking consent and to ensure that patients are well informed about these disclosures. You can access the template form [here](#) and it is also available within the BMA [guidance on access to health records](#), and as part of the [ethics A-Z](#) – under C.

GDPR guidance is also available on YORLMC's website [here](#)

NHS standard contract tool kit for primary and secondary care

NHS England has published a NHS standard contract implementation toolkit to improve working practices and patient experience between primary and secondary care. The toolkit contains a practical guide to support local systems to work together to implement these changes. The BMA, along with other stakeholders, was involved in the development of this resource, which is aimed at reducing some of the avoidable transactional processes between primary and secondary care. Read the toolkit [here](#).

The BMA has also produced guidance and resources to help improve the interface between primary and secondary care, including guidance on prescribing and referrals, and template letters to support GPs and CCGs. Access the resources [here](#).

QOF in England 2017-18 report

NHS Digital have published the annual QOF in England report. The area of greatest change has been the recording of patients with depression, which increased by 0.9% to 9.9%. 537.5 points was the average achievement score for practices out of 559 points, with 12.5% of practices achieving the maximum points, up from 11.9% last year. Read the full report [here](#).

The report once again shows that despite high workload pressures impacting practices across the country, high standards of care are being provided to patients, and this is down to the hard work and dedication of GPs and their practice staff. The rising numbers of patients recorded as suffering from depression is a sign of how GPs are on the frontline in responding to people with mental health problems and provides more evidence as to why increased investment in wider community mental health services is urgently needed.

Mental Health Therapists in Primary Care guidance

The BMA has published a webpage following guidance by NHS England on the co-location of mental health therapists in primary care, which sets out key points from the guidance including the role of the mental health therapists, how premises costs will be dealt with and the BMA's position. You can view the webpage [here](#).

Regulation of Physician Associates

As previously reported, the introduction of statutory regulation for [Physicians' Associates](#) and Physicians' Assistants (Anaesthesia) has been announced. This follows a consultation on the regulation of the four Medical Associate Professions (MAPs) [in response to which the BMA called for statutory regulation for MAPs](#). So far there has been no indication of when full regulation can be expected or which body will have responsibility for regulation of these roles. It also has not been confirmed whether the remaining two MAPs professions will be regulated and that this remains under 'active consideration'. YORLMC will keep you updated.

Locum protocol FAQs

Following a number of queries from GPs and LMCs about the way CCGs are interpreting the practice entitlements under the SFE, GPC has been engaging with NHS England to clarify the specific clauses relating to payments for locum covering sick leave and phased return to work. NHS England has now released some [FAQs](#) to clarify to both practices and CCGs.

Letter to GP Practices regarding data quality checks on patient lists

NHS England sent the letter at [Appendix 2](#) to all GP practices to inform that PCSE will be recommencing data quality checks on patient lists.

National data opt-out

Practices should recently have received a letter from NHS Digital informing them that the codes for the 'type 2' opt-out have been retired and should no longer be used. A 'type 2' opt-out prevented a patient's confidential personal information from leaving NHS Digital for purposes beyond their direct care.

A new national data opt-out model, launched in May, replaces the 'type 2' opt-out. The new model provides an online facility for individuals to opt-out from the use of their confidential data for purposes other than direct care i.e. for the purposes research and health service planning. Patients who had previously registered a 'type 2' opt-out have had this converted into a national data opt-out. It is important that patients are aware of their right to opt-out. Despite efforts to raise public awareness as part of the Information Commissioner's Office 'your data matters' campaign recently published figures show that uptake of the national opt-out has been lower than expected.

Patients can set their opt-out preferences at: <https://www.nhs.uk/your-nhs-data-matters/> They will need their NHS number and a valid email address or telephone number which is on the GP record or on the Personal Demographics Service database to register their decision to opt out. Patients who are unable to use the online facility can use a phone helpline to manage their choice - 0300 303 5678. A paper print-and-post form is also available: <https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/other-ways-to-manage-your-choice/>

A patient poster and handout pack was sent to practices in June - these can be accessed at: <https://digital.nhs.uk/services/national-data-opt-out-programme/supporting-patients-information-and-resources>

The new opt-out is provided in line with the recommendations of the National Data Guardian in her 2016 'Review of Data Security, Consent and Opt-Outs'. NHS Digital are applying patients' preferences but there is a longer timetable for implementation across the rest of the system by 2020. The national opt-out will not apply in the following circumstances:

- the patient has given consent to a specific project (e.g. a medical research project)
- statutory requirements to share data (e.g. Section 259 of the Health and Social Care Act 2012 which requires providers to share data with NHS Digital)
- where there is an overriding public interest for the opt-out not to apply
- other specific circumstance - for full list of exemptions see: <https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/where-opt-outs-dont-apply/>

'Type 1' opt-outs will continue to apply and be respected. A 'type 1' opt-out prevents confidential patient information from leaving the GP practice for purposes other than direct care. Practices should continue to record 'type 1' opt-outs.

Prescribing of cannabis-based products

The new regulations to widen the availability of cannabis-based medicinal within the NHS came into effect 1 November 2018. Prescribing is restricted to a doctor on the GMC specialist register prescribing within their field of expertise where the cannabis-based product is an unlicensed 'special' medicinal product for use by a specific patient. Once a product receives a licence from the MHRA, it will be available for prescription in the same way as any other Schedule 2 drug.

The BMA has published some [Q&As](#) to explain what these changes mean, which include links to guidance from [NHS England](#), [BPNA \(for children with epilepsy\)](#), and [RCP and RCR](#) (recommendations on cannabis-based products for medicinal use). NHS England has also published a [patient leaflet](#) which helpfully states that **'You cannot get cannabis-based medicine from your GP - it can only be prescribed by a specialist hospital doctor'**

CQC provider Information collection (PIC)

The Care Quality Commission (CQC) has been engaging with the GPC on the development of its annual provider information collection (PIC), which is to replace routine two-yearly inspections for practices rated good or outstanding. More details are available in the attached CQC communication at [Appendix 3](#).

CQC state of care report 2017/18

The CQC published its [State of Care report](#), which is an annual assessment of health and social care in England. The report found that 91 % of GP practices were rated good in 2018, with a further 5 % rated outstanding, despite increased pressure on services. Once again, general practice has been found to be delivering the highest standard of care compared with other sectors, despite the workload pressures CQC themselves focus on. This achievement is down to the hard work of GPs and their practice staff, and provides further evidence of the benefit of the partnership model of working. The review also pointed out the need for additional support and investment in general practice and community based services.

Winter indemnity scheme

The winter indemnity scheme (WIS) will run again from 1 October 2018 to 31 March 2019. Matt Mayer, GPC England's policy lead on workload, has written [a blog](#) which will guide you through the WIS, and explain how to access it.

Specialty training application dates

Ahead of the opening of applications for specialty training on 7-29 November, Health Education England (HEE) has launched a *One career Endless opportunities Choose GP* [Facebook page](#) to keep up to date with news and views. There is more information on the [GP National Recruitment Office](#) website. If you would like the opportunity to work flexibly, pursue a portfolio career or develop specialist or clinical interests within general practice, HEE has a large number of registered GP trainees and trainers, newly qualified and experienced GPs who are waiting to help you with local or general enquiries. Email gprecruitment@hee.nhs.uk for further information.



The **Cameron Fund**

BMA House,
Tavistock Square,
London WC1H 9JP,
Registered Charity
No. 261993

The GPs' own charity

BMA House, Tavistock Square, London WC1H 9JP, Registered Charity No. 261993 The Cameron Fund is the medical benevolent charity that provides support solely to GPs in the UK. It provides grants and loans to assist doctors and their families experiencing financial difficulties due to short or long-term illness, relationship breakdown or hardship following the actions of regulatory bodies or former partners. An increasing number of requests are being received for assistance from GPs during re-training. Interest-free loans may be available towards the expenses encountered during a return to professional work. Anyone who knows of someone experiencing hardship is urged to draw attention to the Cameron Fund's existence. You do not need to be a member of the [Cameron Fund](#) to benefit from this charity but please consider becoming a member – it is free to join and the membership form can be downloaded <http://www.cameronfund.org.uk/sites/default/files/MembershipApplicationForm.pdf> and returned by email to info@cameronfund.org.uk General contact details are: Phone: 020 7388 0796

Email: enquiries@cameronfund.org.uk Web: <http://www.cameronfund.org.uk/content/link-us>

Investment in public mental health

The BMA has published a report calling for greater investment in public services to prevent poor mental health, in response to growing concerns from doctors about the sheer scale of the mental health problem in the UK. There is an urgent need for a bigger picture approach on the social causes of poor mental health to truly tackle the rising demand. Read the report [here](#).

Doctors' mental health

The BMA has published a new report on supporting doctors' health and wellbeing at work. The report sets out the physical and mental health challenges faced by doctors, the benefits of a healthy workforce and makes recommendations for improvements. Read the report [here](#)

NHS England also announced that a [new mental health support scheme](#) for all doctors working in the NHS would be launched. This builds on the existing [NHS GP Health Service](#), which was rolled out across England last year in response to GPC England's campaigning, and which has now supported over 1500 GPs and trainees suffering from mental health concerns. This service is very valued by GPs, with a recent survey suggesting 93% were likely to recommend the service to others and 88% said it had a positive impact on their wellbeing.

The BMA also provides a confidential, 24/7 counselling service and a peer support service, which can be accessed by calling 0330 123 1245. Visit bma.org.uk/yourwellbeing for more info.

Medicine supply issue updates

The Department of Health and Social Care (DHSC) has published the medicine supply update for October (Appendix 4). See also specific updates on Epanutin and Epipen Junior below.

Epanutin 30mg/5ml oral suspension

There is an impending supply issue with Epanutin 30mg/5ml oral suspension. Pfizer, the sole supplier, have experienced global delays in the manufacturing and are *anticipating a gap in supply from this week until early December when their next batch arrives*.

Epipen junior – batch numbers

Jext recently extended the shelf life of a number of batches of Jext 150mch and 300mch, but there was an error on the original Dear Health Care Professional letter that was attached in the Annex of the pharmacy validation protocol Q&A. Item 13 on the list is Batch number T6930, but the initial letter stated T9630. Jext states that there is no such batch labelled as T9630. Please see updated letter attached at [Appendix 5](#).

Supplies of Hepatitis B vaccine - update

The Department of Health and Social Care has informed us that MSD has issued a customer letter advising that the adult presentation of the Hepatitis B vaccine, HBVAXPRO 10mcg, is likely to go out of stock very soon. Further deliveries are not expected until early 2020.

This is an ongoing issue and the DHSC has been working with GSK on to ensure they are able to support the market during this time. GSK have advised they have good supplies across all Hepatitis B vaccines. Providers should, therefore all be able to continue to access GSK stock (including the Engerix B adult presentations) in line with usual requirements.

New QOF indicators for diabetes

NICE has published [new diabetes indicators](#) for consideration for inclusion in the Quality and Outcomes Framework (QOF). The GPC has been active in producing these new indicators which would support GPs to ensure that patients with diabetes receive care tailored to their individual circumstances. These new NICE indicators will now be considered as part of the current negotiations between GPC England and NHS England.

The GPC prescribing policy lead, Dr Andrew Green, commented that the new indicators will 'encourage GPs to ensure that patients with diabetes will receive care tailored to their individual circumstances. It is vital to balance the need of younger fitter patients for good risk-factor control with the importance of avoiding overtreatment in frailer people, and we are pleased that this principle has been incorporated into these indicators.'

Pregabalin and gabapentin

The [Home Office announced](#) that pregabalin and gabapentin are to be reclassified as class C controlled substances from April 2019 amid concerns people are becoming addicted to them and misusing them. This is in line with what the BMA has been calling for following an ARM resolution to lobby the appropriate authorities to make pregabalin a controlled drug. In response to this, Dr Andrew Green, GPC prescribing lead, said: "While an important drug for treating several conditions, there has been an increase in the prescribing of pregabalin in the past five years. Our members working in prisons are particularly concerned about problems of pregabalin addiction, overdose and violence towards staff who won't prescribe the drug. Granting pregabalin controlled status will help tackle this problem but the government must also invest in specialised support services for prescription drug dependence so people with dependence issues can receive the help they need."

Outstanding models of district nursing – GP survey

Dr Agnes Fanning, District Nurse and Queen's Nurse, has been commissioned by the Royal College of Nursing (RCN) and the Queen's Nursing Institute (QNI) to look at evidence-based models of outstanding district nursing that meet the needs of patients, families and carers and incorporate integration with the wider health and social care system. Dr Fanning is looking for survey contributions to assist her with essential data required for her final report. The views and comments of GPs are crucial, so we would appreciate if you could support this important piece of work by completing their short online [survey](#). The GPC Education, Training and Workforce Policy Group has made General Practice and community nursing one of its key policy areas over the last three years and is supporting the work of the QNI and the RCN in improving nurse retention and recruitment as much as possible.

Capsticks GP Masterclass Seminar

Please see at [Appendix 6](#) an invitation from Capsticks to attend a GP practice collaboration and merger masterclass seminar.

New primary care workload observatory

The RCGP Research and Surveillance Centre (RCGP RSC) and Surrey Heartlands Health and Care Partnership are leading an NHS England-funded project to create a new way to understand the demand on GPs. The new national 'workload and case-mix observatory' will be created at the RCGP RSC secure data and analytics hub at the University of Surrey and will collect and monitor data from a network of more than 350 practices across England. They are looking to increase the number of practices that are currently part of the network, and joining will provide practices with the opportunity to be at the forefront of this exciting new development. Further information about this project and how to sign up is available in the attached document ([Appendix 7](#))

YORLMC Buying Group & Seasonal Flu Vaccine Offers 2019-20

Seasonal Flu Vaccine Offers 2019-20

The LMC Buying Group has made the decision to work with all four remaining flu vaccine companies for the 2019/20 season to ensure they are in a position to help members no matter which supplier you decide to use next year. GSK and Pfizer **will not** be producing flu vaccines for the UK market for 2019/20 which leaves **MASTA, Mylan, Sanofi and Seqirus**.

The Buying Group has negotiated discounts on all vaccines that are currently available to order as well as other terms such as sale or return, reserves, early delivery etc. We know that there have been concerns over having a sole supplier for vaccines for patients aged 65 and over and at this point in the season this is still the case.

However, please read the new guidance ([Appendix 8](#)) from the October meeting of the Joint Committee on Vaccination and Immunisation (JCVI) for more information about new developments. The Buying Group will regularly update their website as more information is released.

To view all the offers available and other re-

sources, visit the LMC Buying Group website: <https://lmcbuyinggroups.co.uk/suppliers/flu-vaccines>. You will need to login or register to view the pricing.

For further information on LMC Buying Group member benefits or to speak to a member of the team, you can live chat via their website: <https://www.lmcbuyinggroups.co.uk/> or give them a call on: 0115 979 6910.

You can also now leave a review about your membership experience: <https://www.lmcbuyinggroups.co.uk/submit-review> and follow the LMC Buying Group on social media:

Twitter: <https://twitter.com/LMCBuyingGroup>

Facebook: <https://www.facebook.com/LMCBGF/>

LinkedIn: <https://www.linkedin.com/company/lmc-buying-groups-federation/>



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Registered as a Company limited by Guarantee.
Registered in England No. 6349731.

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