**LMC Conference 2016 - Frequently Asked Questions (FAQs)**

**What is the purpose of the LMC conference?**

Essentially the conference role is to create policy for future GPC and BMA action. All LMCs are invited to submit motions based on their concerns about health care, government policy, pay and conditions etc.

Those motions that are debated and passed become policy for GPC and or wider BMA in future negotiations with government policy makers.

**How does the LMC conference link with other conferences?**

Each “Branch of Practice”, i.e. Medical Students, Consultants, Junior Hospital Doctors, Medical Academics, Public Health Practitioners and the Armed Forces, holds a conference each year. Each conference debates motions submitted, and of those passed by conference, some form policy within the Branch of Practice negotiations and some are passed to the Annual Representatives Meeting (ARM) for further debate and to eventually formulate wider BMA policy.

Additionally, there are regional LMC Conferences held in Scotland, Wales and Northern Ireland. Motions passed from these conferences help formulate regional policy where there are differences between the GP contracts from the rest of the UK. They can also feed into the UK LMC conference or to the ARM directly.

**How do I submit a motion?**

LMC motions must be submitted electronically through the BMA website. Information about how to submit motions is included in the February mail-out to LMCs and all motions are submitted through your LMC.

LMCs are expected to seek motions from their members and for them to be discussed at one or more of their meetings. By submitting motions, LMCs are confirming that their motions have been endorsed by their members.

Please remember that proposers of motions should agree with the lead motion they are proposing.

**What is the timescale for submitting motions?**

The final deadline for submitting motions is **noon on Monday 14 March 2016**.

**What happens once a motion is submitted?**

All motions are collated by the BMA office staff into a database. Motions are then grouped into topics and each member of the Agenda Committee is allocated a number of different topics to scrutinise.

Motions are grouped further, with either one lead motion that summarises the topic or with a “composite” motion put together by the Agenda Committee as lead motion. This lead motion is the one that is prioritised for debate and if passed is what forms policy for the future.
**Why does the agenda have a part 1 and part 2?**

There are always more motions received than can be debated over the two days. Those put in part 1 are the motions that the Agenda Committee has prioritised for debate.

**How does the Agenda Committee decide which motions to put in part 2 of the agenda?**

The first filter is competence – if a motion is not competent, by virtue of factual inaccuracy, ambiguous grammar, poor construction etc then it will be placed in part 2.

The next filter is existing policy – a motion that is already existing policy, unless it is felt necessary to restate it to, for example, make a point to government, is classed as an ‘A’ motion, placed in part 2 and will be accepted without debate. LMCs can check all existing policies in the policy database.

The final filter is relevance and topicality. If the subject of a motion has been finalised prior to conference and debating the issue would be unable to meaningfully change what has happened, then it is less likely to be debated. In other words, a motion that has the best chance of being debated is one that is topical, accurate, clear and concise; which prompts good debate with a call for action that the Association or branch of practice can take forward.

**I wrote an absolute showstopper of a motion and it is nowhere to be seen – what has happened to it?**

All motions received will be in one of three places – part 1 or 2 of the agenda, or passed directly to the ARM if it is relevant to wider BMA policy. One example from 2011 was a motion from Scottish Conference on “ethical procurement of surgical instruments”. This was considered to be much more relevant to wider BMA action than just GPC action and so was passed to the ARM agenda.

All LMCs are notified by the GPC secretariat when a motion is passed to ARM, so if in doubt ask your LMC secretary.

If a motion has been lost (and we are only human after all and can occasionally make mistakes) please let the Agenda Committee know and we will track it down.

**When motions are debated, occasionally the representatives are asked to “take it as a reference”. What does this mean?**

A motion taken ‘as a reference’ means that the sentiment of the motion is what the BMA or GPC pursues for policy rather than the actual words of the motion. This may be because the actual wording is too restrictive or narrow or that the wording is ambiguous and so rather than lose the valuable sentiment, the motion is taken as a reference.

**Where can I get more information?**

Please go to the BMA website for copies of all the BMA mailings about conference.

For any further information please email kday@bma.org.uk