Conference of Representatives of Local Medical Committees

Supplementary Agenda

To be held on

Tuesday 10 May 2022 at 10.30 and Wednesday 11 May 2022 at 9.00am
To take place in York at the Barbican Centre, Paragon Street YO10 4AH

Chair Katie Bramall-Stainer (Cambridgeshire)
Deputy Chair Matthew Mayer (Buckinghamshire)

Conference Agenda Committee
Katie Bramall-Stainer (Chair of Conference)
Matthew Mayer (Deputy Chair of Conference)

Ursula Brennan (Eastern, Northern Ireland)
Paul Evans (Gateshead and South Tyneside)
Rachel McMahon (Cleveland)
Shaba Nabi (Avon)
Bethan Roberts (Bro Taf)
Elliott Singer (Waltham Forest)
Alastair Taylor (Glasgow)
Chosen motions

237 No motions received the required number of votes under standing order 27 in order to be given priority for debate at conference.

Amendments

238 Motion 8:

AGENDA COMMITTEE TO BE PROPOSED BY CLEVELAND: That conference, with regards to current workload within general practice:
(i) believes that patient safety is paramount
(ii) recognises that reducing the number of patient contacts will have an impact on access
(iii) calls on GPC UK to coordinate the creation of credible agreed workload measures of workload pressure that are acceptable to the profession and to the wider NHS
(iv) calls on GPC UK to further develop, publicise and strongly advocate worked-up plans to introduce safe workload limits for general practice that do not constitute a breach of contract
(v) calls on the GPCs to use data on safe workload to renegotiate the GMS contracts with workload limits in order to protect all general practice staff and patients.

ACCEPTED BY THE AGENDA COMMITTEE

239 Motion 9:

AVON: That conference believes urgent action should be taken to manage the workload / workforce mismatch within general practice and demands that the core GP contracts be reduced to the hours of 09.00 to 17.00.

ACCEPTED BY THE AGENDA COMMITTEE

240 Motion 11:

AGENDA COMMITTEE TO BE PROPOSED BY BATH & NORTH EAST SOMERSET, SWINDON & WILTSHEIRE: That conference requests an overhaul of processes for the modern general practice to account for services provided by the extended general practice team and demands:
(i) a public-facing campaign to introduce patients to the skills and expertise of the extended general practice team
(ii) that the NHS develop patient pathways and guidance to facilitate online booking into the correct allied health professional clinic
(iii) that Allied Health Professionals should be able to refer directly, without involving a GP, to other services
(iv) reimbursements for cover to be extended to all clinical staff employed in primary medical services.

ACCEPTED BY THE AGENDA COMMITTEE
## Errata

241 Motion 17 has been erroneously numbered:

17m should be 17d, 17d should be 17e, 17e should be 17f, 17f should be 17g, 17g should be 17h, 18h should be 17i, 18i should be 17j, 18j should be 17k, 18k should be 17l, 18l should be 17m, 18m should be 17n, 18n should be 17o.

242 Due to an error, there is no motion 18. The rest of the numbers in the agenda remain as originally published.

243 Motion 70 was erroneously assigned an A and should have been placed in Part 2.

## New Business / Emergency Motions

244 **Proposer - John Ip, Glasgow LMC**  
**Seconder - Tyra Smith, Lanarkshire LMC**

That conference believes that the LMCs of England, Scotland and Wales should determine by each nation whether to form an Association of LMCs or similar and be supported by GPDF to determine their own arrangements for representation.

**NOT ACCEPTED AS NEW BUSINESS BY THE AGENDA COMMITTEE IN ACCORDANCE WITH STANDING ORDER 60.6**

245 On behalf of GPC UK:

That conference is deeply concerned with regard to the four nation repercussions of the UK Government’s decision to procure a single supplier to provide a £240 million NHS Federated Data Platform across an entire home nation, and:

(i) notes the forthcoming GP Data for Planning and Research (GPDPR) programme has committed to transparency and the use of Trusted Research Environments

(ii) calls on the Government to engage with the BMA and identify ways to mitigate the potential risks to trust of any form of large-scale data resource making use of GP data particularly in regard to supplier suitability

(iii) calls for the BMA to insist that the Goldacre Review recommendations are implemented within the GPDPR programme for the sake of confidence of the profession and patients alike

(iv) warns that any future procurements involving the use of GP data which do not have the explicit support of the Joint BMA/RCGP IT Committee will not have the confidence of the profession

(v) instructs the BMA to take legal action on behalf of GPC if the commitments to TREs are reneged upon

(vi) recommends LMCs advise practices to challenge use of any platform at a local level that does not respect the Goldacre Review principles.

**Proposer – Mark Coley on behalf of the GPC IT policy group**  
**Seconder – Anu Rao, on behalf of the GPC IT policy group**

**ACCEPTED AS NEW BUSINESS, HOWEVER PLACED IN PART 2 DUE TO BEING PROCEDURALLY INCOMPETENT IN ACCORDANCE WITH STANDING ORDER 23.3.**
As no motion received the requisite number of 10 votes as per standing order 27, there are no Chosen Motions to be prioritised for debate. There are also no motions regarding new business as per standing order 23.3. Thus the Agenda Committee has determined an opportunity at 15:10 on Wednesday afternoon to bring the Conference Responses to the Themed Debates, as per standing order 53.8.

Agenda Committee will compose a number of Conference Responses following each Themed Debate. These will be shared on Slido for Representatives to familiarise themselves with on Wednesday afternoon preceding an opportunity for representatives to express their opinions via buttons on each response at this point on the agenda.

These votes will not create binding policy, they will provide a steer from conference, as the representative body of the profession, to guide the leaders of the profession to take forward and progress. The results will be published in the document, Conference Resolutions, following the close of business.