Conference of England LMC Representatives

Supplementary Agenda

To be held on

Friday 22 November 2019 at 9.30am
At The Light at Friends House, 173-177 Euston Road, London NW1 2BJ

Chair Rachel McMahon (Cleveland)
Deputy Chair Shaba Nabi (Avon)

Conference Agenda Committee
Rachel McMahon (Chair of Conference)
Shaba Nabi (Deputy Chair of Conference)
Richard Vautrey (Chair of GPC England)

Brian McGregor (Yorkshire)
Zoe Norris (Yorkshire)
Rakesh Sharma (Lancashire)
Elliott Singer (London)
Deborah White (Cleveland)
This supplementary agenda contains all items received up to noon on Friday 15 November 2019.

Items are grouped together into the categories of the main agenda (AC4). The agenda committee provides details of the proposed handling of these motions under the text of each.

### CHOSEN MOTIONS

309 Reminder that you can still vote for chosen motions, please use the link that was sent to you via your main covering email: **deadline 11am on 22 November.**

### ERRATUM

310 Motion 7 should be in parts and so should read:

**AGENDA COMMITTEE TO BE PROPOSED BY SHROPSHIRE:** That conference demands urgent action with regard to medication shortages to mitigate the impact:

(i) by recognising the adverse impact on patients
(ii) on GP workload
(iii) by pursuing additional resources to support practices having to do this work
(iv) by exploring changes, including legislation, to make pharmacists responsible for identifying appropriate and available alternatives
(v) by GPC England urgently entering into discussions with relevant bodies to enable pharmacists, when medications are not available, to dispense an equivalent preparation or dosing regime without the need to return the prescription to the GP for amendment.

### THEMED DEBATE - PCNS

311 Motions TD50, TD51, TD52, TD53, TD54 and TD55 should all be A motions

### AMENDMENTS

312 Request by SHROPSHIRE that the following amendments are made to motion 7 (ii):

**AGENDA COMMITTEE TO BE PROPOSED BY SHROPSHIRE:** That conference demands urgent action with regard to medication shortages to mitigate the impact:

(i) by recognising the adverse impact on patients
(ii) **by recognising the adverse impact** on GP workload
(iii) by pursuing additional resources to support practices having to do this work
(iv) by exploring changes, including legislation, to make pharmacists responsible for identifying appropriate and available alternatives
(v) by GPC England urgently entering into discussions with relevant bodies to enable pharmacists, when medications are not available, to dispense an equivalent preparation or dosing regime without the need to return the prescription to the GP for amendment.

Rejected by the Agenda Committee under Standing Order 29.
Request by CLEVELAND that the following amendment is made to motion 10, to add a part (iv):

AGENDA COMMITTEE TO BE PROPOSED BY CLEVELAND: That conference is disgusted with the lack of timely information provided in relation to the 2019 / 2020 GMS contract negotiation, and insists that in future years:

(i) final contracts must be provided at least 6 weeks prior to the commencement of that contract
(ii) any further annual changes to the PCN DES contract must also have associated adequate and timely legal and accounting advice prepared and released alongside the changes
(iii) QOF changes are only implemented once the QOF business rules have been updated on clinical IT systems to reflect the changes
(iv) QOF changes are only implemented once applicable clinical IT updates have been tested to ensure there are no negative patient safety consequences.

Rejected as an amendment by the Agenda Committee under Standing Order 29.

The Agenda Committee accepted this as new business, and part (iv) will be debated as a rider to motion 10 under Standing Order 30.

QUESTION GPC ENGLAND ON PROGRESS ON CONFERENCE RESOLUTIONS

Time is stated as 10.20, should be 11.20.

6 QUESTIONS WERE RECEIVED FROM MEMBERS OF CONFERENCE AND WILL BE DISCUSSED IN THE FOLLOWING ORDER

North Yorkshire LMC – Commissioning gaps and clinical safety
Devon LMC – Workload burden of fit notes
Devon LMC – Digitalisation of clinical records
Lincolnshire LMC – Workload
Tower Hamlets LMC – Out of area registration
Cambridgeshire LMC – Partnership review

MOTIONS FOR NEW BUSINESS

DORSET LMC:
That conference welcomes the publication of the report into sexism and harassment at the BMA and calls for:

(i) acknowledgement of the bravery shown by the BMA members in coming forward and highlighting these issues
(ii) acknowledgement of the particular problems within the branch of practice committees, especially the GPC
(iii) implementation of the recommendations made by Daphne Romney QC as soon as practical, with regular feedback on their progress
(iv) adoption of the recommendations within individual LMCs, where applicable.

Accepted as new business under Standing Order 56.6, to be inserted into Agenda: Part II (Motions relevant to UK LMC Conference), GPC England / Conference of England LMCs / LMCs in general.
SESSIONAL GPs COMMITTEE:
That conference accepts the independent report by Daphne Romney QC on sexism in the BMA and demands the publication of a formal action plan from GPC, with timescales, before the UK conference of LMCs in May 2020.

Accepted as new business under Standing Order 56.6, to be inserted into Agenda: Part II (Motions relevant to UK LMC Conference), GPC England / Conference of England LMCs / LMCs in General.

HAMPshire & Isle OF White LMC:
That conference believes that GPs must not be required to be involved in compulsory treatments on their patients and must be supported in only vaccinating patients giving informed consent without duress.

Rejected as new business under Standing Order 56.6.

DORset LMC:
That conference believes that primary care has been significantly supported by the introduction of reimbursements for absent GPs who may be off sick or on maternity leave. With the expansion of the primary care team, we call on NHS England to bring in similar processes for allied health professionals working in primary care.

Rejected as new business under Standing Order 56.6.

BRADFORD & Airedale LMC:
That conference believes that the funding for primary care medical services for patients in care homes is grossly inadequate for the workload involved and that:
(i) poor funding does not encourage practices to take on these patients
(ii) any new funding needs to be ‘per care home be’ and not per ‘per head of PCN population” to match that workload.

Rejected as new business under Standing Order 56.6.