

Statements of suitability for the role of GPDF Board Member

Candidates seeking election by members whose principal place of residence is in England

Dr Miriam Ainsworth (Avon LMC)

I have worked as a GP since 1994. For 25 years I was a GP partner working in the SW of the country. The practice area was varied with respect to the patient demographics but, a large patch covered a large deprived area. For the last three years, I retired from the partnership and I have been employed as a salaried GP. Due to personal caring responsibilities during Covid, I stopped working as a salaried GP and now I work on a sessional basis.

During my time as a GP, I have seen general practice veer through various phases. When I started, GP's were able to offer continuity of care and to provide family medicine. Fund holding enabled the practices to manage funding in an appropriate way for their patients. However, since the mid-nineties General practice has seen the resources decline and work load increase exponentially and this has resulted in poor morale amongst GP colleagues, GP's leaving the profession, poor GP recruitment, and practices closing around the Country.

I have always thought that general practice should be highly valued and respected by the DOH - Afterall, 80% of healthcare is provided by general practice. When I began to be aware of problems developing in our profession, I decided to join the Avon LMC to understand how the voice of general practice could be more loudly heard both locally and at higher levels. Ten years ago, I became one of Avon LMC's Directors; Deputy Chair six years ago; and finally Chair one year ago. At about the same time, I was also elected to the CCG and still serve as a clinical Lead for Integrated Care. I was also elected to the North Somerset CCG Governing Body until the three CCG's within BNSSG merged. I have been on a six months leadership course which has helped me as the Chair of the LMC.

During my time on the LMC and CCG, I have learned and also delivered a lot. Initially, it was a steep learning curve. Learning the new language of management speak within the CCG; learning how to wear different hats whilst working for various bodies and avoiding conflicts of interest; and being aware of and applying the Nolan principles;; understanding the politics; familiarising with

colleagues and developing relationships; and finally developing and trying to ensure general practice is at the centre of all decision making and general practice is enhanced.

The LMC is an important and essential statutory body working on behalf of general practice. This is seen locally, but also both the UK and England LMC Conferences are crucial in directing our GPC representatives in negotiating national policy for general practice with the Government. Our representatives work hard on our behalf. Over the years, many of us have expressed negative comments about some of the aspects of Conference and those comments have been listened to.

The GPDF has, over time, received criticism from various LMC's and that included Avon. However, GPDF is crucial to the support of LMC's, Conference and enabling negotiations. Some time ago, Avon was very supportive when Dr Douglas Moederle - Lumb and some colleagues were dissatisfied with the internal workings of GPDF. We are thankful that the GPDF Board agreed to a review of GPDF. Avon LMC, represented by myself and Chief Executive Philip Kirby, attended various GPDF workshops during this period to express our views on the transparency and future running of the GPDF. I believe that the GPDF Board needs to be more diverse and needs to be able and willing to listen to the LMC's and actively support the LMC's so that they, in turn, are responsive to their memberships. There has been willingness by GPDF to be more transparent and open and to think about and to run the Board differently. This has been welcomed.

I have expressed my interest in being elected to the GPDF Board and would appreciate that my nomination is supported. I have a wealth of experience and leadership skills. I believe in transparency and putting my energy in delivering the right outcomes for whatever organisation I am leading. The GPDF is essential in supporting and developing LMC's for the benefit of general practice. I am sure that general practice is going to be sailing through many very stormy waters in the next few years and general practice needs all the help that it can get to survive these challenging times. If I am elected, I will demonstrate the skill set needed to ensure the GPDF Board is proactive and works in a supportive and beneficial way for the LMC's. Thank you.

Dr Phillip Fielding (Gloucestershire LMC)

PROFESSIONAL PROFILE

I am a former Senior Partner at Royal Well Surgery, Cheltenham. I have spent 30 years in practice as a full-time GP in Gloucestershire working from a large multi-practice site serving 54000 patients in central Cheltenham, in a building I co-project-managed and completed in 1999.

In addition to General Practice, I have had the privilege of being a GP Trainer for 18 years and an Appraiser for 16 years. I have served on our Local Medical Committee for 26 years, including 7 years as Chair, 5 years as Vice Chair and now as Treasurer.



Much of my interest in supporting fellow GPs comes from a real understanding of the work pressures we are all under, the continued commitment to deliver a vital service and from the importance work that Primary Care, when resourced correctly, can give to our patient population.

REASONS FOR WISHING TO BE ON THE BOARD OF THE GPDF

In addition to being now registered as a Freelance GP, I am currently working as Deputy Medical Director of Gloucestershire Health and Care NHS Foundation Trust. I providing medical leadership to multiple community services, including 7 community hospitals and I oversee corporate governance and quality assurance for the Trust. Understanding the wider aspects of the health care system, I believe, provides the insight required to take on greater roles and responsibility included in this job.

Previous experience of the NHS corporate world from both chairing commissioning and provider committees for many years, coupled with a strong educational background, has made me well adapted to management and directorship appointments.

Put simply I wish to contribute further to the ongoing transformation of the GPDF and support the organisation to deliver sustainable value to its member organisations.

I believe in the ownership of one's responsibility and the upholding of the ethical credentials of honesty, transparency and accountability. My service, if elected, would help to offer a strong moral compass to guide and reflect on the needs of LMCs and continue to drive the desire to balance protection, support and opportunity to this role for the benefit of all doctors whatever their working practice and wherever they are in their career.

Again put simply the reason I wish to stand for the director post at the GPDF is that I believe in the company and in the value it can bring to the lives of everyday doctors and their families

CORE COMPETENCIES TO ACHIEVE SUCCESS IN THIS APPOINTMENT

An experienced primary care clinician with an extensive track record of providing clinical leadership and management over many years within Gloucestershire's Health Care Service.

The following competencies I believe would help to strengthen the current management board.

- Negotiating skills (At NHSE and CCG Level)
- Dispute resolution experience (Provision of local GP Partner Mediation Service)
- Mentoring and leadership (Appraisal lead for the county and Senior Trainer)
- Educational support (Former Trustee Gloucestershire's educational trust)
- Pastoral care (Formation of GP Safe House and Professional Friend)
- IT skills and presentations (Public speaking and media interview work)
- Military Planning Experience (Regular RMA Officer and TA for HM Forces 17 yrs)
- Amplitude for Risk management (Previous company director appointments)
- Working knowledge of running companies limited by guarantee
- Systems analysis Training using root cause analysis (Serious Complaints review work with PAG/PLDP)

To close this position, if selected by the shareholders, would be a great honour. Now with more time to commit fully to the role I would pledge to continue the work of strengthening the General Practice Defence Fund to secure future benefits which I believe this company can deliver for all our doctors and the wider profession.

I would like to ask and thank you for your support.



Dr Phillip Fielding BM DCH FRCGP

Dr Paul Roblin (Oxford LMC)

Elected by the LMCs of England, I have been a GPDF board member for the past 3 years. I am now a more experienced director than I was when I started in September 2017 and wish to continue supporting GPDF modernisation.

In the past, I have been a partner in an Oxford City practice for 20 years, then a locum GP and CEO of Berks, Bucks and Oxfordshire LMCs until after 15 years in post, I retired in 2018. I am currently the GPDF nominee for Oxfordshire, a role which is necessary to stand in this election

I am seeking re-election for the following reasons.

For most of my 3-year term as a director, I have been part of the GPDF team negotiating the funding arrangements between the BMA and the GPDF. When I became a director, funding cumulatively owed to the GPDF by the BMA over many years totalled several millions. After intensive negotiations, much of this was paid and the funding system reversed so that the GPDF now gives the BMA an annual financial grant. Negotiations on the size of the grant for the next 3 years are now at a critical stage and I wish to see them reach a successful conclusion.

In particular, I am standing so that the GPDF can avoid issues to do with continuity of personnel, which so slowed down the BMA team a little over a year ago.

The GPDF exists primarily to ensure GPs have adequate national representation. The BMA executive teams and policy leads negotiate a vast array of matters to do with general practice. Were we not to supplement the resources made available through the BMA, the political reach of GPs would be considerably less. However, the funding required to do this is well over a million pounds per annum, all provided to the GPDF via the LMC quota (levies). GPs and LMCs need reassurance that their contributions are wisely spent. This balancing act is why the agreement GPDF is hoping to reach with the BMA is so crucial .

As far as GPDF modernisation is concerned, when I first became a director the various UK GPCs had a significant influence within the board.

Many felt that as they were the beneficiaries of the funding flow, this represented a significant conflict of interest.

In partnership with the company secretary and the GPDF lawyers, I helped to draft new "Articles of Association" which have been subsequently ratified by the GPDF membership. This now means that LMCs rather than GPCs have the major influence on how GPDF funding is used and LMCs are regularly consulted about priorities for action and change.

I remain committed to the GPDF as an increasingly modernised organisation working in the best interests of general practice, and will do my best to ensure funding from GPs is used to maximum effect.

Dr Paul Roblin
Oxford

Candidates seeking elections by Members whose principle place of residence is in Scotland

Dr Keith J McIntyre (Lanarkshire LMC)

I am currently Chairman of Lanarkshire Local Medical Committee and have been involved in LMC's since 1994.

I am a practicing GP in Cambuslang for 27 years, and understand the grass roots issues.

I have a breadth of experience in GP OOH, Tribunal Work, Appraisal Work, War Pensions, Benefits Assessment, Coop Management / Company Secretary etc.

I am currently a Clinical Director in GP OOH within Greater Glasgow & Clyde.

I have been a director of GP owned companies since 1999 & understand the relationship between the owners – the GP's / LMC's, and the board of directors, who are trustees working on behalf of their shareholders.

I have been a director of GPDF for 3 years and have enjoyed watching the transformation of the company into a body that now represents LMC interests at the grass roots and have worked closely with colleagues on the board to ensure that LMC voices are heard.

The company has a wonderful history going back over a century – it is important that it continues to flourish.

I have experience of remuneration committees and am not afraid to ask the right questions and represent the interests of shareholders when questioning the executive directors.

I will bring continuity to the board and leadership from within.

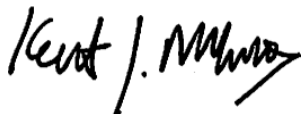
I believe it is important to keep sight of the important corporate rules within an organisation such as GPDF – this includes oversight of the executive team, verifying the auditors report, understanding and confirming the boards understanding of the investment advisors.

The GPDF has a significant role in supporting the work of our executive & negotiation GP teams within the 3 home nations and it is important that this connection is maintained between grassroots LMC's & the teams. I believe I bring this important quality to the table.

We should not underestimate the challenges that have been faced and worked through by the board of the GPDF over the last 2 – 3 years – the organisation has changed in accordance with the Meldrum report – I have extensive experience of corporate change management within GPDF and in other corporate life – having been a director of a company with over 600 shareholders, managing a company takeover, rolling a company into a health board entity, managing over 800 employees.

I look forward to the challenge of a further term if elected and will be interested in that event to an assessment of my skills inventory.

I will continue to represent and work for all stakeholders within the GPDF if elected.

A handwritten signature in black ink, appearing to read 'Keith J. McIntyre', with a stylized flourish at the end.

Keith McIntyre

Candidates seeking election by Members whose principal place of residence is in Wales

Dr Ashok Rayani (Morgannwg LMC)

Personal Statement

A GP with 31 years' experience as a principal in general practice. Engaged in medical politics at both a local and regional level for over 25 years and presently Medical Secretary of Morgannwg LMC. With a clear understanding of the expectations of the GPDF by LMC members and executives I am able to actively listen, support and influence the activities of individual practices, the LMC and GPDF in a balanced and dispassionate manner.

Relevant Experience

I have served as a Board Member on GPDF for three years and continue to work as a practicing GP successfully balancing the demands of both roles. I have actively contributed to Board discussions as well as participating in Board level recruitment panels.

I have previous experience of lead roles within GPC Wales which has enabled me to gain a better understanding of the importance of negotiation and robust governance in decision-making.

I have also previously undertaken the role of CEO of the Swansea out-of-hours co- operative, a not for profit community interest company. This position enabled me to gain a greater insight into company law, managing members' funds and the need to ensure governance and accountability at all levels.

I firmly believe that having a body that enables a four nation perspective is vital to ensure the interests of the profession at national and regional level. By contributing to discussions as a Board Member of GPDF I will provide constructive challenge and effective scrutiny to enable timely outcomes to be achieved.