

Frequently Asked Questions about GPDF

The following are a list of questions which have been asked previously:

Q. Is GPDF part of the BMA or GPCs?

A. No. The GPDF became completely independent of the BMA and its GPCs in 2018 following implementation of changes recommended in the Meldrum report.

Q. Who owns the GPDF?

A. The GPDF is owned by its Members – nominated representatives from the 126 Local Medical Committees across England, Scotland, and Wales. The principle of equal representation of all LMC has been confirmed as appropriate by LMCs, but this does not prevent engagement with groups of LMCs who choose to work closely together in secretariats or similar structures.

Q. What does the GPDF do?

A. Details of GPDF activity are contained on the website and are featured on the [home page](#). A one-page summary can be found in the information section of the website.

Q. What would happen in the GPDF did not exist?

A. If the GPDF were to be wound-up and it ceased all activity, the possible consequences could include: -

- A reduction in representation of GPs and general practice within the BMA structure. It is likely that the levels of payment would revert to the BMA payment structure to the detriment of GPs.

-The annual LMC conferences would be much reduced, in turn reducing the opportunity for LMC representatives to inform GPC and BMA of their views and priorities.

- Important legal cases of principle impacting national issues would not be funded.

- There would be less funding of collaborative and mutually beneficial initiatives across LMCs.

Q. How is GPDF governed?

A. A Board of Directors govern all aspects of the GPDF. The majority of members of the Board are members of LMCs elected by the nominees from LMCs. A minority are Independent Directors appointed by the Board to bring additional skills and wider experience to the benefit of the Board. Details of the duties of Board members can be found [here](#) and the current members of the Board can be found [here](#).

Q. Why does the GPDF require to keep financial ‘reserves’ otherwise known as ‘accumulated funds’.

A. The GPDF Accumulated funds have been built up over many years and would only ever be used for the benefit of LMCs and general practice. Good financial management requires sufficient funds to be held to maintain any future commitments (e.g., future grant payments to BMA to ensure appropriate GP representation). It is also recognised that the value of investments may go down in the future, as

was the case during the Covid-19 pandemic. The Directors believe it is important to ensure that adequate funds are available for any unforeseen eventualities.

A rebate of accumulated funds has been made to LMCs from time to time.

Q. Can the GPDF tell GPC / BMA what to do?

A. It is not the role of GPDF to tell GPC or the BMA what to do. The members of GPC are the elected representatives of BMA members, have a mandate from their members and are answerable to their members. The GPDF provides a grant to the BMA and can hold the BMA to account for the way the grant is used for the benefit of GPs and general practice. GPDF can lobby in support of general practice and specifically on behalf of LMCs.

Q. What if an individual or LMC is not happy with GPC? Will the GPDF take up the issue with the GPC or BMA on behalf of the LMC?

A. The GPC is elected by BMA members and it answerable to them. Any complaints must be raised directly with GPC and not with GPDF. The GPDF does not intervene on individual issues with GPC or BMA but can raise matters of principle in discussions.

Q. Why do LMCs have to collect a 'Voluntary' levy from GPs and pass to the GPDF? Can LMCs (or GPs) refuse to pass this to the GPDF on the basis that it is 'Voluntary' and not 'Statutory'?

A. The levy is classed as 'Voluntary' as it is being used to support trade union activity on behalf of GPs by the BMA, remembering that the BMA negotiates on behalf of all GPs, not just those who are BMA members. The GPDF view is that the funds are gathered on a 'mutually beneficial' basis. All LMCs and GPs collectively benefit and therefore it is appropriate that they all jointly fund.

Q. How is the quota payable by LMCs to GPDF calculated?

A. It is calculated on a per patient basis, linked to the population within each LMC, and the anticipated level of funds required. In recent years the payment has reduced for 6 pence per patient per year, to 3 pence per patient (correct at 2021), and in some cases the accumulated funds (reserves) have been used to maintain expenditure with reductions in income.

Q. What happens if an LMC chooses not to pay their Quota?

A. The GPDF would engage with them to understand their reasons for non-payment and look to resolve any issues to their satisfaction. However, if it proves impossible to reach an agreement and the LMC continues not to pay their contribution, it is possible they would be suspended from membership and not have access to some or all the benefits of membership. Suspension requires a majority of LMCs to agree.

Q. Who decides how much the GPDF Board members and Senior Management are paid?

A. An independent Remuneration Committee has been established to provide recommendations on future levels of payment. This is Chaired by an experienced, independent individual with no links to GPDF or LMCs, supported by two individuals from LMCs who are not members of the GPDF Board.

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