



# National Association of Local Medical Committees Consultation with LMCs

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- There have been a number of comments, discussions, and requests over the last few months (including a conference motion) for GPDF to consider the development of, or support for, a **‘National Association of Local Medical Committees.’**
- The GPDF has a role to **‘listen,’ ‘support’ and ‘influence’** on behalf of LMCs and their GPs across England, Scotland, and Wales.
- Therefore a programme of consultation and discussion has taken place to fully explore the issues

This is the third element of a considered consultation process designed to approach this important issue with care.

- An initial survey in December 2021 established a majority of LMC participants wished the potential development of a National Association of LMCs to be progressed.
- A series of Workshops in January/February 2022 helped provide clarity on what should and should not be included with the scope of remit of NALMCs.

The purpose of this consultation was to provide an opportunity for LMCs in England, Scotland and Wales to engage and provide their views to either **confirm or reject** the interim conclusions in relation to:

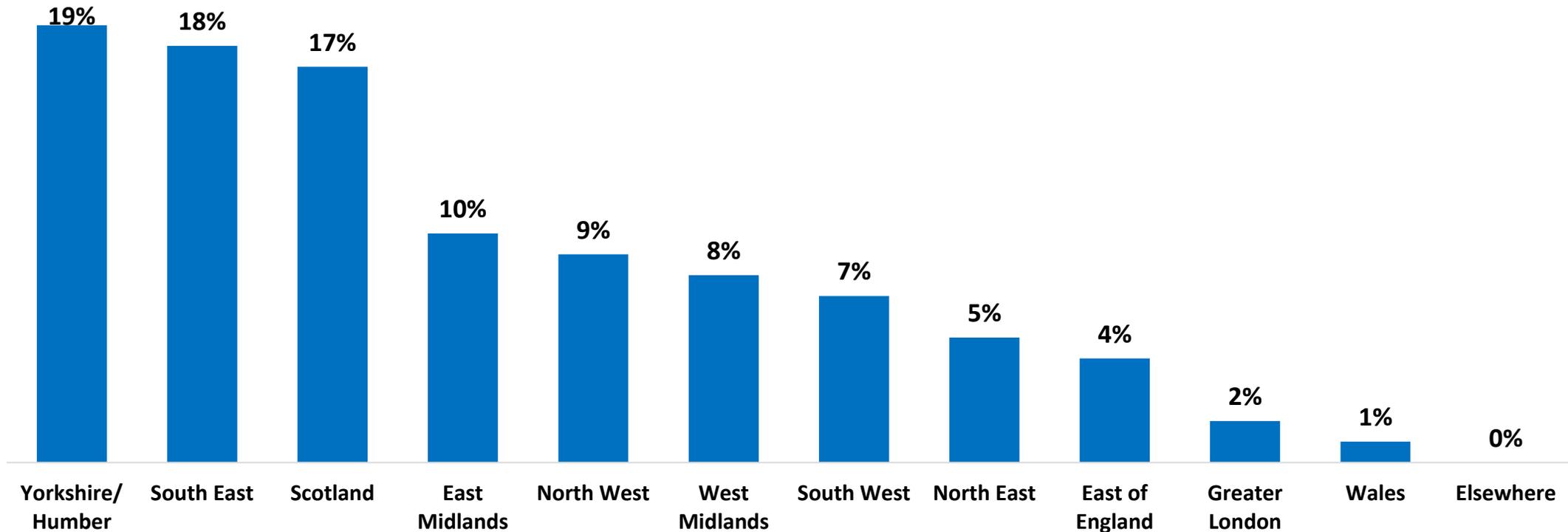
- What should a NALMCs do?
- What should it not do?
- How should it be structured? (GB wide or England, Scotland, Wales)
- How it should be funded?
- Who should be members?
- And allow the opportunity for any further comments on the issue

This consultation does not seek to reach a conclusion – and costed options are planned for later in 2022 to allow LMCs to make an informed decision.

- A detailed questionnaire was developed and agreed with GPDF in advance
- Invitations to take part in the research were issued on Thursday 7<sup>th</sup> April and the consultation closed on Friday 15<sup>th</sup> April
- Data analysed via SPSS survey analysis software to produce statistical results (closed questions) and verbatim comments (open questions)
- A total of 113 individuals from 51 different LMCs accessed the survey. *Note: not everyone answered every question*
- The findings were intended to be reported on a 'nation' basis in order to have clarity of views in England, Scotland and Wales.
- However only two people in Wales took part therefore results are shown as Total, England and Scotland

# Composition of participants

# Participation was offered to all LMCs – but not all took part. Therefore participation is not geographically balanced



*Q12. In which area of the UK are you based?*

# LMC Participation

113 individuals from 51 LMCs

Ayrshire & Arran	1
Bedfordshire	2
Birmingham	3
Bradford & Airedale	4
Calderdale	1
Cambridgeshire	1
Central Lancashire	2
Cheshire	5
Cleveland	1
Croydon	2
Derby and Derbyshire	5
Devon	1
Doncaster	2
Dorset	2
Dudley	1
Dyfed Powys	1
Fife	2
Forth Valley	4
Gateshead & South Tyneside	1
Glasgow Ltd	2
Gloucestershire	2
Grampian	1
Hampshire & IOW	1
Herefordshire	1
Highland	2
Hull & East Yorkshire	1
Kingston & Richmond	1
Kirklees	1
Leeds	3
Liverpool	1

Lothian	5
Morgannwg	1
Newcastle and North Tyneside	1
Norfolk & Waveney	1
North Yorkshire	4
Northamptonshire	6
Northumberland	1
Rotherham	2
Sheffield	3
Shropshire	1
Somerset	2
Staffordshire North	1
Staffordshire South	2
Suffolk	2
Surrey	1
Sussex East	7
Sussex West	11
Tayside	1
Western Isles	1
Wigan	1
Wirral	1

England 92  
Scotland 19  
Wales 2

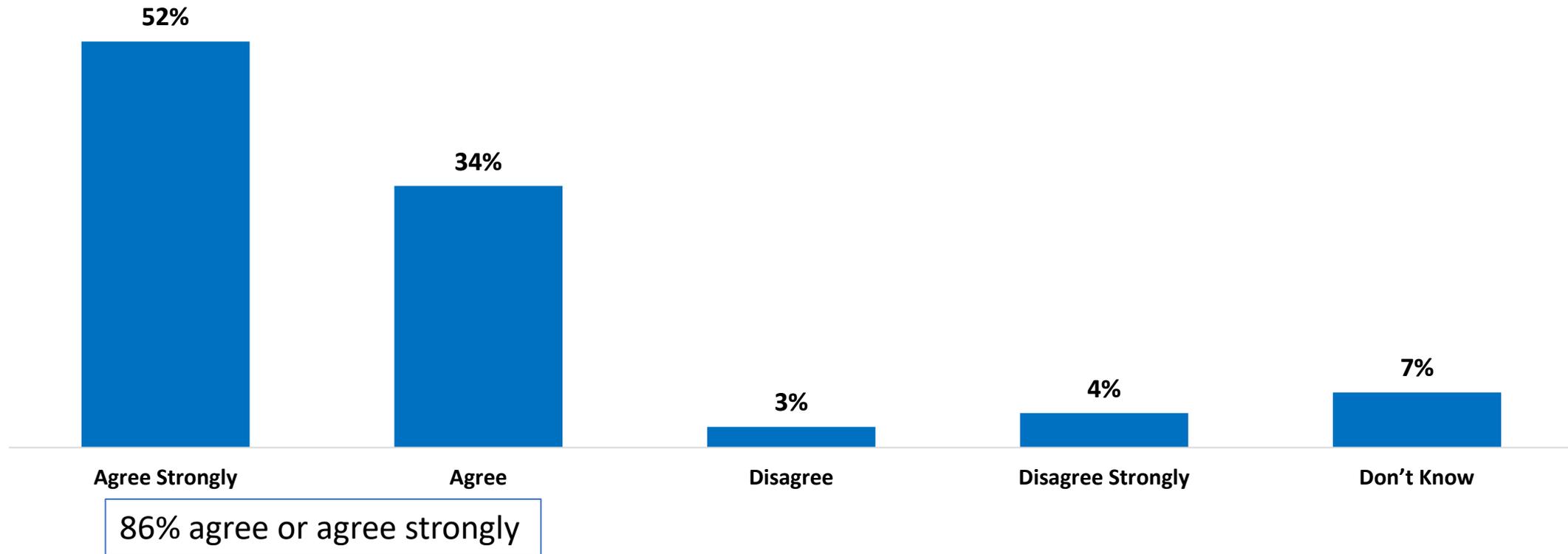
# Key Findings Summary

# Conclusion of consultation

- *There is clear and strong support for a NALMCs from LMCs in England, with confirmation of many aspects*
- *Participants in Scotland hold less enthusiastic views on most issues related to NALMCs, with many elements having a balance of 'for', 'against' and 'don't know'*
- *LMCs in Wales have not engaged sufficiently to establish an understanding of opinions*
- *It is legitimate, based on all 3 elements of consultation activity to date, to progress with establishing clear, costed proposals to allow LMCs in England, Scotland and Wales to make an informed decision in 2022 as to the formation of: -*
  - *A single GB wide NALMCs or*
  - *Individual nation focussed ALMCs – for England, Scotland, Wales*
  - *Preference of structure (e.g. within GPDF / external to GPDF)*
  - *Preference of approach to membership*
  - *Preference of approach to funding*
- ***It will be for LMCs, in each nation, to determine if a NALMCs should be formed or not.***

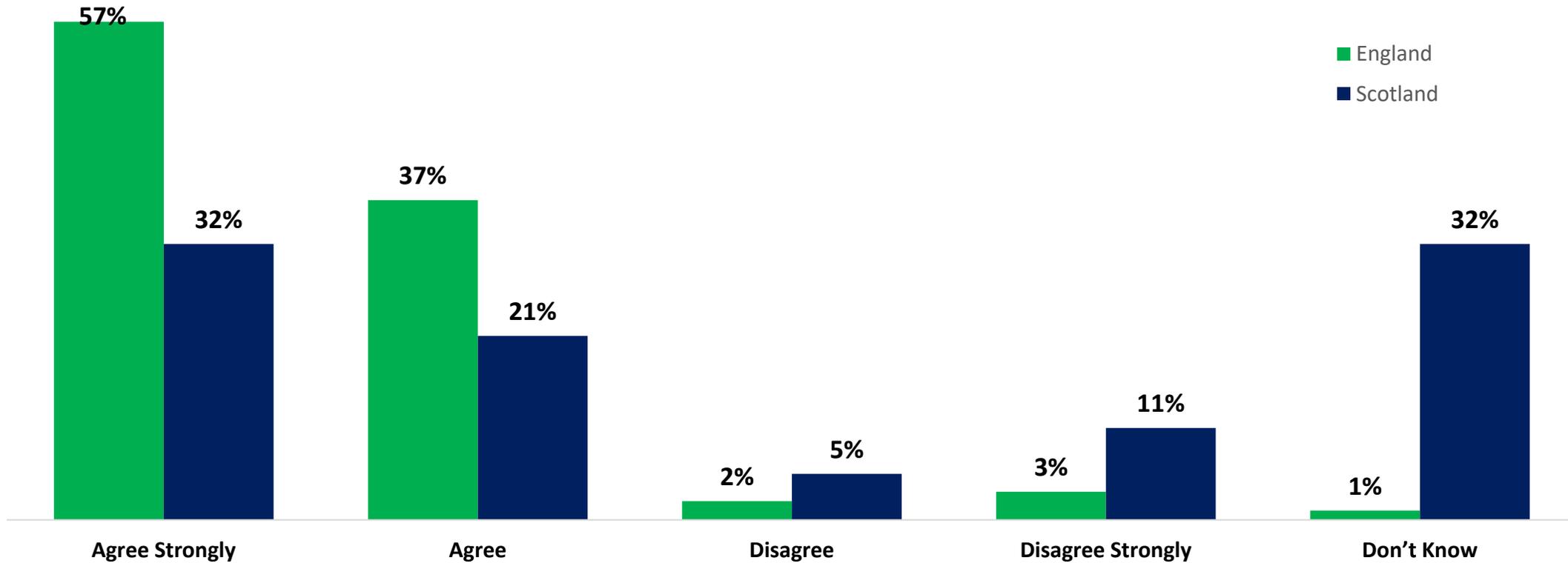
# Potential areas of activity of NALMCs

# More than 8 out of 10 LMCs consider a NALMC should seek to actively support LMCs – regardless of size or services provided



*Q1. To what extent do you agree or disagree that a NALMC should seek to actively support LMCs – regardless of their stage of development, the size of the LMC or the services they provide to their GPs.*

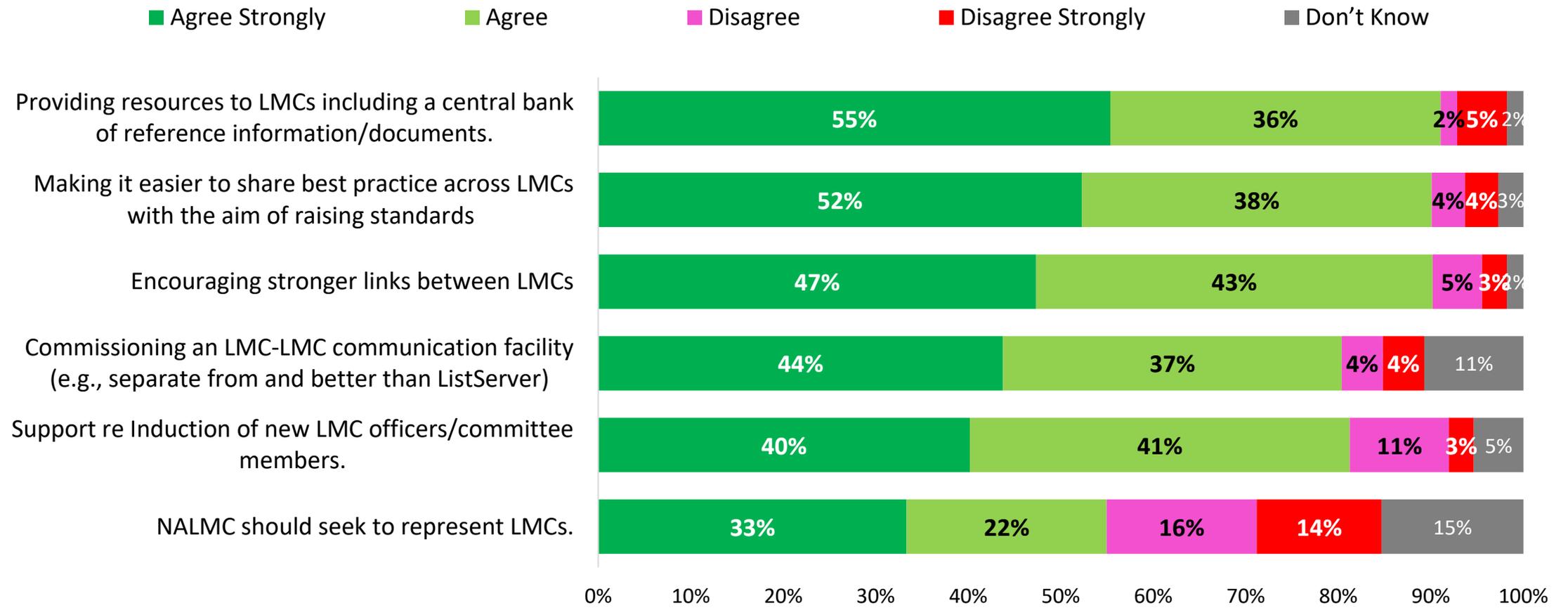
# There is more certainly of agreement in England



England: 94%  
Scotland: 53%

Q1. To what extent do you agree or disagree that a NALMC should seek to actively support LMCs – regardless of their stage of development, the size of the LMC or the services they provide to their GPs.

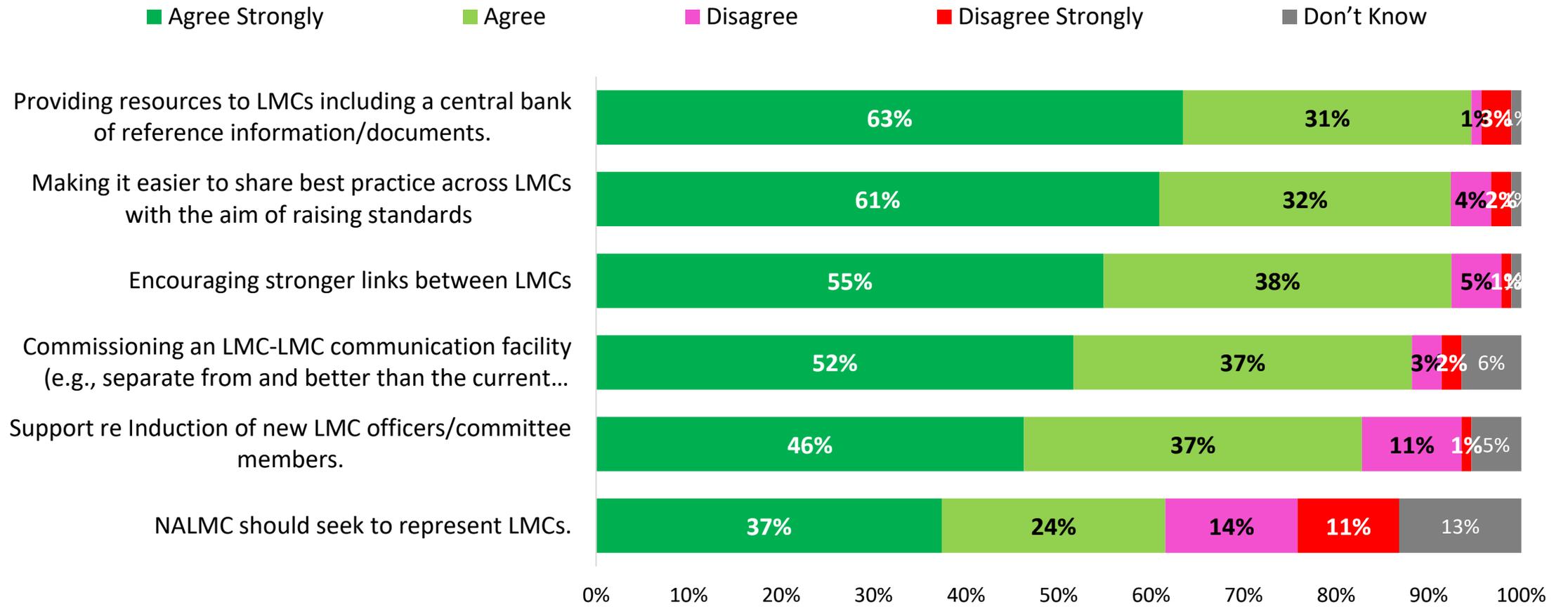
# Majority endorsements of the potential areas of activity which could be within the scope of the NALMCs.



Q2. To what extent do you agree or disagree with the following issues should be part of the remit of a NALMC?

Base: (Q2) - 112

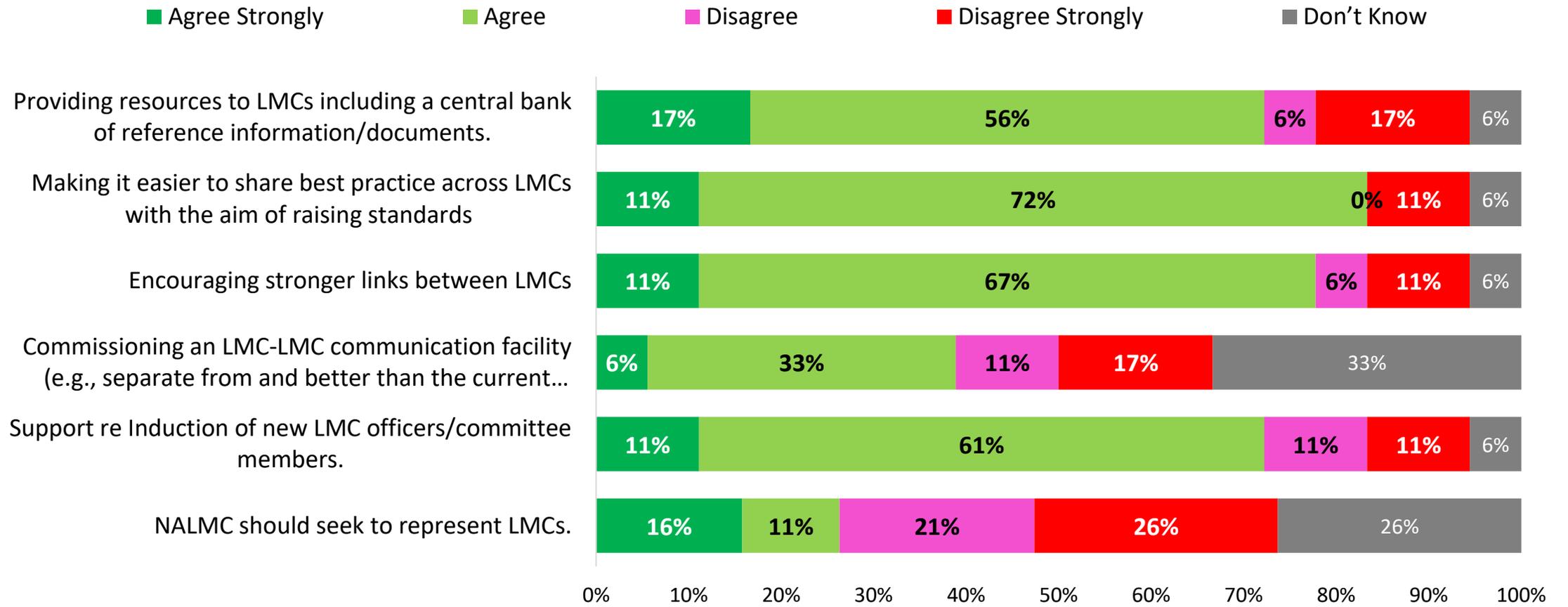
# England: Majority endorsements of the potential areas of activity which could be within the scope of the NALMCs.



Q2. To what extent do you agree or disagree with the following issues should be part of the remit of a NALMC?

Base: (Q2) - 93

# Scotland: Some differences with only a minority supporting a replacement to ListServer and NAMLCs representing LMCs.



*Q2. To what extent do you agree or disagree with the following issues should be part of the remit of a NALMC?*

Base: (Q2) - 19

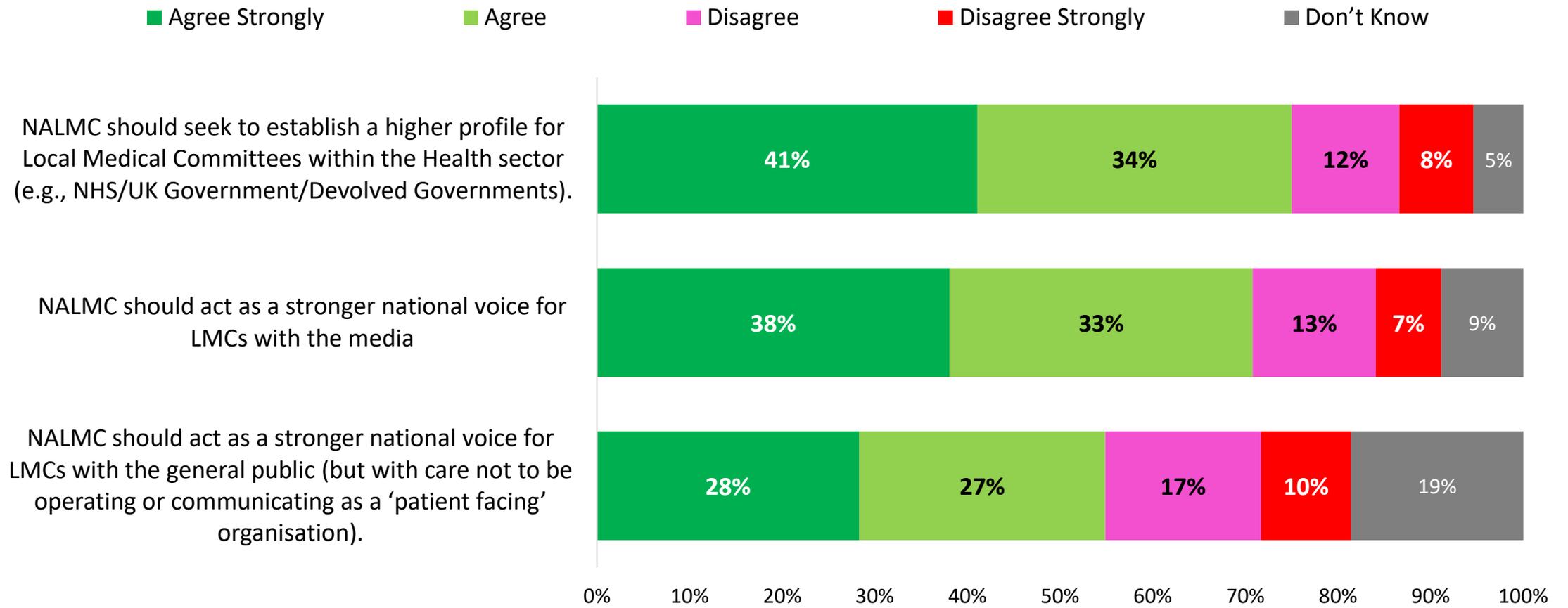
# Summary: Four potential areas of activity which could be within the scope of the NALMCs have greatest level of support

Net agree comparison

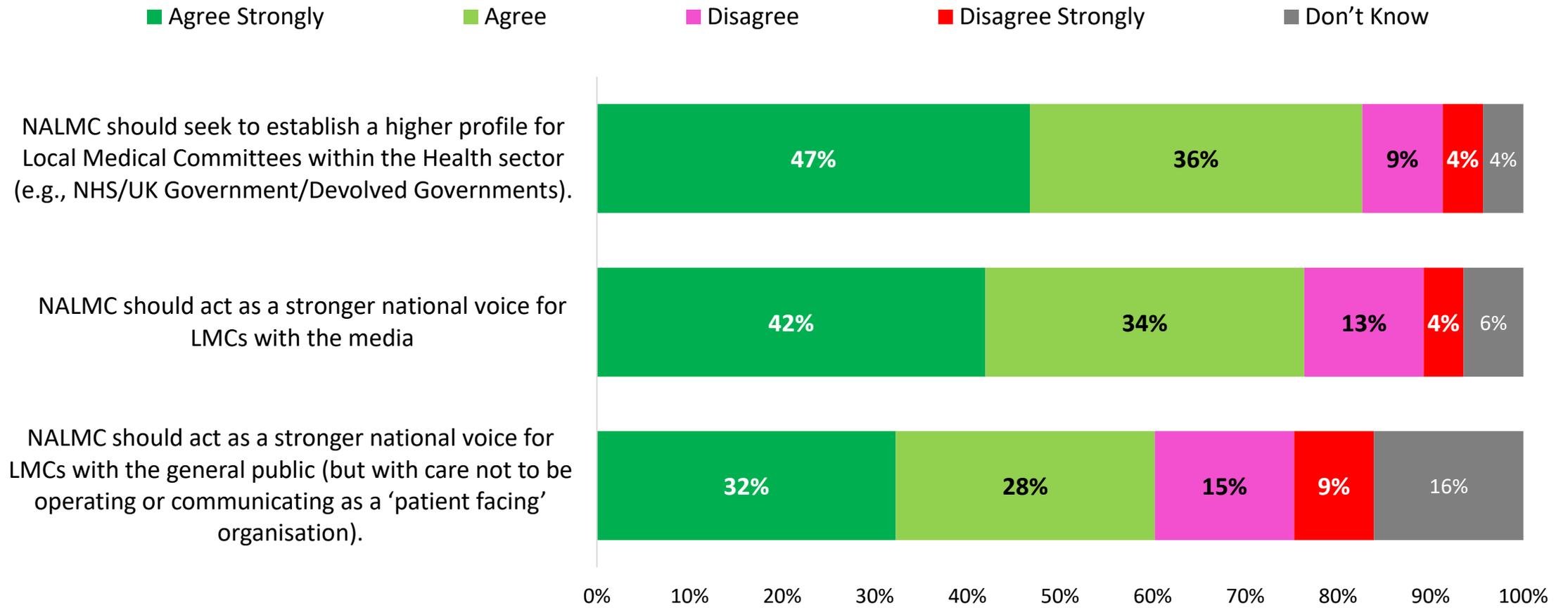
	Total	England	Scotland
NALMC should seek to represent LMCs.	55%	61%	26%
<b>Support re Induction of new LMC officers/committee members.</b>	<b>81%</b>	<b>83%</b>	<b>72%</b>
Commissioning an LMC-LMC communication facility (e.g., separate from and better than the current BMA operated ListServer)	81%	89%	39%
<b>Encouraging stronger links between LMCs</b>	<b>90%</b>	<b>92%</b>	<b>78%</b>
<b>Making it easier to share best practice across LMCs with the aim of raising standards</b>	<b>90%</b>	<b>94%</b>	<b>83%</b>
<b>Providing resources to LMCs including a central bank of reference information/documents.</b>	<b>91%</b>	<b>95%</b>	<b>72%</b>

**Participants in Scotland:** 47% disagreed 'NALMC should seek to represent LMCs' (26% 'don't know')  
And a third (33%) 'don't know' if a new LMC-LMC communication system should be commissioned.

# A majority consider that LMC profile should be higher and voice stronger

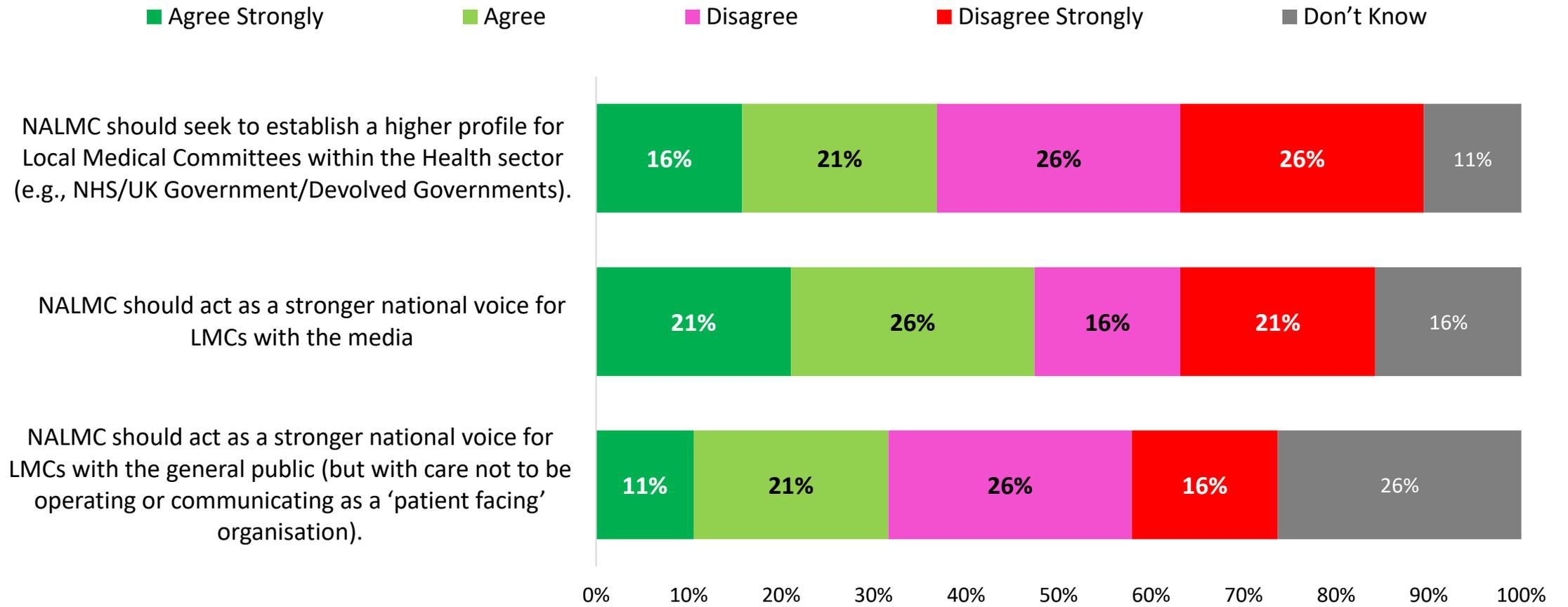


# England: This is particularly the case in England



Q3. And to what extent do you agree or disagree with the following statements?

# Scotland: Opinion is more balanced – there is not a strong majority ‘for’ or ‘against’ the statements



Q3. And to what extent do you agree or disagree with the following statements?

# Profile and voice issues: Comparison

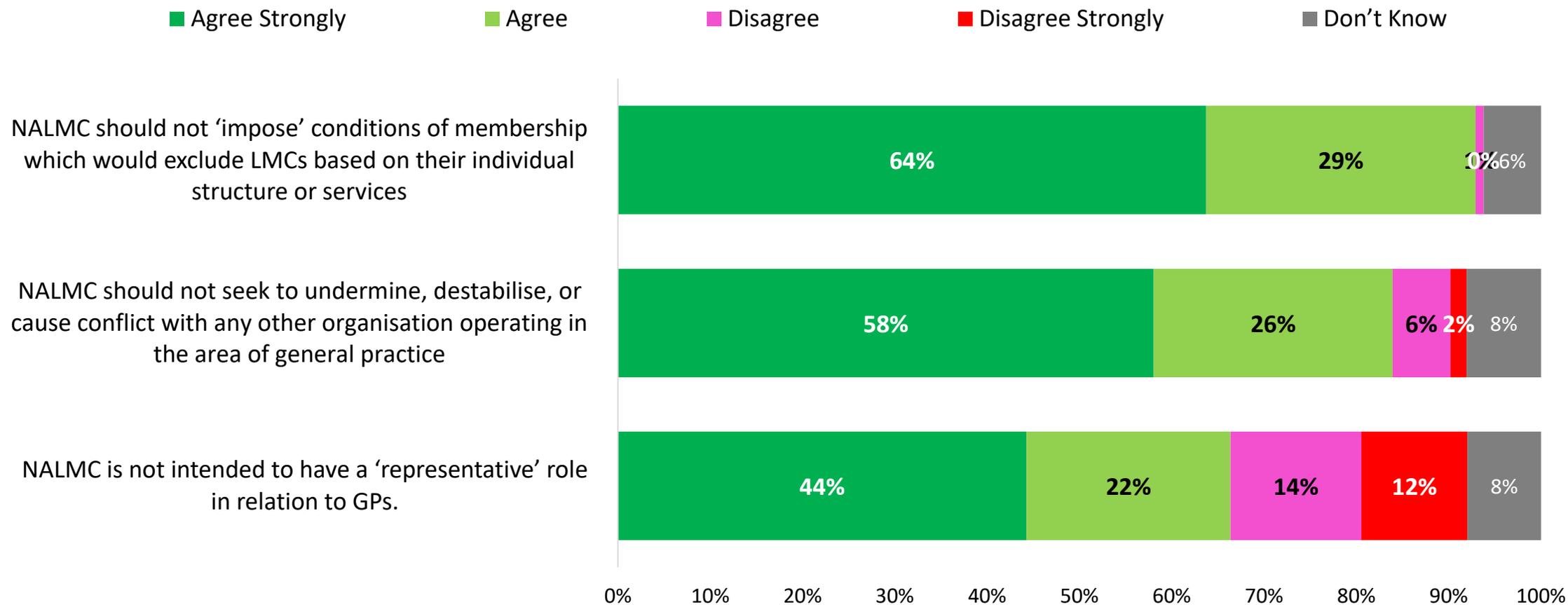
## Net agree comparison

	Total	England	Scotland
NALMC should seek to establish a higher profile for Local Medical Committees within the Health sector (e.g., NHS/UK Government/Devolved Governments).	<b>75%</b>	83%	37%
NALMC should act as a stronger national voice for LMCs with the media	<b>71%</b>	76%	47%
NALMC should act as a stronger national voice for LMCs with the general public (but with care not to be operating or communicating as a 'patient facing' organisation).	<b>55%</b>	60%	32%

England has a majority in favour of increased profile and voice, with Scotland's opinion almost evenly split 'for' and 'against' each statement

# Potential areas of activity NOT in remit of NALMCs

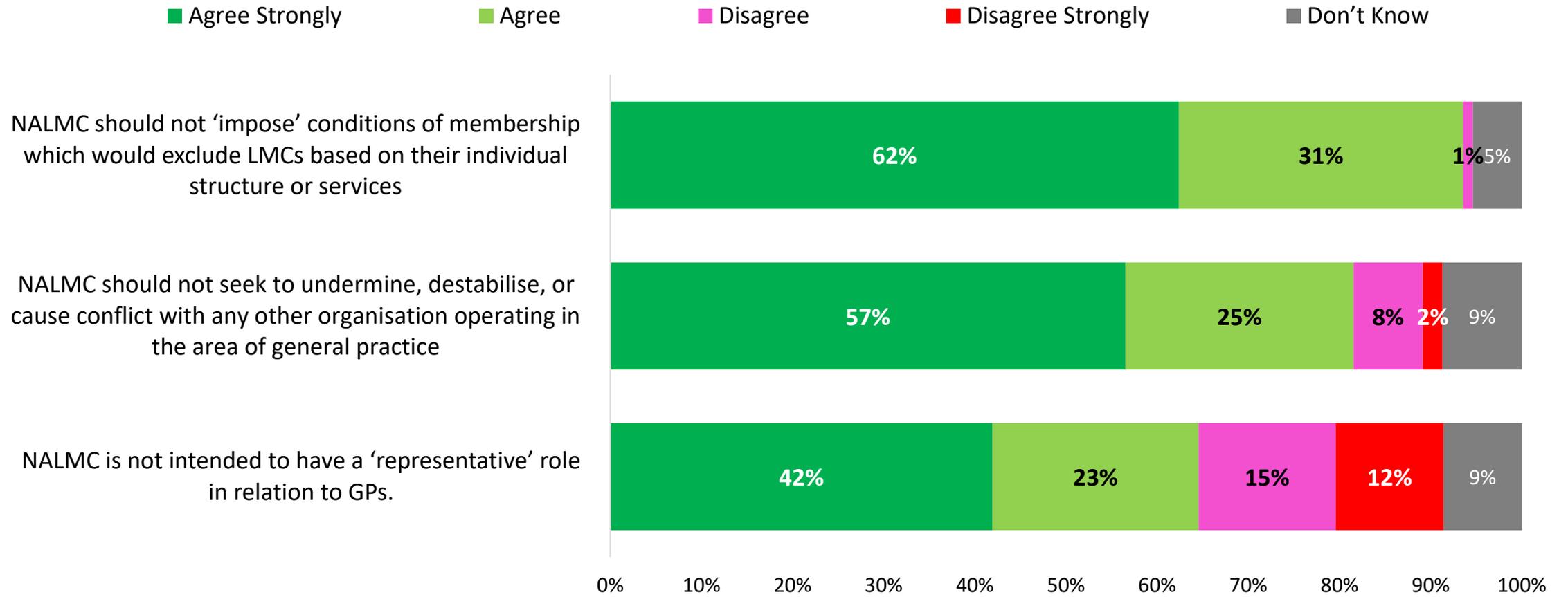
# Potential areas or activity which have been suggested would not be in the scope of the National Association of LMCs.



*Q4. To what extent do you agree or disagree with the following issues should NOT be part of the remit of a NALMC?*

Base: (Q2) - 113

# England: Confirmation that these issues should not be within NALMC scope

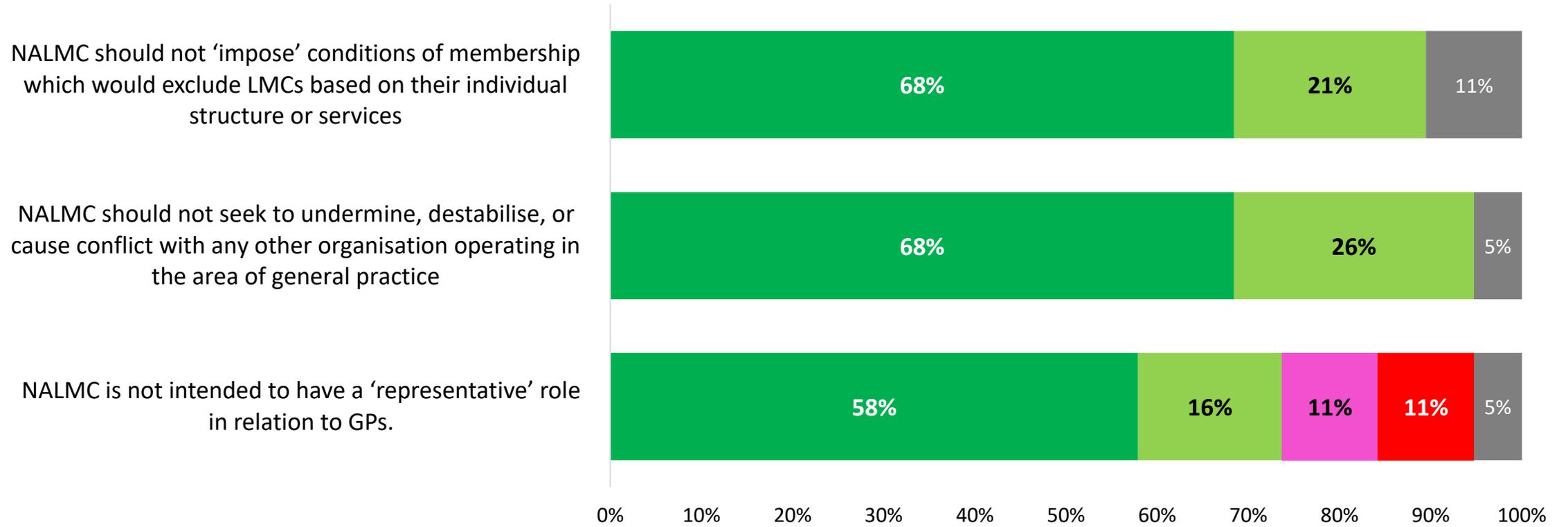


Q4. To what extent do you agree or disagree with the following issues should NOT be part of the remit of a NALMC?

Base: (Q2) - 92

# Scotland: Confirmation that these issues should not be within NALMC scope

■ Agree Strongly    
 ■ Agree    
 ■ Disagree    
 ■ Disagree Strongly    
 ■ Don't Know



Q4. To what extent do you agree or disagree with the following issues should NOT be part of the remit of a NALMC?

# Potential areas or activity which have been suggested would not be in the scope of the National Association of LMCs.

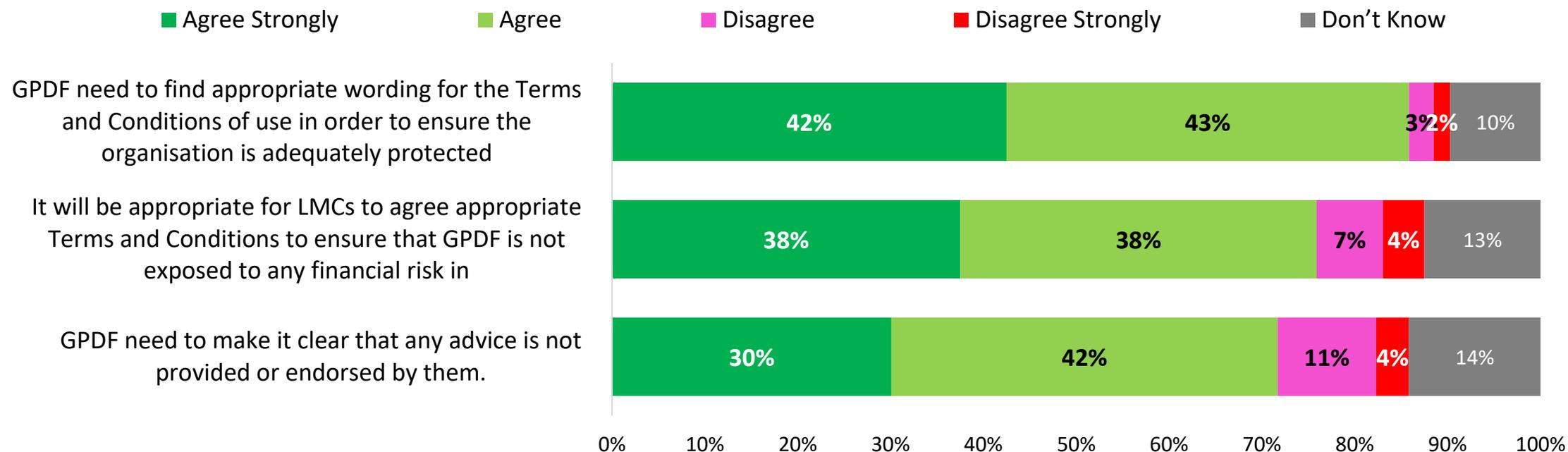
## Net agree comparison

	Total	England	Scotland
NALMC should not 'impose' conditions of membership which would exclude LMCs based on their individual structure or services	93%	94%	89%
NALMC should not seek to undermine, destabilise, or cause conflict with any other organisation operating in the area of general practice	84%	82%	95%
NALMC is not intended to have a 'representative' role in relation to GPs.	66%	65%	74%

*Q4. To what extent do you agree or disagree with the following issues should NOT be part of the remit of a NALMC?*

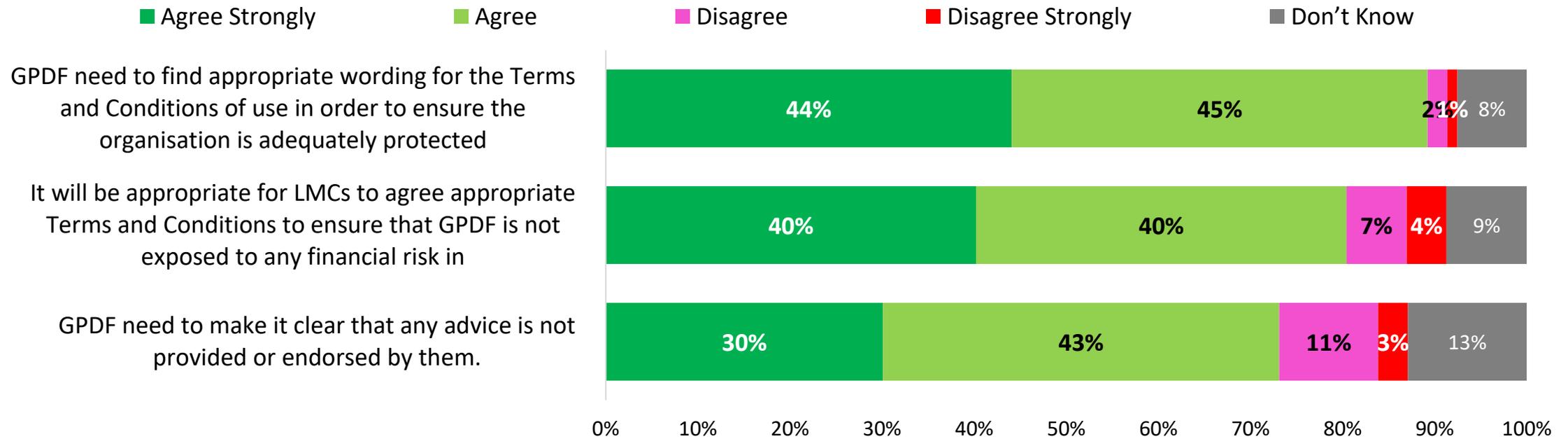
# GPDF concern regarding facilitation of 'advice'

# There is clear agreement that appropriate wording/terms should be incorporated in order to satisfy GPDF concerns



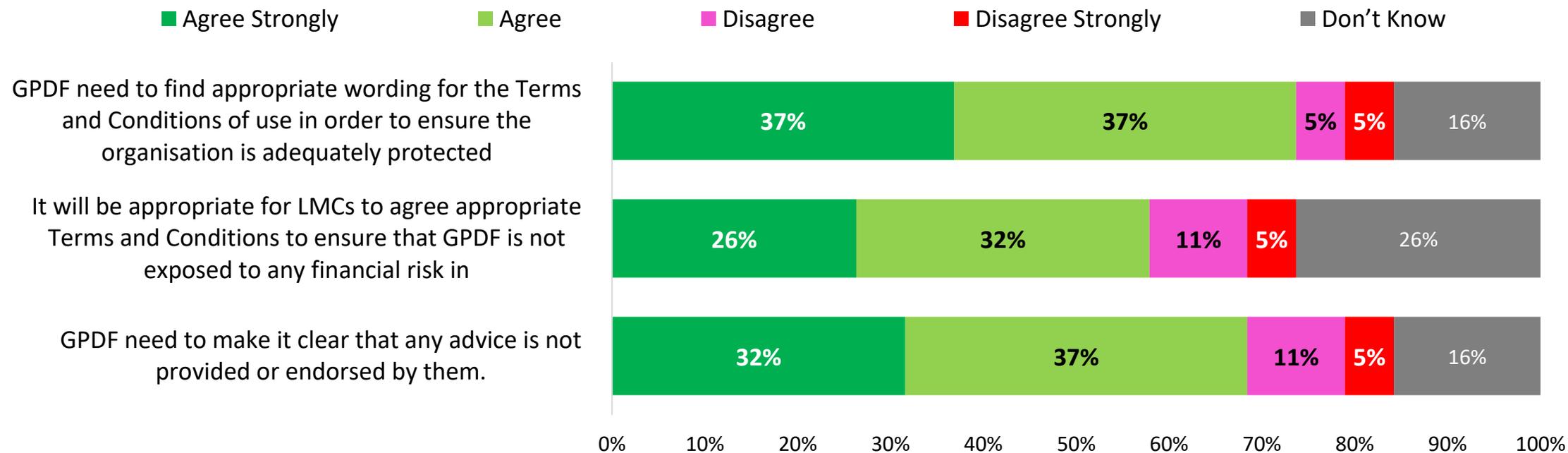
*Q5. GPDF have concerns due to the potential financial risks to the organisation associated with facilitating what could be potentially incorrect advice. However, many individuals from LMCs have advised that the sharing of information between LMCs (whether this is classed as advice, guidance, information, or opinion) is a fundamental and essential role of the National Association. With this in mind – to what extent to you agree or disagree with the following statements.*

# England: Again clear agreement on this issue



*Q5. GPDF have concerns due to the potential financial risks to the organisation associated with facilitating what could be potentially incorrect advice. However, many individuals from LMCs have advised that the sharing of information between LMCs (whether this is classed as advice, guidance, information, or opinion) is a fundamental and essential role of the National Association. With this in mind – to what extent do you agree or disagree with the following statements.*

# Scotland: While still a majority agree, there are higher levels of 'Don't Know' in response to this issue



*Q5. GPDF have concerns due to the potential financial risks to the organisation associated with facilitating what could be potentially incorrect advice. However, many individuals from LMCs have advised that the sharing of information between LMCs (whether this is classed as advice, guidance, information, or opinion) is a fundamental and essential role of the National Association. With this in mind – to what extent to you agree or disagree with the following statements.*

# There is agreement that appropriate wording/terms should be incorporated in order to satisfy GPDF concerns

## Net agree comparison

	Total	England	Scotland
GPDF need to find appropriate wording for the Terms and Conditions of use in order to ensure the organisation is adequately protected	<b>86%</b>	89%	74%
It will be appropriate for LMCs to agree appropriate Terms and Conditions to ensure that GPDF is not exposed to any financial risk in	<b>76%</b>	80%	58%
GPDF need to make it clear that any advice is not provided or endorsed by them.	<b>72%</b>	73%	68%

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# Potential structures for NALMC

# There is no majority choice of appropriate structure at this time

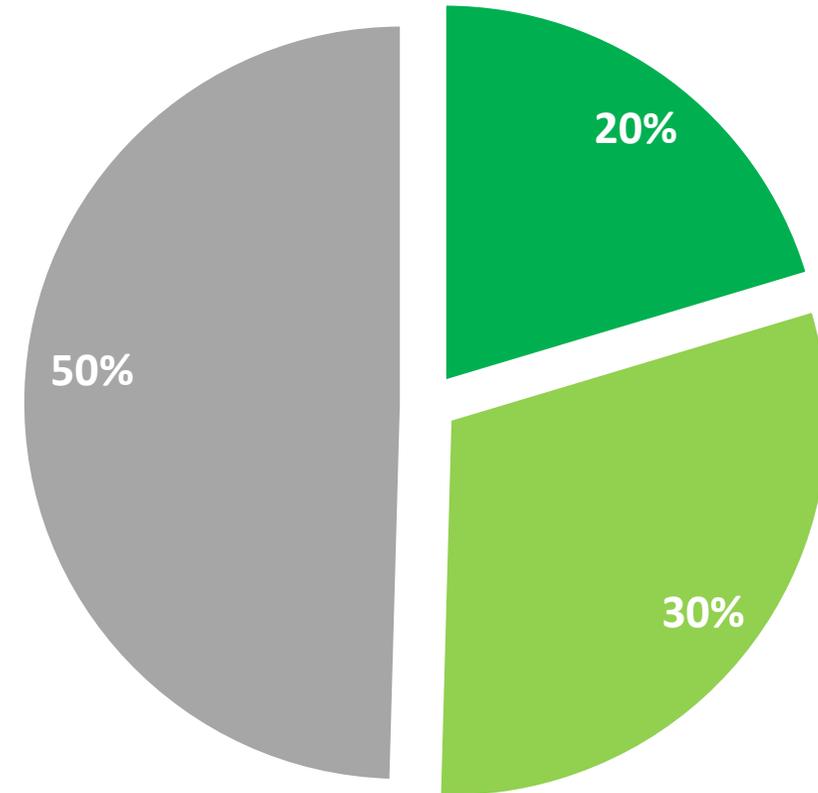
*Q6. Previous consultation with LMCs indicated a desire for further investigation for two potential organisation structures.*

*Both of these structures would be ultimately controlled by the wishes of LMCs and a Board consisting of a majority of representatives from LMCs would be in place.*

*Detailed cost yet to be established include:*

- *Initial organisation set up costs*
- *Ongoing running costs including staff and resources required to deliver the objectives*
- *The extent of any tax and/or vat implications*
- *Details of how any 'risks' to the organisation can be mitigated or limited (if not eliminated).*

***The final choice could be made once the full and detailed cost implications are established later this year, but in the meantime, which of the two approaches do you think would be the most appropriate?***



- Re-orientation of GPDF (or a GPDF subsidiary) to become a NALMC controlled by a Board, the majority of whom are elected
- A new organisation, with its own Board the majority of whom would be elected by LMCs. It could be grant funded by GPDF
- No preference at this time

# There is no majority choice of appropriate structure at this time, in England or Scotland

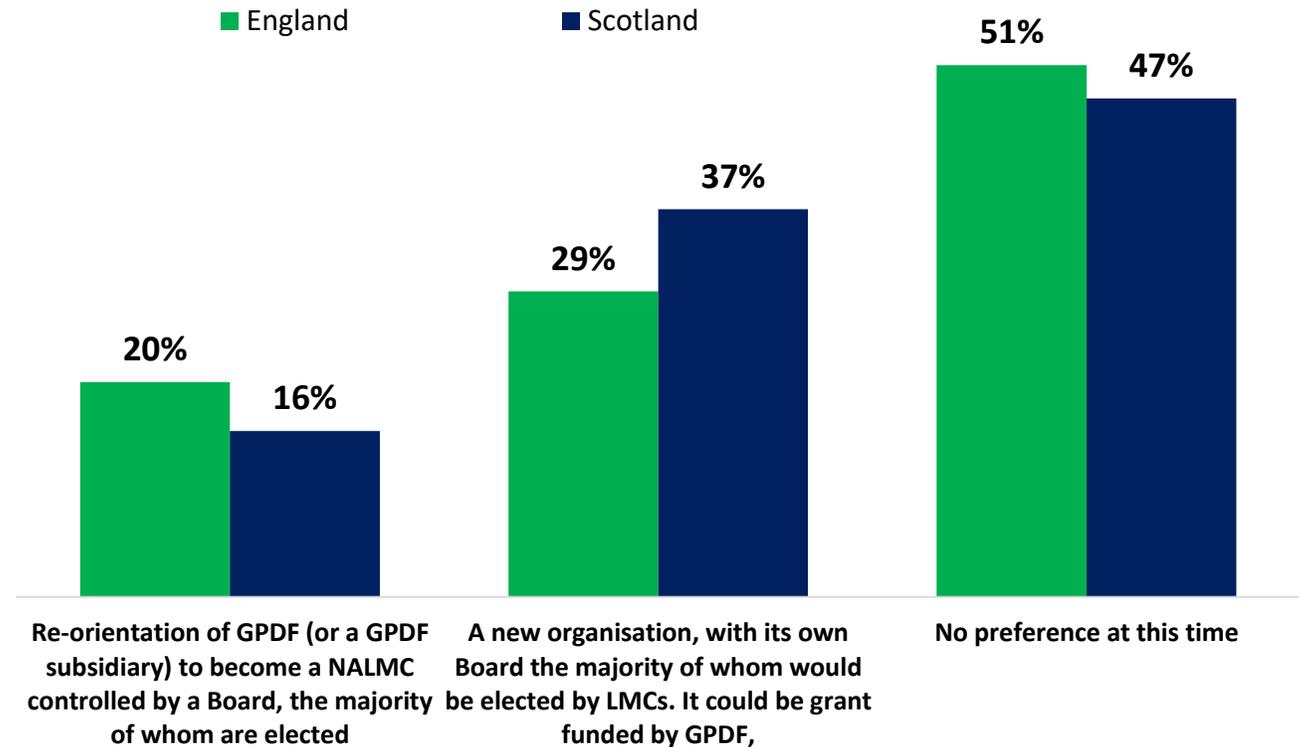
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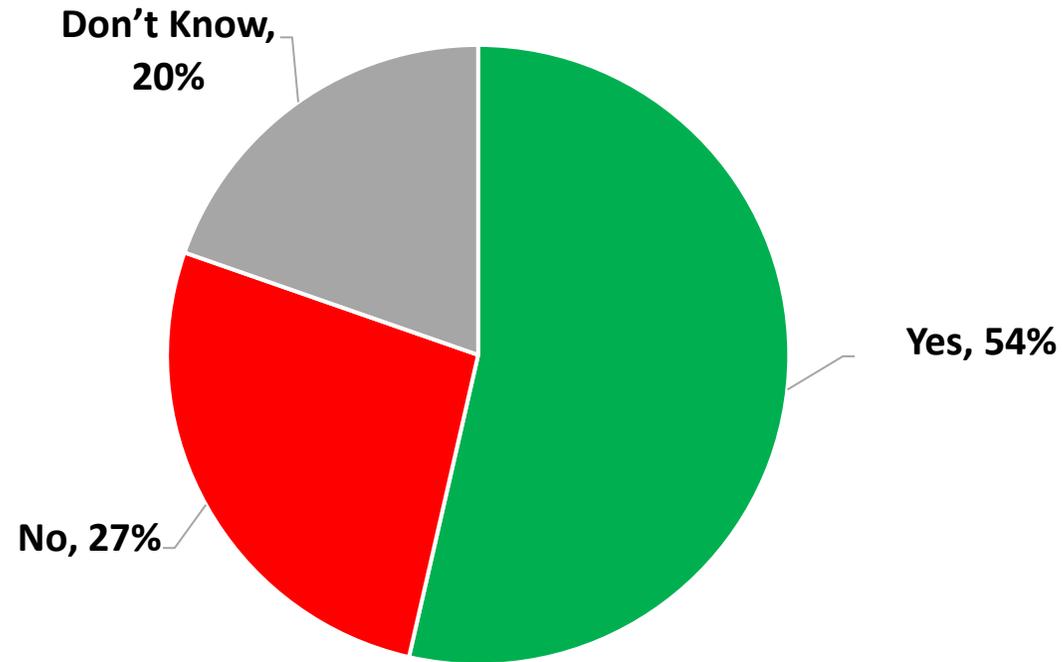
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***The final choice could be made once the full and detailed cost implications are established later this year, but in the meantime, which of the two approaches do you think would be the most appropriate?***



# A single GB wide NALMC is the view of a narrow majority, with a substantial minority rejecting that approach



*Q7. The clear desire in previous discussions is for ALL Local Medical Committees across England, Scotland, and Wales to be part of what would be a GB wide National Association of LMCs, regardless of their size, geography, or stage of development.*

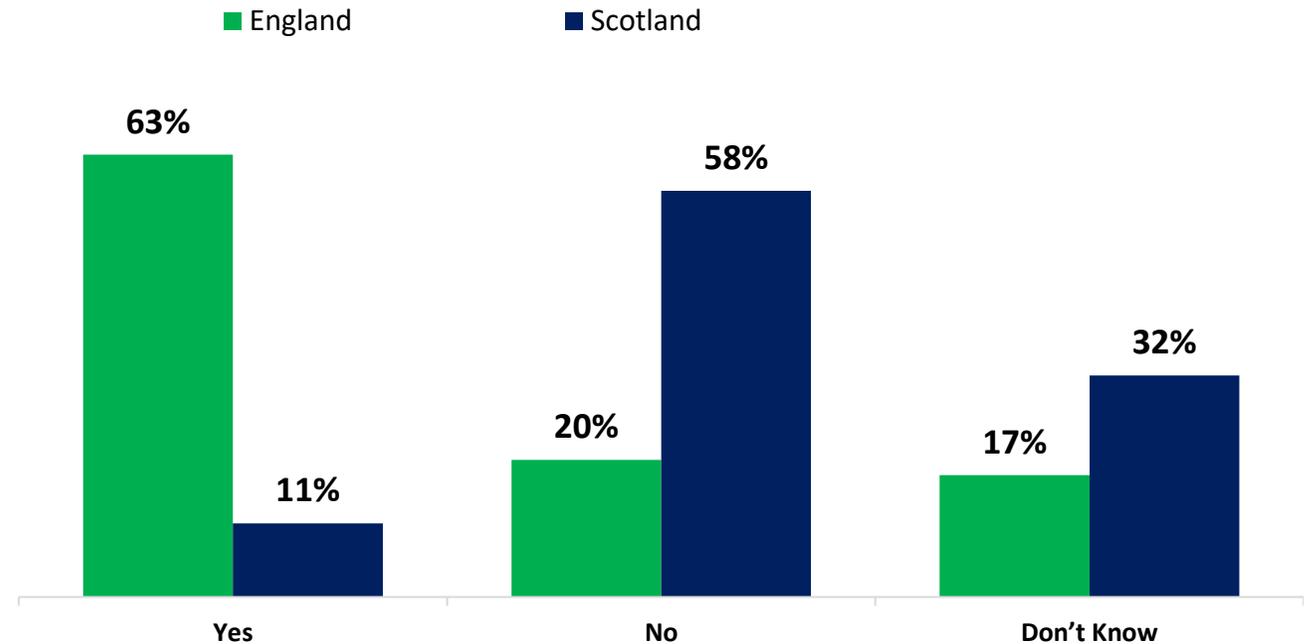
*Do you agree that a single GB wide National Association of LMCs would be appropriate to be established?*

Base: (Q7) - 112

# Single GB wide NALMC is the clear preference of England, and rejected by Scotland

*Q7. The clear desire in previous discussions is for ALL Local Medical Committees across England, Scotland, and Wales to be part of what would be a GB wide National Association of LMCs, regardless of their size, geography, or stage of development.*

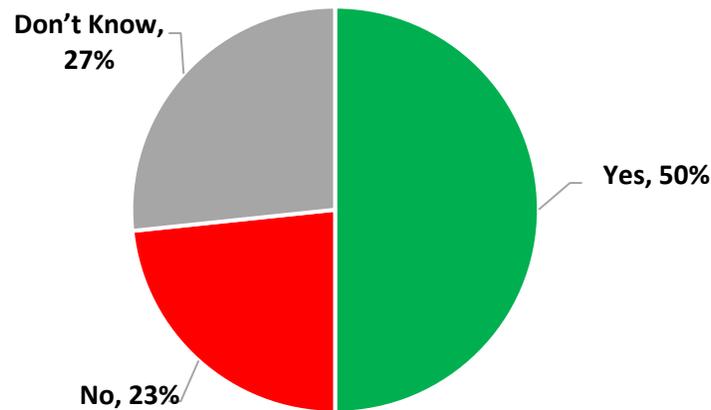
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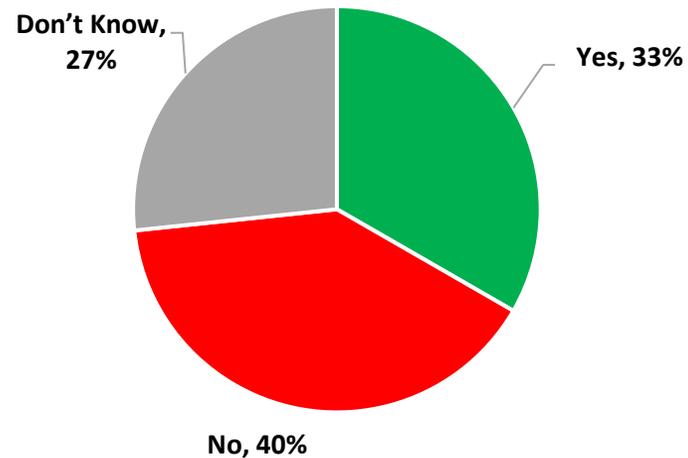
# Those who rejected a single GB wide approach were marginally in favour of England only structure But Wales and Scotland only structures show less certainty

Q8. Do you think there should be ...

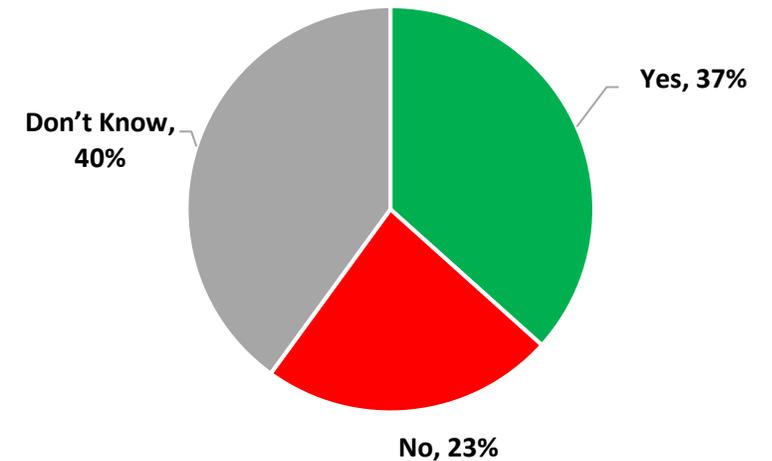
*.....An Association of LMCs in England*



*.....An Association of LMCs in Scotland*

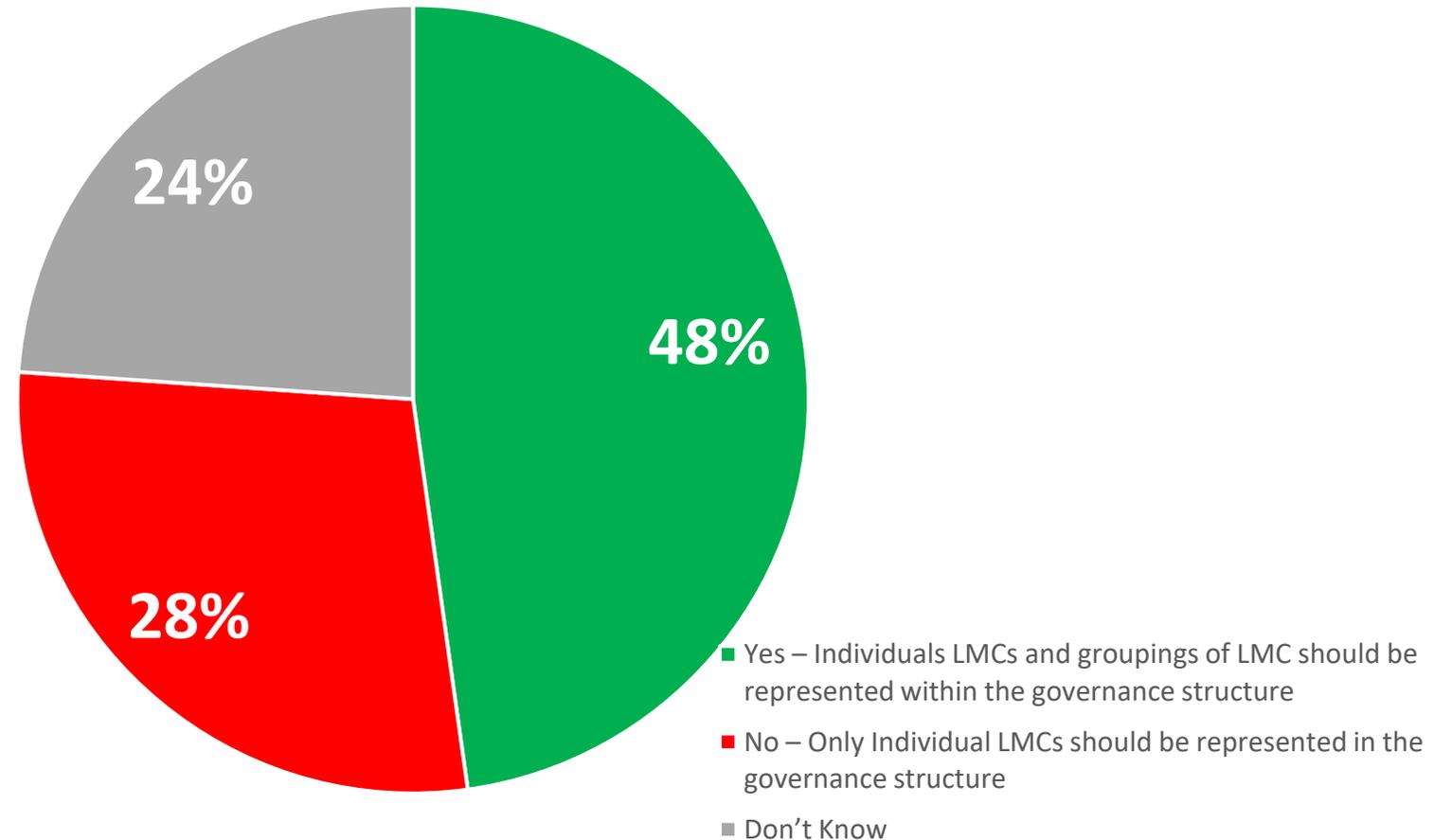


*.....An Association of LMCs in Wales*



Base: (Q8) - 30

# More would like to see consortia represented in the governance structure with a minority considering it should only be LMCs

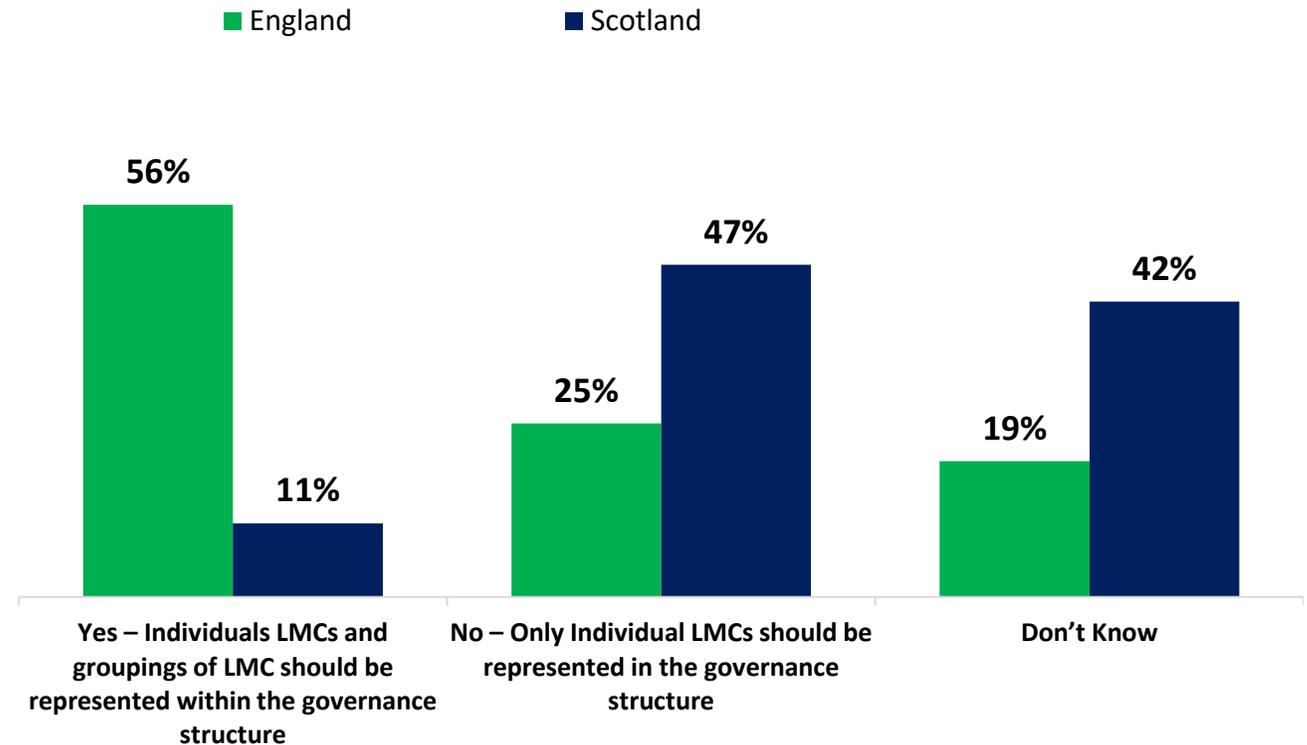


Q9. Do you think that both individual LMCs and groupings of LMCs (e.g., Londonwide, Wessex, Surrey and Sussex etc) should be represented within the governance structure of the NALMCs?

Base: (Q9) - 113

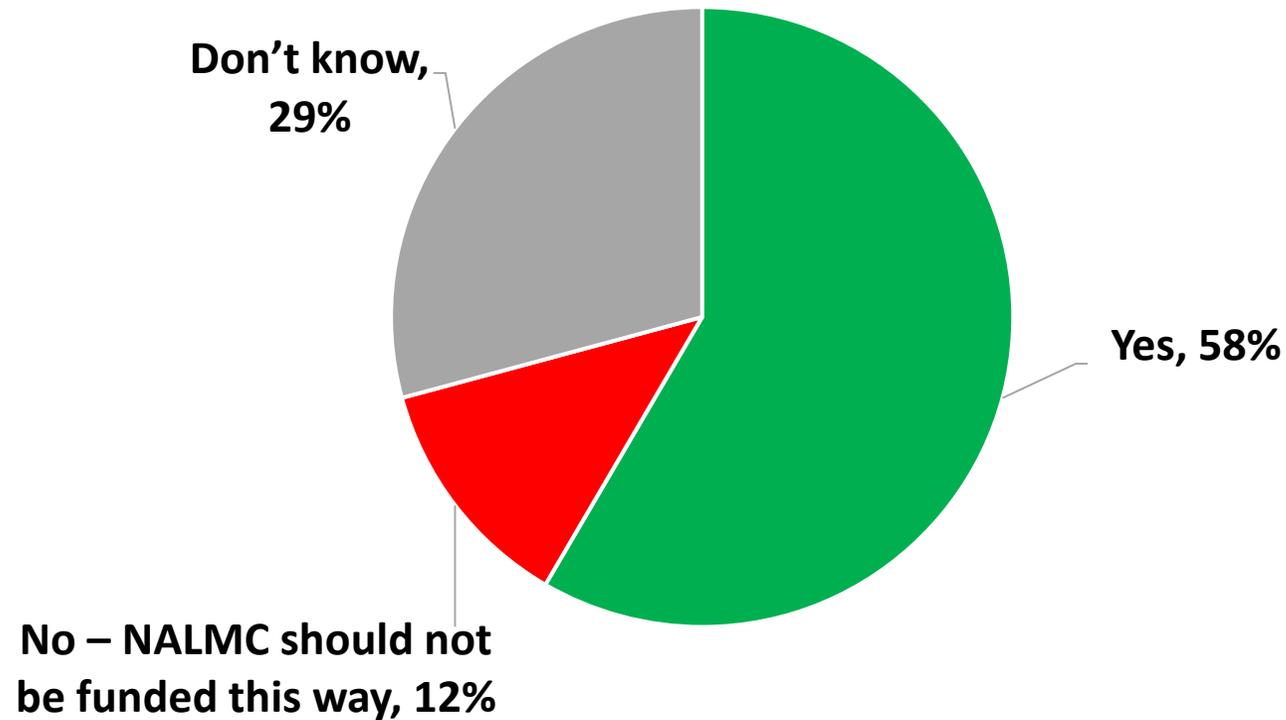
# There are clear differences with Scotland indicating a preference for only LMCs

*Q9. Do you think that both individual LMCs and groupings of LMCs (e.g., Londonwide, Wessex, Surrey and Sussex etc) should be represented within the governance structure of the NALMCs?*



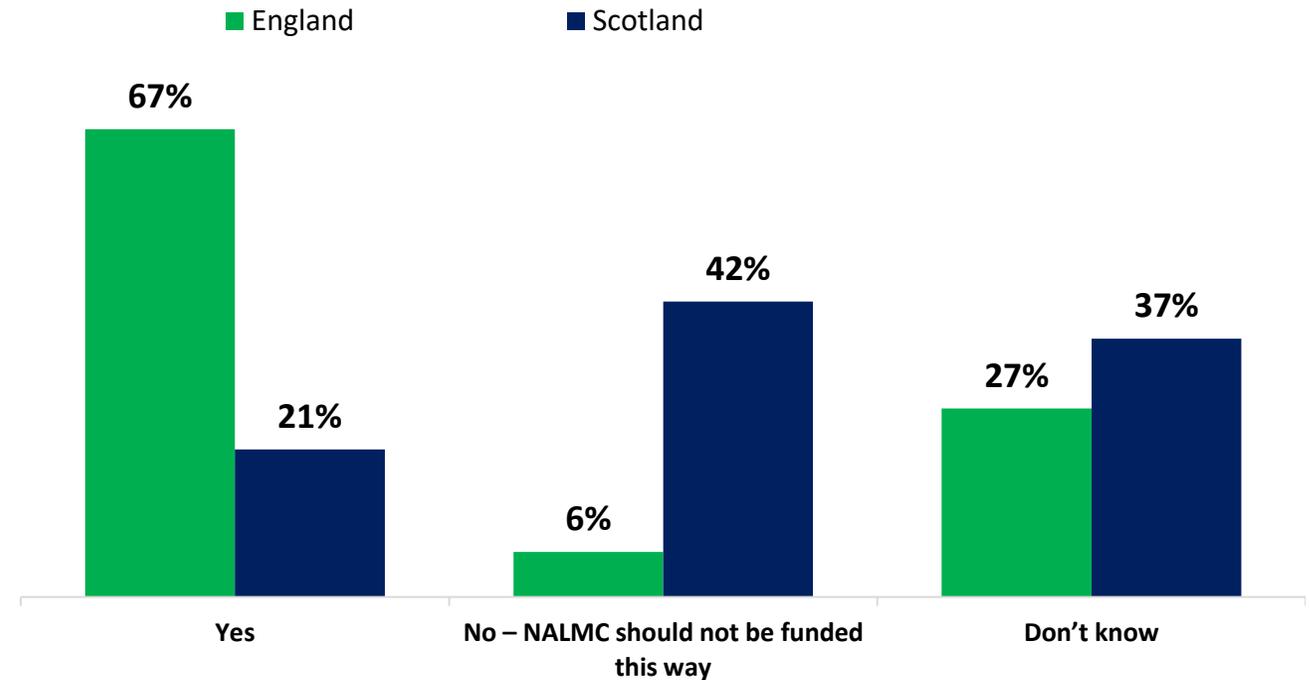
# Funding via quota (to GPDF) is expected by the majority

*Q10. Regardless of the final structure of the organisation do you agree that a National Association should be funded via the quota contribution (levy) made by the LMC to GPDF.*



# Funding via quota (to GPDF) is expected by the majority in England, but not Scotland

*Q10. Regardless of the final structure of the organisation do you agree that a National Association should be funded via the quota contribution (levy) made by the LMC to GPDF.*



# Alternative Funding suggestions: England

Q10. How do you think it should be funded?

There is an over emphasis on structure. Informal structures which cost little can be extremely effective. Any National association needs to be light on its feet and free from bureaucracy in order to be relevant and reflect in real time what is happening in primary care. Any form of mutual funding would be acceptable	England
The questions are all assuming that formation of the NALMCs is supported and leave no option for other views	England
Should be nothing to do with GPDF. The ask of Conference was for GPDF to explore the concept, not assume they would be providing it. There is a fundamental conflict of interest in GPDF in structuring this questionnaire towards them becoming or directly funding a National Association.	England
It would be a disaster for the profession if this idea was implemented. It is politically ignorant and will lead to marginalisation	England
It must not be funded by levy payments or existing GPDF investments. It will need separate funding from those LMCs that want to be part of it.	England
Additional capital from GPDF reserves.	England

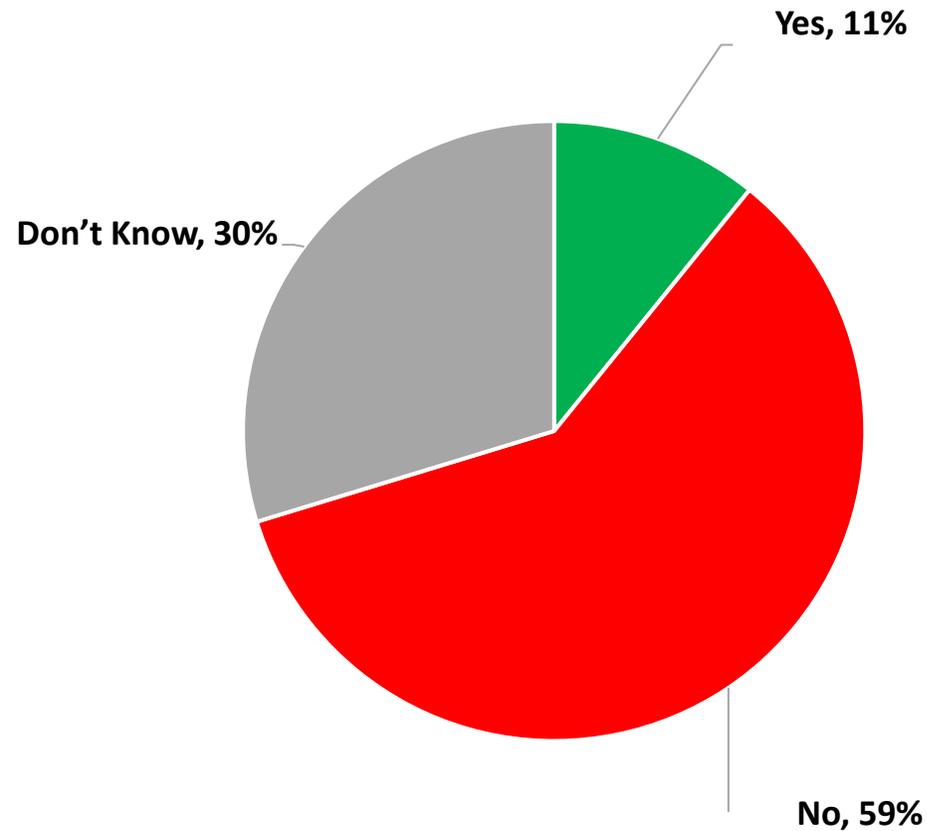
# Alternative Funding suggestions: Scotland

Q10. How do you think it should be funded?

Would be up to England and Wales if they wanted this, I do not feel Scotland would benefit from this as we already have good structures in place.	Scotland
Separate LMC subscription to each nation's NALMC	Scotland
I'm yet to be persuaded that there should be a NALMCs, or the value of it. I would be concerned that funding this new organisation would mean either larger contributions, or reducing the funding to negotiating committees, and I would be reluctant to see either.	Scotland
I don't think this is a good idea at all - I don't think it should be funded. the answer to a big problem is rarely a reorganisation - see the last 35 years in the NHS for evidence. WMG (and the devolved admins) will be delighted at us navel gazing rather than holding them to account, but crack on and help destroy the profession further if you really think that's helpful. You heard at conference what Scotland thinks. Now try to not ignore us in this Anglo-centric self harm exercise, I dare you.	Scotland
I am nervous that this will be far too one nation centric (England) and would suggest a devolution to reflect the entirely different landscapes that exist in the devolved nations. Under no circumstances should there be double representation of groups as well as LMCS, this would completely alienate those not in a group.	Scotland
Funding for GPDF should be for those purposes and the remit of a NALMCs may be different so until the T&Cs are agreed, or at least the scope, then how funded remains unclear. It may be more appropriate to sit as a subcommittee in BMA structure which would give it access to the existing structures and resources of the BMA	Scotland
Could be separately funded by LMCs in England which seem to wish this	Scotland
By not existing in the first place	Scotland

# Membership

# Majority view is that membership should not be allowed to LMCs who do not support funding

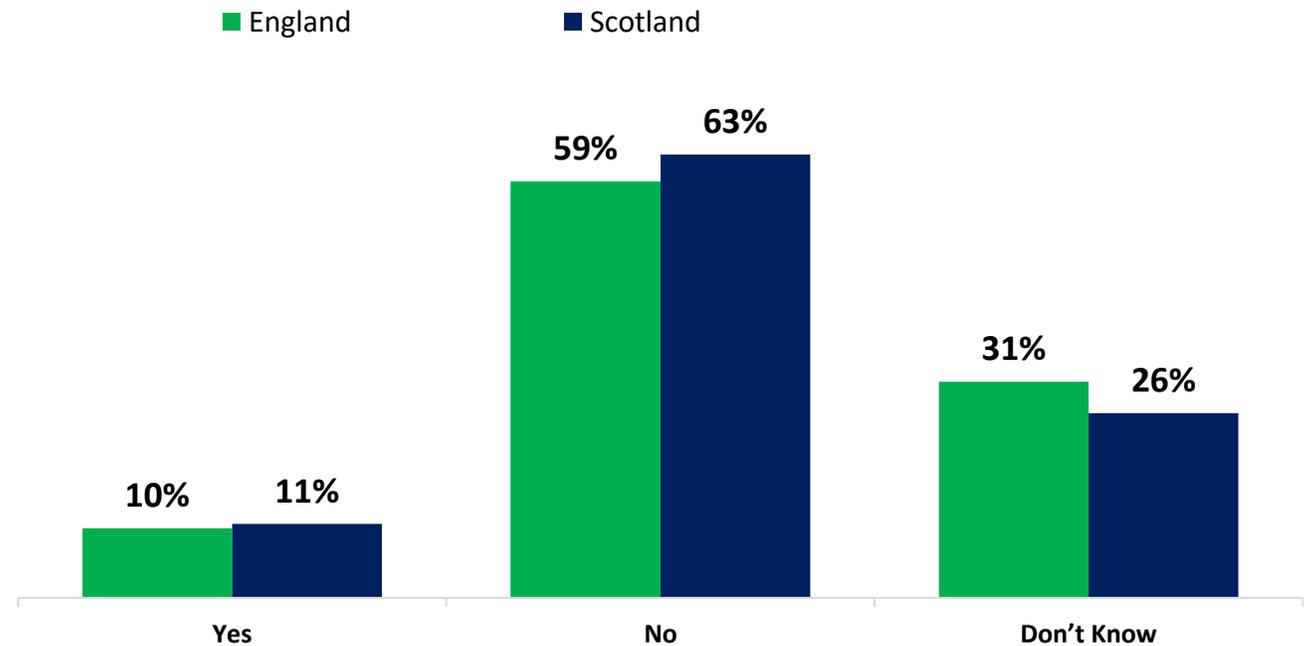


*Q11. If an LMC chooses not to support the funding of a NALMC, do you think it should be allowed to have membership?*

Base: (Q11) - 111

# Majority view in both England and Scotland is that membership should not be allowed to LMCs who do not support funding

*Q11. If an LMC chooses not to support the funding of a NALMC, do you think it should be allowed to have membership?*



# Further comments

# Final comments: England

Q13. Do you have any further comment you would like to make with regard to the potential National Association of LMCs at this time?

<p>We need to be careful, very careful, that the formation of an NALMC is about supporting LMCs and NOT about another set of paid committee jobs for people who have fallen out with the BMA. Setting up a rival to the BMA will be music to the ears of politicians and Whitehall mandarins who hate general practice. Also - health care is devolved, so for goodness sake don't have a nationwide organisation.</p>	<p>England</p>
<p>we have lost our voice and we need a NALMC to become a voice and give leadership to the profession</p>	<p>England</p>
<p>This will divide and undermine national GP representation. It must not be funded through historic levy payments/GPDF investments and if established must be funded with separate funding than LMC national/voluntary levies. All practices invited to contribute to such a levy will require a clear explanation and a choice as to whether to contribute.</p>	<p>England</p>
<p>This is an exciting time of transition with great opportunity to be seized but we must move at pace. I recognise the need for in-depth consultation but the world is changing around us and the longer we procrastinate the more the pressures and tensions are growing which will make it even more difficult to launch a much needed support organisation for LMCs. We need support now. People are leaving the profession in droves and we would be naive to think that LMC land is any different. We have all been impacted by the burnout of the pandemic and are clutching on to what support we can find but we need to start to care for the leaders. Sometime we require bold, out of the box thinking. If we want to bring about bold changes then we need to be bold in our approach. There is great benefit in being open to try, learn and evolve; to challenge thinking through bringing new perspectives but getting out there and doing it rather than being stuck in inertia. LMCs are used to moving quickly and the longer it takes to get the organisation off the ground the more credibility is being lost and doubt around buy in is creeping in before the organisation is even launched. Sometimes is as much about the individuals, the passion, the drive, the ambition, the action. I believe this is one of those times. The safe choice is not always the right choice but being brave and courageous is never a wrong choice.</p>	<p>England</p>

# Final comments: England continued

Q13. Do you have any further comment you would like to make with regard to the potential National Association of LMCs at this time?

This will divide and undermine national GP representation. It must not be funded through historic levy payments/GPDF investments and if established must be funded with separate funding than LMC national/voluntary levies. All practices invited to contribute to such a levy will require a clear explanation and a choice as to whether to contribute.	England
This questionnaire assumes that support for formation of a NALMC is a given and most of the questions omit to give options where that is not the case	England
the Term GPDF is in it self outdated and confusing to GP's media and the public	England
See comments re funding This questionnaire is bias and leads the respondent towards a solution involving GPDF. Many of us are opposed to this.	England
please think again about a turf war in general practice at this time. It will end in marginalisation and a divide and rule approach from DoH. It is naïve and childish to internally factionalise with the current media attitude of political polarisation. Please reflect in a more mature manner and "Read the Room"	England
NALMC should not be set up just because of the perceived inadequacies of GPC and should not undermine it.	England
It would be good to have free text comment on these questions as yes/no/don't know doesn't cover all possibilities. Eg governance, a subsidiary of GPDF may work well. Having an entirely separate organisation could also work but risks perpetuation of the same historic challenges. Likewise GB vs individual nation. It would be politically wise to set up a GB overarching company and four nation subsidiaries where the England one can be matured. There would need to be a four nation thread on a comms microsite for example. But I'm not sure the DNs are at the existential crisis stage that England is... yet.	England
It sounds like theres an awful lot of politics and complexity behind this survey which i do not fully appreciate or understand	England

# Final comments : England continued

Q13. Do you have any further comment you would like to make with regard to the potential National Association of LMCs at this time?

it is vital that a NALMCs does not duplicate other organisation's work or take away the importance of continually looking to improve existing organisations e.g. GPC. The focus should be on support and whether this support could already be provided by an existing organisation e.g. enhancing funding to GPC. If not, then an association of LMCs should only be utilised to supplement current provision for support and will need appropriate expertise and legal advice available to it to ensure all supportive documentation etc is accurate and correct.	England
In order for this be to be understood properly I think the wider LMCs need to understand what is broken with GPC and whether we are trying to fix this with NALMCs - it has not been made clear	England
I'm not clear if this would impact the levy to practices, and if so, would it be acceptable? how would this alter the interface with GPC? I can see the potential benefit of this new organisation but the costs issue makes me feel i need to know more to form an opinion	England
I think this is needed for England, not convinced the Scots Welsh and Irish will find it needed- so much of the need is England based	England
I think it would be useful for this organisation to support our GPC negotiators in the first instance, being aware of the fact that some feel the new organisation should negotiate on our behalf instead of GPC	England
I think closer working between LMCs is a good idea, and to not rely on GPC so much is good. However, it is unclear to me the role of GDPF going forwards and what value for money we get from GDPF and whether it should just become the NALMCs with more grassroots LMC members/officers on the board.	England
I think an education, resource, support structure is good, I FEAR IT COULD BE VIEWED AS YET ANOTHER NEGOTIATINGBODY and thus lack clarity in its aims and objectives.	England

# Final comments : England continued

Q13. Do you have any further comment you would like to make with regard to the potential National Association of LMCs at this time?

I strongly DO NOT think that this proposal should go ahead Yes GPDF should support LMCs more with officer training and induction, intraLMC networking (a replacement for the listserver etc) and with information provision. But this can and should be done within the existing GPDF set up not setting up a separate organisation None of the surveys have given the opportunity to say whether we think a NALMCs is a good idea or not	England
I have found this questionnaire very difficult to complete as I still do not fully understand the purpose of the potential NALMCs. This feels very much form before function. My answers on how it should be funded or the representative structure depend massively on what such an association would do. Please focus on what the remit would be and how it would work alongside the existing structures (i.e. GPC, GPDF and groups of LMCs). Otherwise we risk setting up another expensive organisation which will further dilute the GP voice.	England
I feel strongly that GP's need a representative organisation at a national level which would be best served by a national association of LMC's. The present GPC representation has allowed the present crisis of General Practice and has not listened to the concerns of working GP's .	England
I don't agree with this idea of reinventing the wheel again, I feel GPC/ BMA should restructure to provide stronger voice & support to LMCs	England
I am not sure that the list server , that does n't seem to have voices from across the UK is the best way of canvassing opinion	England
GP numbers and motivated GP numbers are dwindling and so we need to have a national consolidated approach	England

# Final comments: : England continued

Q13. Do you have any further comment you would like to make with regard to the potential National Association of LMCs at this time?

<p>I am concerned that a national association of LMCs will just replicate GPC and face the same challenges re representation with regional variation in need and philosophy? Will it be dominated by the same voices that dominate GPC. Seems more sensible to support regional or likeminded LMC support networks perhaps with a central digital suppository of useful information. We don't want to take on trade union roles. Division is unhelpful.. we need unity between all GPs but we have to accept that sessional doctors and principles have different wants and needs and that GPs in different areas of the country have differing needs and priorities. LMCs have differing needs and philosophies. It seems sensible for LMCs to share intelligence, increase visibility (especially in ICSs, highlighting our statutory representative role). Perhaps offer a kinder forum than the current list server although I don't see any way that the noisy minority wont come to dominate a new forum.</p>	<p>England</p>
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# Final comments: Scotland

Q13. Do you have any further comment you would like to make with regard to the potential National Association of LMCs at this time?

How will Scotland's voice be heard? , I'm concerned that if voted upon by numbers that English voice will lead and I feel its not what Scotland LMCs want. It sounds like a English NALMCs would be helpful in England but please do not inflict changes to Scotland if Scotland LMCs do not want this.	Scotland
Each nation should decide collectively whether to form its own NALMC i.e. a separate NALMC for England, Scotland, and Wales if the LMCs of that nation so chooses to go down that path. GPDF can support that process financially- with engagement of LMCs and formation of the NALMC if that is the wish of the nation's LMCs.	Scotland
Don't see the benefit in the devolved nations.	Scotland
This is an extremely biased survey that makes an assumption that NALMC will be created and that this is supported and therefore makes completion difficult. Clear sense that this is a move to create an additional structure that will undermine GPC and BMA and play into the hands of the government who seek to divide and conquer. Perhaps time for English LMCs, GPC England and UK to stop in-fighting and start fighting for the profession rather than distracting all activity into organisation re-structure while grassroots GPs continue to suffer and LMCs are poorly supported and see little or no return on investment for the levies.	Scotland

# Final comments: Scotland

Q13. Do you have any further comment you would like to make with regard to the potential National Association of LMCs at this time?

Since Health and Social Care is a devolved matter, having a GB based NALMC is counter-productive.	Scotland
This is a disaster	Scotland
Please don't allow Scotland to break away, as my LMC is very oppressed up here and we are being pushed towards a salaried GP contact by our BMA negotiators	Scotland
If we are to have a parting of ways we should have a fair and transparent split of existing resources.	Scotland
I would not support the setting up of a NALMCs if this was to undermine the currently good relationships between LMCs in Scotland and SGPC. If a NALMCs is purely to improve sharing or resources and good practice that seems reasonable, but having a competing negotiating body would not be welcome.	Scotland
I have no idea what this is about or why I should care. It strikes me that this is an internal squabble over direction which is spilling over into the real world. This might matter in some group emails or a committee but to me, and I suspect to most grass roots GP's, this dreary saga, holds no interest whatsoever. Fighting among ourselves while General practice burns to the ground is an utter waste of time and effort and I believe our colleagues will not thank us for it. I filled out don't know to everything just so I could moan in the comments - sorry for subverting your form.	Scotland
I do not support the formation of a national association of LMCs. I think the concerns highlighted by colleagues from Scotland and the points made at the secretaries conference I echo.	Scotland



# National Association of Local Medical Committees Consultation with LMCs

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