Salford and Trafford Local Medical Committee
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READY TO HELP LOCAL GPs WHEN THEY NEED US THE MOST!

ANNUAL REPORT
2011-2012

CHAIR: Dr Jenny Walton
SALFORD SECRETARY: Dr Mhairi Yates
TRAFFORD SECRETARY: Dr Ravi Mene
TREASURER: Dr Girish Patel
DEPUTY CHAIR: Dr Iain Maclean
TRAFFORD REPRESENTATIVE: Dr Colin Kelman
EXECUTIVE MANAGER: Mrs Vivienne Simenoff
ADMINISTRATIVE OFFICER: Mrs Kerrie Rowlands

Don’t get in trouble – get in touch!
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Dear Colleagues

As many of you may now be aware, Nigel Hyams retired after 4 years of committed, enthusiastic work as Salford LMC's chair. Whilst not sharing his penchant for witching hour email replies, Jenny Walton and I hope to job share our way through the work and attempt to fill his oversized boots. I will resist the urge to use Olympic imagery (despite just watching Team GB crash out of the relay race) involving batons... but hope that things will appear relatively seamless.

Many challenges lie ahead for us as GPs in these uncertain times. Added to some often capricious political meddling, we seem to have our work cut out. How we successfully rise to these challenges will be a product of our commitment, cohesion and ability to think systematically.

CCGs have been born and it is essential for our profession to understand the nuances of the role they play. They do not represent general practice or indeed promote the interests of the same. However, it is essential for our survival that we work with these bodies as closely as possible. To this end, Jenny and I have begun regular meetings with Dr Hamish Stedman, chair of Salford CCG. We hope to foster an environment of mutual respect, act as conduits where appropriate to disseminate new thinking and maintain a firm but fair mediator role in the treatment of GPs by emerging organizations such as CCGs. Rest assured the LMC does exist to represent GPs and will exercise, in every appropriate instance, its statutory obligation to do so. There is further negotiation to be done concerning the LMC’s role in the new Salford CCG constitution. We are taking advice from LMCs around the country as well as feeding into data being collected by the GPC,
who are tasked with ensuring consistent, fair representation for LMC bodies.

The recent industrial action highlighted some of the difficulties we have acting as a homogeneous group of professionals. When the BMA first balloted doctors, they received a categorical response and proceeded on that basis. The fact that even at the start, there were divisions forming depending on whether you were already on career average pension schemes or existing final salary schemes, seemed not to deter efforts. LMCs around the county were given a firm, clear warning about not being in a position to promote industrial action and had to tread a careful path, despite many of their members asking for information and advice. Ultimately, the BMA struggled to be heard in the media clamor to vilify greedy, self-serving doctors and the resolve of many in participating on the day was eroded away. It is true to say we did not appear to have the public’s support, but would be more interesting to scrutinize were it not subject to wall-to-wall negative media coverage.

The process of CQC registration began in July with the organization writing out to an initial wave of practices. The timescale allows the registration phase to be complete by April 2013. During registration, practices will be asked to consider areas such as the Type of Provider the practice would like to be, who will be the designated Registered Manager, the location of the provider premises and the practice’s Compliance with Standards. A pilot of first inspection visits by the CQC has begun. We have just received feedback from a visit to the practice of Dr Laurence Buckman, Chairman of the GPC who has reassured us of the nature of the inspection and its primary aims. He has also dispelled many of the myths promulgated by some organizations in anticipation of CQC activities. The CQC have stated that they believe the vast majority of practices will pass scrutiny and those who do not will be signposted to assistance. But it should be added that it is a practice’s responsibility alone to ensure adequate standards are met.

The implementation of the Health and Social Care Act brings many changes. Not least will be the transfer of management of NHS owned
property and many of us look forward with a degree of not unfounded disquiet to working with Prop Co, etc. At a recent meeting with the Director of Estates, the message seemed to be that everyone still feels ignorant of the details. It is perhaps more important here than elsewhere that GPs act with cohesion. Again, please rest assured that as an LMC, we plan to robustly resist unfairness and strong-arm tactics and would invite members to bring to our attention any difficulties they may be experiencing.

As if we were not being deluged with enough change, Revalidation finally gets underway in Salford from December 2012. You may be aware that it has been decided locally that the Responsible Officer will be asked to look at “leaders” in the first instance. This will mean CCG/Neighbourhood leads as well as LMC leads and then one third of Salford GPs annually thereafter. The criteria being used to assess us are finally starting to firm up having been confusingly stuck somewhere between GMC recommended essentials and RCGP ones. Dr Gen Wong is in post until April 2013 and continues to provide update training and support for all until then as well as being invaluable in offering advice about the nitty gritty.

Related to the above but not the same is the issue of ongoing Education and Training for clinical and non-clinical staff. This role was largely assumed by Salford PCT and a coordinated, cost-effective approach was taken by the team there, who also advised what was absolutely necessary to avoid falling foul of legislation. There is current discussion about how this should be managed in the future. Whilst there is no obligated role for CCGs in this area, it probably makes sense to ensure quality and consistency if it is at least overviewed by the same. Without a more uniform approach, practices are individually absorbing the combined headaches of CQC compliance and Revalidation recommendations, but also more worryingly, arbitrary costs without economies of scale.

Good luck and remember we’re there to help.
Salford report
Dr Jenny Walton, Chair, Salford and Trafford LMC with special responsibility for Salford issues.

Upon hearing the news of Nigel Hyams’ decision to step down as Chair of the Salford and Trafford LMC, my first thought was one of dismay. Nigel has been a major asset and loyal servant to the LMC for over 16 years – anyone who even dreamt of taking over from him must be mad!

Well, Mhairi Yates and I were keen to become more involved with the LMC but neither felt comfortable with both the responsibility and workload involved to consider volunteering our names individually for the nomination of secretary of the Salford sub-committee. However, after attending an away day of the executive members of the LMC, a seed of an idea of a joint position was planted. This idea grew and blossomed and fortunately we were voted in as joint secretaries of the Salford sub-committee of the LMC.

From my point of view my experience so far has been entirely positive. I have attended the LMC conference in Liverpool which was enlightening, informative, entertaining and amusing. I have got to know the other executive members who are extremely hardworking, talented and committed to our GP’s and practices in these difficult times we find ourselves in.

My email inbox has exploded, requiring a desperate request to extend its’ capacity, and still it fills up! However, the flow of information from LMC colleagues throughout the country is invaluable and supportive. And then there are the meetings! Both formal and informal with attendant papers to read (speed reading course booked), jargon to learn (I am compiling a jargon-busting for dummies list for my own personal use) and negotiations to undertake (negotiating course booked) and then there is the day job! Despite all this I am relishing the challenge of the new role and if I am half as successful as our predecessor I will be more than content as I know my partner will bring her own expertise and talents to the role.
I hope we will become another great double act to rival Torvill and Dean, Redgrave and Pinsent, Morecombe and Wise and even the Cheeky Girls!

**Trafford report**

*Dr Ravi Mene, Honorary Secretary, Salford and Trafford LMC with special responsibility for Trafford issues.*

It gives me great pleasure in writing this report which may be my penultimate one!

I vividly remember the day I was elected to the then Trafford LMC which used to meet once a month in the post graduate centre and library of the then thriving Trafford General Hospital. It was led by senior GPs and some of the members at that time are now holding prestigious offices in the local health bodies. The meetings were run like closed committee and new members like me took considerable time to learn the ins and outs of medical politics. As the members were giving their own time for this work I was the first to suggest that they should be compensated for their time, but the idea got a flat response at that time, and I was told this was not talked about. How times have changed - we now compensate every member for attending the committee meeting. This may not be a big amount but at least the trend has been set.

The reason I was mentioning the history is to do with the tremendous change that has occurred since those days in the way general practice delivery has evolved. With the full implementation of the new Health and Social Care Act 2012 the change will be total and general practice will have changed beyond recognition. The patients will have expectations fuelled by politicians and the difficult rationing decisions will have to be made by us as the CCG bodies. The politicians will wash their hands of any responsibility and point the finger at “your GP”. All the changes that we will face over coming years will make general practice more vulnerable to external pressures which will expose the GPs to more stresses with the likelihood of practitioners leaving and
young doctors shunning the profession, resulting in severe manpower shortage. At times like this we need a strong LMC, which will be the only true defender of the profession. We are there forever ready to help, advise and protect the GPs from these threats. If only our GPs who get into difficulties contacted us sooner. In our experience lot of GPs leave it too late to seek help.

Since the merger of Salford and Trafford LMCs, the two subcommittees run autonomously from each other. Prior to this the joint meetings were getting too Salford oriented and Trafford issues were sidelined. Some Members told me that they felt disenfranchised. I argued the case for Trafford GPs with able support from my Trafford colleagues and succeeded in creating the new subcommittee structure with separate Trafford LMC meetings on Wednesday lunch time to enable young GPs with family commitments to join the committee. This has been well received. We are also working more closely with Trafford council and Trafford PCT in its last days, to enable a smooth transition to the era of CCGs.

The Away Day brain storming sessions held by your Exec, facilitated by an external facilitator, came up with several ideas as to how LMC could be more pro active in Trafford; some GPs perceived that Salford was the hub of Trafford LMC and this made some Trafford GPs feel a bit distant. Salford PCT had provided free accommodation to the LMC, with this privilege coming to end in September of this year. Trafford PCT/CCG realised the importance of close relationship of working with the LMC and offered us a new home in Oakland House which we greatly appreciate. The LMC office moved into its new accommodation in the first week of September, and we hope that this will be the new beginning in our working relationship with Trafford bodies. Staff email addresses were @salford.nhs.uk, and are now @trafford.nhs.uk. Wherever the office is based and whatever email address we may have, we represent all GPs in both Salford and Trafford – that much does not change!
Dr Nigel Hyams resigned as the chair of the committee due to various demanding pressures, I have to thank him for his timely and astute contributions which helped the committee keep an even keel. He leaves behind a legacy which will be difficult to follow. We wish him all the best in his future.

Nigel’s position has now become a shared post, with 2 very enthusiastic young GPs from Salford: Jenny Walton and Mhairi Yates joining the executive committee and we have also involved Dr Colin Kelman from Trafford more closely in the workings of the Executive to help with succession. I thank them all for their hard work on your behalf.

Even though both Salford and Trafford committees meet separately the apex Executive remains as a single body, which meets once a month and exchanges views and ideas. With the Greater Manchester health bodies merging into a single unit the challenges ahead will have a different hue. To help with this development your committee is a founding member of the Greater Manchester association of LMCs, this body collates the views of all the LMCs in greater Manchester area and forms a conjoint opinion.

Last but not the least I have to mention the hard work and efforts put in by Vivienne & Kerrie in keeping the show running. Vivienne has the special skill to keep things running smoothly in spite of various difficult times in her personal life. I must also thank Girish and Iain for their support and injection of humour in the working of the LMC. Times are changing - whether they are for good or bad only time will tell.

Since the inception of the NHS in 1948 and the establishment of the LMCs 101 years ago the only constant factor has been the Local Medical Committee even though the ideologies of the NHS have changed so many times.

There is still hope for all of us if we have a strong LMC.
Paraphrasing Monty Python somewhat, “...but what have the Salford and Trafford Local Medical Committee ever done for us?” It’s a good question. We sent out a constituent survey in order to ascertain how aware people were of us as an LMC; their interaction with us; and their satisfaction with us.

As is so often the case in these somewhat constrained surveys, it is the free-text comments that are the most revealing. I hasten to add that no member of staff or of the executive committee took part in the survey, even though most of the comments were complementary! It would appear that we are doing a good job, and that most of our constituents are aware of the work that we do as the statutory representatives of GPs.

Just how much work we actually do on your behalf can be seen in other parts of this report. As you can see, an inordinate amount of time-consuming work on a whole variety of matters, affecting every aspect of General Practice is done on behalf of our constituents. We do our best to assist with all sorts of problems – the greatest sadness to us if how often we are brought into situations which could have been resolved so much easier if we had been contacted earlier. The tag line on our promotional banner, is “don’t get in trouble, get in touch” and I would echo that sentiment here.

In all that we do, we cannot function without our GP Members, who sit on our Committees. I am grateful to all my fellow Committee members for the work they do. Trafford South GPs have however been particularly shy at coming forward and I would urge my colleagues in the South of the Borough to find ways of addressing this. There are currently vacant spaces for you on our Trafford subcom.

If you would like to understand more about what we do on your behalf, I would encourage you to get involved- attend a sub-committee
meeting, read our monthly email bulletin, regularly look at the website http://www.salfordandtraffordlmc.org.uk/ (and contact Mrs Simenoff if you have forgotten your log-in details).

LMCs may be 101 years old now, but we are just getting into our stride!

Treasurer’s report
Dr Girish Patel, Treasurer, Salford and Trafford LMC with special responsibilities for Salford issues.

TREASURER’S REPORT ON SALFORD AND TRAFFORD LMC ACCOUNTS TO YEAR END 31/3/2012

The accounts are with the accountant and the full audited accounts should be available in the next 6 weeks or so.

Summary
The income from the statutory levy receipts was £116,287 for the year 2011-2012. This represents a small increase of £1558 on the year before. This is due to a small increase in list sizes across Salford and Trafford. Pharmaceutical sponsorship was slightly less this year at £3600. Total income going into statutory levy count including sponsorship is £119,887.

Total income from voluntary levy receipts is £24,835. This has gone up significantly from last year by £3767.

Total income from both levies is £141,122. This represents an increase of £4616 on last year’s income.

General Practitioners’ Defence Fund
Our LMC policy has been to pay the GPDF whatever we have collected in voluntary levies that year. I believe we now have all GPs paying the voluntary levy. We managed to pay this year’s voluntary levy in full. The main reason for sometimes not being able to pay the levy is the significant variation in list size from the figures we give the
GPC in August every year and the actual list sizes throughout the preceding and future months.

**Expenditure**
Expenditure has gone up by a significant amount in the last financial year. Main contributors include the employment of a new office assistant, LMC Centenary dinner, locum fees, computer expenses and the CPI payrise for all LMC employees and general committee members.

The Centenary dinner will not incur any future expenses for this committee but some of the other above expenses will be recurrent.

The current deficit between what is collected in statutory levy receipts and pharmaceutical sponsorship income and what is paid out of this account was £13,449 at the end of March 2012. Stripping out non recurrent expenses would leave an annual running deficit of about £8000.

**Proposition to manage the deficit**
The statutory levy business account has a business reserve built up slowly over many years. Some of the money has been kept there due to fears of the Inland Revenue, in future, asking for NI contributions from Exec members in years gone by when no NI was paid by Exec members.

My suggestion as the Treasurer is to use these reserves carefully to offset the annual running deficit over the next few years, thus avoiding any increase in statutory levy contributions from GPs. When the reserves get to a point where it might be prudent to increase statutory levies for GPs, I will do so then. I envisage that this might be in about 2-3 years, time providing no new large expenses arise.
A View from the Bridge!
Mrs Vivienne Simenoff
Executive Manager, Salford and Trafford LMC

Wikipedia says “In logic an assumption is a proposition that is taken for granted, as if it were true based upon presupposition without preponderance of the facts.” It also says “In business planning and business plans, an assumption is an assertion about some characteristic of the future that underlies the current operations or plans of an organization”.

We all work on assumptions, it can make life more understandable and can save on time, but now is not a time for assumptions………. As an LMC we have used relationships with people as our bedrock for getting things done. We have assumed they knew us and we knew them. We each knew how the other worked. The jobs of many people we have worked with for a long time have been in a state of flux for the last few months, and many organisations we have worked with have either already disappeared or will disappear soon. In some cases people may remain in our local health economy, but the demands of their new roles will be different and they will be required to work in a different way. We have to start again. We also have to forget any previous assumptions we had, and so does general practice as a whole.

If you have received funding for something in the past do not assume it will continue unless it is screwed down by the letter of the law. Be prepared to show WHY you should get that funding in the future, and to justify it. As the representative of general practice and general practitioners in this area we will continue to work on your behalf to support you, but we know we will all be looking at a very different world in the months and years to come.

One area of grave concern to me is the fragmentation of responsibility and funding and what looks at the time of writing this, like a lack of
overview in the provision of services to local populations. To date, if a Health Authority, or a PCT saw a need to develop general practice in a particular area or a particular way it had mechanisms to do so and could develop the premises needed to provide these services. That link is broken in the new world. Premises funding which has been stymied these last few years will be harder and harder to find. On top of this, increasingly you are likely to hear the retort that GPs and their practices need to be more business minded as well as “if you think that your practice needs that you will need to fund it yourself”.

All of that means that each individual practice needs to take a long hard look at itself. Now would be a good time to carry out a SWOT analysis and examine your practice’s Strengths, Weaknesses, Opportunities and Threats. From that you can develop a practice business plan. As part of that you need to consider how to maximise your income and minimise your expenditure. When it comes to minimising your expenditure please don’t forget to use the LMC Buying Group to help to reduce your costs. If you are a Salford and Trafford LMC constituent practice you will be able to use a password to access deals in many areas of practice expenditure on www.lmcbuyinggroups.co.uk - if you have mislaid your password please get in touch us here at the LMC office.

Change is challenging, but sometimes going through that challenge gives you a fresh perspective which can be invigorating. This last year we said goodbye to Dr Nigel Hyams as our Chair, and Hon Sec with special responsibility for Salford issues. It was a pleasure to work with him. Dr Jenny Walton and Dr Mhairi Yates who have taken on his mantle (and it was a big mantle!) are proving to be worthy successors. I would like to thank them, as well as Dr Girish Patel our hardworking and dedicated Treasurer from our Salford based Executive for all their assistance. I would also like to thank Dr Ravi Mene our Hon Sec with special responsibility for Trafford issues, and our Deputy Chair Dr Iain Maclean who also works on that side of the ship canal. Trafford GPs are fortunate to have them fighting their corner.
These last few months we have also seen a developing role for Dr Colin Kelman who has brought his enthusiasm and expertise to our Executive meetings. Thank you one and all. My thanks would not be complete however without a mention of my colleague Kerrie Rowlands who brings her superb organisational skills to the mix. Since joining us as our Administrative assistant in May last year she has enabled us to do more to help you. She has made a difference and I am grateful for that too.

This year though there are other thanks as we reach an end of an era. We had been accommodated in what was Peel House and became Sentinel House, since 1996. Our thanks go to Ian Greatorex of the then Salford and Trafford Health Authority for the vision to see that an LMC on the inside can smooth difficulties before they become problems and to Dr Mike Burrows who carried on that vision. We wish him every success in his new role as Director of the NHS Commissioning Board for Greater Manchester. We have now moved to our new offices on the Trafford side of the ship canal. Thank you Salford for your hospitality and support - it has been greatly appreciated.

Thanks go to LMC colleagues across Greater Manchester for the support you give us as part of the Association of Greater Manchester LMCs and to Dr John Hughes our GPC rep who chairs that group. Thanks are due too to the General Practitioner Committee of the BMA (GPC) for all the advice and support they give us and which in turn we share with our practices. This is funded by the “voluntary” section of our levy which we pass on to them.

Last but not least I would like to thank all the Subcommittee members on both the Salford and the Trafford committees as well as our co-opted members who contribute to lively debate and policy making. Kerrie runs the office and I support practices and I act as the Civil servant to the Minister role of our Executive. It is GPs who make the LMC what it is – the representative body for GPs in Salford and Trafford. GPs representing GPs – that is our strength! That is how we have functioned these last 100 years and weathered all the storms of change around us.
So, why is this article entitled “A view from the Bridge”? This LMC is a bridge that links both Salford and Trafford. It was not just geography that drew us to the image of a bridge as our logo – all LMCs are bridges: bridges between NHS management and local GPs, and between GPs and other GPs. We link practices to information they need to provide services and can be the link to the help that GPs need on a personal level too. We are also sometimes the only bridge between current reality and the past, and on occasion we act as an organizational memory too.

Using your LMC can be like having a bigger brother in the playground with you. We have many statutory roles, areas where the management structure of the NHS need to consult with us. In that capacity we may represent a single GP or all GPs in the locality. We also work to assist individual GPs in relation to their contract with the contracting body (currently PCTs but soon to be the NHS Commissioning Board with input from CCGs), but also in relation to complaints, in relation to stresses they are experiencing with partnership or staffing difficulties – the list goes on.

If we can’t help you we can usually signpost you to someone who can. We have dealt with many, many personal issues over the years – we don’t get shocked, we don’t judge you, and we will do our absolute best to ensure we try to assist you.

So don’t get in trouble – get in touch!
NEED A LISTENING EAR?

DO YOU, OR ANYONE YOU KNOW, NEED HELP AND SUPPORT AT THE MOMENT?

As an LMC we spend our time dealing with very many issues. Some of them you will be aware of, and others you will not. The issues you may know about will relate to contracts locally and nationally and sometimes issues that relate to the contracts of smaller numbers of practices. You will be unaware (because that is how we keep it) of the pastoral work that we do with colleagues who find themselves in severe difficulties. These may relate to court cases, alcohol or substance abuse, financial difficulties, health problems - be they physical or mental, divorce, referrals to the GMC, suspension by the PCT, referral to NCAS etc etc.

If you, or a colleague you know is in need of support, please get in touch with us.

- Dr Ravi Mene, our Hon Sec can be contacted at his surgery on Chester Road, Old Trafford, or by his mobile on 07973 937353, or by email on ravi.mene@nhs.net
- Vivienne Simenoff, Executive Manager. At the LMC office on 0161 873 9553, on her mobile: 07976 847087, or by email: vivienne.simenoff@trafford.nhs.uk

If however you feel that you would like to talk to another service, the following may be of assistance:

- **BMA Counselling service: 08459 200169**
  Staffed by trained non-medical counsellors 24 hours a day.
  Available to BMA Members and members of their household.
- **Sick Doctors Trust** - 0370 444 5163
  Offers a 24 hour telephone helpline. They offer support and confidential advice, intervention and treatment to doctors with alcohol or drug dependency problems. They aim to offer hope and opportunities for treatment and rehabilitation to affected colleagues.

- **Doctors’ supportline** – 0870 765 0001
  Staffed by trained volunteer doctors. For those suffering from depression, or anxiety, work difficulties, mental distress, family worries or partner problems. Open 36 hours a week

- **Gamcare (Gamblers Support)** – 0808 8020133
  Support for gamblers and their families

- **Occupational health service**
  Funded by the PCT for GPs and their staff – but completely confidential.

The Cameron Fund is the only medical charity which provides help and support solely to general practitioners and their dependants. It aims to meet needs that vary considerably from the elderly in nursing homes to young, chronically sick doctors and their families and those suffering from unexpected and unpredictable problems such as relationship breakdown or financial difficulties following the actions of professional regulatory bodies.

Anyone who knows of someone experiencing difficulties, hardship or distress is urged to draw attention to the Cameron Fund’s existence and to seek assistance from the LMC in approaching them.

If you, or anyone you know is undergoing a performance review or has been referred to the GMC please be aware that we are available to offer support at this difficult time. We are non-judgemental and can offer support from colleagues across the ship canal if you are more comfortable with that. If you need help, please give us the opportunity to try to help you.
I do hope that if you find yourself in need of support that you will reach out and take it.

Information distributed to all constituents of the LMC by email in the last year:
If you have not been receiving emails from us, please email vivienne.simenoff@trafford.nhs.uk or LMC.office@trafford.nhs.uk to advise of your address.

Seeking advice on Employment Law?

The LMC maintains a list of Solicitors who have expertise in employment law for general practice, and have advised practices locally. If you would like this information (which does not recommend any one particular solicitor), please get in touch.

If you need advice on employment law you may also be interested to know that the BMA's Employer Advisory Service was recently set up and provides Member GP practices with free comprehensive, impartial and authoritative advice on a huge range of employer-related matters.

They have a team of specially trained and experienced advisers who are able to deal with queries on issues such as recruiting and employing staff, contracts and terms and conditions of service, appraisals and performance management, disciplinary procedures and dismissals. They are also well versed in current employment legislation, discrimination, the development of appropriate HR policies, and how to implement best practice.

They understand general practice and employer matters relating to
doctors in the following areas:

- employment law
- grievance and disciplinary issues
- managing absence
- recruitment
- appraisal
- discrimination
- HR policies
- best HR practice.

The service is available on 0300 123 123 3 anytime between 8.30am and 6pm (Monday to Friday, except UK-wide bank holidays) or you can email your query to support@bma.org.uk.

To access the service at least one partner in any practice needs to be a BMA member although we would recommend all doctors are members of the BMA.

**Executive Members and Members attendance at LMC meetings**

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<td>Dr I Maclean</td>
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<td>Dr C Kelman</td>
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<td>Dr C Westwood</td>
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<td>Dr K Kuna</td>
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<td>Dr A Freeman</td>
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<td>Dr H Marsden</td>
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<td>Mrs D Darlington</td>
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<td>Mr C Booth</td>
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