

**British Medical Association**

**British Dental Association**

**Pharmaceutical Services  
Negotiating Committee**

**Optical Confederation**

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**Funding for LRC representatives attending Performer/Contractor Screening Group and Performer/Contractor List Decision Panel meetings**

Dear David,

We are writing to you with reference to the NHS England policy and procedure for the identification, management and support of primary care performers and contractors whose performance gives cause for concern, which was first published on 27 March this year.

We welcome the recognition of the importance of involving Local Representative Committees (LRCs) in local performer/contractor list processes and we note the reference to allowing representatives from neighbouring LRCs to participate, so that the performer/contractor in question is not being scrutinised by a member of their own LRC. We very much support this suggestion within the policy and have promoted exactly this approach to our members and LRCs across the country.

The area team geographies now span large swathes of the country. Where a single PCT provided relatively 'local' coverage, there are now much more significant distances over which NHS managers work. Naturally, the same goes for LRC representatives when they are called to attend one of those meetings regarding the management of performer/contractor lists. Particularly when, quite appropriately, LRC reps from areas other than the one in question are required to attend, the loss of earnings, clinical time and travel costs can be significant and very often a locum will be needed.

The roles for LRC representatives on both the Screening Group and the Decision Panel are substantively the same. The representative attends as a democratically elected member of the profession, to give professional advice and see that the process of assessment or judgement is undertaken fairly and transparently, as well as providing any additional clinical or practice-based information during the process. The involvement of LRC representatives in both PSGs and PLDPs

gives credibility both to the performance management processes and to the bodies running these processes.

Whilst some area teams are now reimbursing representatives for any expenses incurred as a result of attending these meetings, we know from our members that many others are not. Some members of area team staff have suggested that they are awaiting instructions from NHS England. As you will appreciate, the situation has led to local difficulties with the recruitment of LRC representatives to sit on these panels.

We ask you to provide confirmation, on behalf of NHS England, that area teams should provide full reimbursement of expenses and loss of earnings for all LRC representatives attending these meetings. Such confirmation will be very helpful in ensuring that all area teams are consistent in their approach to covering the expenses for local members of the profession undertaking roles to support NHS management processes.

We look forward to hearing from you.

Yours sincerely,



Laurence Buckman

**British Medical Association**



Sue Sharpe

**Pharmaceutical Services Negotiating Committee**



John Milne

**British Dental Association**



David Hewlett

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