



ANNUAL REPORT 2020

Advise – Support – Represent

CONTENTS

■ <i>Chair's Report</i>	3
■ <i>Who we are</i>	4
■ <i>How we are funded</i>	5
■ <i>LLR LMC Board Members & Staff Profiles</i>	6
■ <i>East Leicestershire & Rutland Lead</i>	7
■ <i>Leicester City Lead</i>	8
■ <i>West Leicestershire Lead</i>	9
■ <i>GPC Representative & PCNs</i>	10
■ <i>Case Lead</i>	12
■ <i>Press Officer & Mortality Lead</i>	13
■ <i>Meetings & LMC Representation</i>	14
■ <i>Treasurer's Report</i>	15
■ <i>Financial Information</i>	16
■ <i>Leicester Leicestershire & Rutland Practices</i>	18
■ <i>Contact</i>	20

CHAIR'S REPORT

Dr. Nainesh Chotai



I welcome colleagues to the LLR LMC annual report, the second of this electoral term.

As ever the report gives me the opportunity and pleasure of thanking our

office team of Charlotte Woods and Meera Tailor for their dedicated hard work and ongoing support to constituents.

I also thank the LMC board for its wisdom, guidance and challenge that makes the LMC the assertive organisation it is.

This year has been unprecedented, dominated by the Covid-19 crisis. I especially acknowledge my LMC colleague Dr Fahreen Dhanji who has formidably represented the LMC at primary care cells working with CCGs.

The LMC has been instrumental in ensuring a proper hot hub and home visiting service. My LMC colleague Dr Grant Ingrams has, almost single handedly, designed the local electronic medical certification of death and cremation processes.

The team continues to work with commissioners to ensure resourcing into General Practice is maintained and continues to challenge attempts to reduce funding from organisations such as Public Health.

It is a credit to our GPs that Primary Care patient services were maintained and that new remote ways of working were embraced during the crisis.

The LMC continues to work with colleagues across the system to ensure a manageable and resourced process back to restoration.

The LMC board was pleased that we were able to rebate some of the levy and purchase PPE early on in the crisis to support the local effort.

Though dominated by the crisis, the day-to-day work of the LMC continues. As the CCGs reorganise and a new management team appointed, the LMC has reorganised itself to shadow each executive, to work closely to progress GP interests.

The LMC continues to host regular meetings and seminars for constituents on topical matters, to further the business of general practice, including with national colleagues. We continue to support our GPs who face difficulties with the regulators as well as offering support to practices with internal challenges between colleagues.

We continue to engage in various committees notably the CCG Primary Care Commissioning Committees, the Transferring Care Safely process, STP, Workforce and Training and Development committees.

The LMC, thanks to a strong stance made by practices, is beginning to make progress in funding non-core services. We continue to make a strong case for PCN funds to be retained by the networks.

In the coming year, the LMC will renegotiate the Christmas Eve & NYE subcontracting arrangement with DHU whilst maintaining the reasonable needs of patients and is focusing on the non-resourced transfer of work from secondary care to primary care. The present protections are simply not working and the LMC are pressing for a commissioning solution.

The LMC board continues the prudent use of levy payer's money as the LMC strives to provide maximum on going value to its levy payers.

I commend this annual report and accounts to our levy payers and look forward to meeting you at our virtual Annual General Meeting, where the keynote speaker will be Dr Nikki Kanani, Medical Director of Primary Care for NHS England and NHS Improvement.

WHO WE ARE

Our mission is to look out for and look after GPs and their teams

We Advise

From partnership issues to business planning, we provide valuable, up to date and expert advice to GPs and their practice managers on essential subjects including premises and contractual matters.

Alongside our in house experience and knowledge, members benefit from our close relationships with the BMA, the General Practitioners' Committee (GPC), the CQC, other LMCs, and specialist legal support.

We Support

We provide support for members' health, welfare and careers. Because we understand the challenges of working in General Practice, with increasing demand and workload, you can be confident of confidential and experienced support from us whenever you need it.

We support GPs in dealing with issues with appraisal, revalidation and performers list membership, even when the medical defence organisations are unable to help. We support GPs returning to work, undertaking remediation or involved in enquiries into their performance by the GMC or NHS England.

We Represent

We represent practices on bodies including NHS England regional team, Clinical Commissioning Groups, Public Health, Local Authorities, Health Watch and the Care Quality Commission.

We represent GPs' view to the local media, and we help practices dealing with media enquiries. When GPs are being investigated or their contracts are at risk, we are there to help and support.

The LMC is a completely independent body recognised by statute. We are a democratic organisation with a governing body of representatives, elected by our members.



HOW WE ARE FUNDED

The Statutory Levy

All LMCS are funded by a statutory levy. This amount is collected from practices and is based on an amount per patient. This is reviewed yearly and set by the LLR LMC. It is currently set at 42p.

This money funds the office and LMC board members. It also funds board members representing general practice with the CCG, Local Authorities, NHS England and other bodies from time to time.

The National Levy

In addition to the statutory levy, the LMC also collects a national levy. This is a separate levy which is collected to fund the National Negotiating Committee (GPC) and the GP Defence Fund (GPDF) and supports national negotiations regarding General Practice.

This rate is set by the GPDF and is also based on an amount per patient. It is currently set at 6p.

A brief guide to the General Practitioners Defence Fund Levy

The General Practitioners Defence Fund continues the work of the fund established in 1911 to support General Practitioners' negotiations with the Government. The Fund is presently established as a company limited by guarantee, the members being the voting members of the GPC.

The main expenditure of the fund is supporting the GPs, who work for the GPC, and its national subcommittees in Wales and Scotland and who need to take time out of their medical practice, and the Annual Conference of LMCS. The Annual Conference provides the principal channel of accountability between the GPDF/GPC and LMCS.

The fund also supports legal, accounting and other professional advice and, where required, contributes to the cost of legal challenges which are deemed of national importance. The GPDF works closely with the BMA, but it is not, unlike the BMA, registered as a Trade Union.



LLR LMC BOARD MEMBERS & STAFF PROFILES

County Representatives - East Leicestershire & Rutland



Dr. Nainesh Chotai - LMC Chair and LMC board member for the past 20 years. GP Partner, GP trainer and practice representative with his PCN.



Dr. Fahreen Dhanji - GP Partner at Latham House Medical Practice in Melton since 2009. Currently a PCN Clinical Director, GP trainer with a specialist interest in ENT and minor surgery. Joined LLR LMC Board after she was co-opted onto the board in 2016 and then elected for the new electoral term, 2018 - 2022.



Dr. Shiraz Makda - GP partner in Oadby and the current Chair of the local RCGP faculty. An LMC board member for several years, and after completing the case investigator training is now the cases lead. He also has educational roles at Leicester and London medical schools.

County Representatives - West Leicestershire



Dr. Anu Rao - GP Partner and Trainer, Forest House Surgery. GP board member, LLR LMC. BMA General Practitioners Committee, IT Policy Lead. Co-Chair National Joint GP IT Committee UK Medical Director, Charnwood Network. Clinical Director, Watermead PCN. Regional LMC rep for LLR and Northamptonshire to BMA GPC England.



Dr. James Ward-Campbell - GP in Castle Donington. Elected to LLR LMC board in 2019 and board member of local GP federation.



Dr. Vikram Bolarum - GP at The Burbage Surgery in Hinckley. GP trainer for the last 12 years and a lead for Undergraduate training at Burbage Practice for Hinckley and Bosworth Academy. Clinical Director for Fosseway PCN and LMC board member since 2018 representing West Leicestershire. On the local Fellowship committee of the RCGP.



Dr. Sumit Virmani - GP Partner in Whitwick. GP appraiser and Out of Hours trainer.

City Representatives - Leicester City



Dr. Grant Ingrams - Managing Partner of a Leicester City practice since 2016. Member of GPC from 1994 to 2019, where he was deputy chair of commissioning, chair of IT Sub-Committee and co-chair of JGPITC. Secretary of GPC West Midlands for 10 years and the current LMC Press Officer.



Dr. Amit Rastogi - Elected to the LLR LMC board in 2019 as a Leicester City representative. Executive Partner at Saffron Health in the City. He is involved in Undergraduate teaching at the Medical School. The Named GP for Safeguarding Children in LLR and the Clinical Director for Leicester City South PCN.



Dr. Rajiv Wadhwa - GP Partner at Highfield Surgery in Leicester City. Lead for Leicester City on LLR LMC Board. Trainer, Mentor and GP Appraiser. Training Lead for Highfield Surgery. Founding member of Across Leicester Academy. Clinical Director for Leicester Central PCN.



Dr. Hisham Haq - GP Partner in Leicester and Treasurer for the LMC.

Office Staff



Charlotte Woods - Joined the LMC in 2014 and oversees the running of the LMC Office. Represents the LMC at Practice Managers Forums and CCG liaison meetings.



Meera Tailor - Joined the LMC in 2019. First point of contact for our members and supports the daily running of the office.

EAST LEICESTERSHIRE & RUTLAND LEAD

Dr. Fahreen Dhanji



'2020 what a year it has been so far!'

For everyone in every walk of life this will most definitely be a year we won't forget.

Like many have said everyone in Primary Care this year has shown how resilient we are. We have faced unprecedented challenges and risen above them.

I have represented the LLR LMC on the Primary Care Cell from the beginning of the Covid-19 pandemic. This has given us a voice and presence to make sure that we are working with the CCG to ensure that we are equipped to deal with an ever-changing landscape. This has bolstered our relationships with the CCG and given us a forum in which we can implement relevant guidance in a safe yet effective manner, keeping in mind the many changes and challenges that have come our way.

Recently members raised questions around the Extended Hours Access (EHA) to the LMC and whether the hours made through the flu programme, could be 'banked' and used for EHA. Due to good working relationships with the CCG, we managed to agree that practices could 'bank' their EHA until December to support practice resilience, winter pressures and the challenges around this year's flu programme.

With this financial year being different, there have been questions and uncertainty around finances to general practices, but we have continued to work with the CCGs, GMAST, NHSE/I, Public Health and Local Authorities to ensure stability.

- Number of Practices - 29
- Population - 327,000
- Number of PCNs - 7



Map source:
eastleicestershireandrutlandccg.nhs.co.uk

Whilst we unfortunately don't win every battle, we certainly try, and I feel privileged to be able to be at the forefront of this challenge and to continue to steer us as jobbing GPs to provide for our communities.

I currently represent the East Leicestershire and Rutland practices at the ELR PCCC and am part of the regular liaison meetings with the CCG chairs and CCG Heads of Primary Care.

I have also continued to be an advocate to enable PCNs to flourish in LLR and making sure that all the funding related to PCNs like the ARRS monies are passed to PCNs.

I hope to continue to make sure that all practices in LLR are treated fairly and equitably and would like to thank you all for your ongoing support that enables me to serve our practices to the best of my abilities.

LEICESTER CITY LEAD

Dr. Rajiv Wadhwa



We have all seen the devastation that this pandemic has wrought, but we have also witnessed the bravery and selflessness of NHS staff.

Over the last six months, I have witnessed the coming together and cohesive working between all stakeholders including the LMC as GP representatives, PCNs and CCGs, that has been unprecedented in my sixteen years as a GP. This was one time when patient care and safety and well-being of our staff was at the heart of every decision that was taken.

I know that nationally there have been frustrations but I am pleased to say that locally this focus was not lost and, where possible, everyone has worked together to take local decisions in an ever-changing scenario that were beneficial to us. I am hopeful that this new way of working and taking pragmatic decisions in the interest of our patients and General Practice will continue.

I would like to especially salute two of my LMC Colleagues Dr Anu Rao and Dr Fahreen Dhanji for their hard and relentless work, day and night and weekends and holidays, over the last six months in shaping the response to Covid 19 locally. The number of meetings they have attended, and the amount of paperwork they have gone through, day after day, is astounding. I know the sacrifices they have made to their personal lives in order to get the job done. I hope that one day, as the dust settles on this Pandemic, there will be

time to celebrate their-and so many other unsung heroes-dedication and achievements.

It seems a distant memory now, but for the LMC, and for myself, one of the biggest achievements in the last year before the pandemic hit, was resolving the long standing dispute over Thursday afternoon “closure” and the matter of sub-contracting services to others in core hours within the City.

After a prolonged discussion over months, the City CCG has finally formally agreed that practices can sub-contract their services to another provider under an agreed framework and close the doors on Thursday afternoons. I am confident that this will give some relief to those practices that find themselves overstretched and lay to rest a dispute that has been ongoing for as long as I can remember.

I have continued to raise and challenge, on behalf of our members, the ongoing issue of inappropriate and unfunded transfer of work from Secondary Care to Primary Care, as well as the inappropriate signposting to GPs by schools, social services and many others.

I have made it very clear to all stakeholders that asking Primary Care to increase the access is futile and they have to either

- Number of Practices - 57
- Population - 330,000
- Number of PCNs - 10



Map source: bettercareleicester.nhs.co.uk

resource it adequately or, better look at how to reduce the demand on us.

Just before the pandemic, Leicester City Council, Public Health and the new CCG Chief Executive promised me a review and some quick action to resolve some of these issues. Unfortunately, this did not gather much momentum as all energy and resources was soon diverted to the management of Covid-19. But I am determined to pick it up again once the timing is right.

While wearing my other hat as a Clinical Director for a City PCN, I have always raised the flag of LMC and of individual GPs and Practices, and I am pleased that PCNs are coming together across the City and LLR as a strong voice for their patients and for Primary Care. I am hopeful that these will be beneficial to all of us in long term.

Finally, I thank all of you for your support, and challenge where needed, in the previous year. I am thankful to my LMC Team who are beyond wonderful, and we all share a common passion for General Practice.

Once again, I look forward to serving LLR GPs and in particular the City GPs over the next year.

WEST LEICESTERSHIRE LEAD

Dr. Sumit Virmani



General Practice has embraced the change and kept working hard to support our population.

The LMC has been actively involved across LLR with the development and progression of PCNs and I have worked very closely with our local PCN at North West Leicestershire. Recruitment of ARRS has supported practices and has been appreciated by our patients.

We have actively been involved in negotiating resources for “LEFT SHIFT”. We have seen some recognition of this by commissioners but unfortunately, we are still waiting concrete actions.

I have been able to represent all of you at the LMSG meetings where we are currently working on the shared care drugs pathway and again resourcing it appropriately and making it paperless.

On behalf of the LMC, I also represent West Leicestershire at the CCG PCCC in common meeting, as well as the CCG Chairs and Heads of Primary Care liaison meetings. I attend the Violent Patient panel meetings.

- Number of Practices - 46
- Population - 366,000
- Number of PCNs - 8



Map source: westleicestershireccg.nhs.co.uk

More recently, I have been working with the CCG to devise a mechanism to ensure that GPs are reimbursed for their time for completing safeguarding reports. I am pleased to say that we have made positive steps forward and hope to provide a further update in due course.

In the coming year, I would like to continue supporting our members and representing you to achieve the best for primary care. I shall continue to work closely with the PCNs and CCG. I hope we can make sure that the planned care work coming out of secondary care is safe and well resourced.

GPC REPRESENTATIVE & PCNs

Dr. Anu Rao



I have tried to reflect and summarise the past 12 months; early last year I had the privilege of representing your views on the national BMA GP committee and I was thrilled to have been appointed the BMA GPC IT and Information Governance lead.

The first challenge at the beginning of the year was the draft PCN DES. This was not received well by the profession and the views of LLR GPs represented nationally, which resulted in the PCN DES being mandated to be re-negotiated.

The final PCN DES were a much more acceptable version, however the specifics of the various DES elements will be negotiated yearly, and I will ensure that our regional views are heard loud and clear.

As the BMA GPC IT and IG lead, I have raised our concerns nationally about the lack of clear investment in IT infrastructure during and post pandemic. For example, the requirement to have resources to work remotely. We need to ensure seamless integration of clinical systems between secondary and primary care such as sharing of records and EPS.

There are also several contractual elements within the contract that require planning and delivery in the next year, for example; digitalisation of records and access to records / redaction capability.

I hope to be able to keep you all informed of the national policies in a timely manner and at the same time making sure that our local concerns are channelled robustly to national teams.

During the pandemic, Practices have adopted new ways of remote consultations by embracing technology like telephone, online and video consultations. This has meant that patients have continued to receive robust clinical care at all times.

Practices have worked together within primary care networks and federations to provide safe services to their communities. PCN clinical directors have established themselves as important voices in the system and PCNs have shown the value of community-based care led by general practice.

This year we have seen many local initiatives that emphasise the importance of collaboration with LMC, CCG, PCNs and other providers across LLR. To name a few of these initiatives; care home enhanced services, hot hubs, home visiting services, remote death verification etc.

It has also developed an understanding of the importance of ensuring that resources are appropriately directed to where patient care is delivered.

I truly believe that we have come a long way over the past 6 months in establishing a working relationship with community and secondary care providers and we are all committed to continue this post pandemic.



“During the pandemic, Practices have adopted new ways of remote consultations by embracing technology like telephone, online and video consultations” - Dr. Anu Rao

CASE LEAD

Dr. Shiraz Makda



It has been another busy year for the cases team and having had 259 cases come through the office it really has been business as usual! Regardless of our current situation, pandemic or not we can honestly say that as your LMC we are here to advise, support and represent you.

In the same manner that primary care has shown tremendous flexibility, resilience and strengths in the last 6 months, so too have we in the way we have been dealing with the magnitude and types of cases we have faced.

We have strengthened our process in the last year with area leads that hopefully are in more tune with local issues and I would like to take this opportunity to introduce these.

Dr Fahreen Dhanji is the cases lead for East Leicestershire & Rutland, Dr Rajiv Wadhwa for Leicester City and Dr Sumit Virmani for West Leicestershire.

We are fortunate to have Dr Anu Rao as an LMC board member and recently elected the GPC IT policy lead.

Cases consist of a variety of matters:

- Partnership disputes
- Lease issues/NHSPS Service charges
- Pastoral support
- Attendance at PAG meetings
- Contractual matters
- Covid19: Changes to QOF, clarity around restore and restoration
- PCN matters: Clarity around national DES, ARRS and disputes

I am confident that these board members are committed to supporting and aiding our members with high quality, accurate advice and help and those that have met them will certainly agree.

I would like to take this opportunity to thank the office team for being committed to general practice and working so hard to serve our members. I hope we are always approachable and professional in our manner and, more importantly, effective.

We understand the pressures and challenges that affect our profession be it organisational, clinical or administrative. We are aware of the increasingly difficult climate that is surrounding us and aim to take a holistic approach at all times. Much like the profession we represent we hope that we can emulate and uphold the key skills it takes to be a GP in LLR.

We have been your voice in cases that range from CQC concerns, non-core services, trading standards, disputes and practitioner performance areas. Regardless of the type of case we will always aim to be your best advocates and as helpful as possible. I truly believe that as GPs we face the most complex situations and are best placed to deliver best care however we are also heavily scrutinised and usually end up with the proverbial baby, hence our cases team are there to listen, support and be there for our members.

I take pride in being able to represent you and value your shared learning.



PRESS OFFICER & MORTALITY LEAD

Dr. Grant Ingrams



Press Officer

The LMC was becoming increasingly concerned about the ongoing negative representation of general practice in the lay press.

It was agreed that the LMC should therefore appoint a press officer and be prepared to positively promote general practice and challenge false stories.

I was appointed into the role and started by agreeing a Press Release template and putting together a list of TV, Radio, Online and Print media that cover the Leicester, Leicestershire and Rutland area.

Our first opportunity occurred following the extremely hostile and negative press response to an NHS England letter accusing general practice of being closed during the pandemic. We circulated a press release the same morning. In response Dr Chotai (Chair) was interviewed for the news bulletins for Heart, Capital and Smooth Radio.

Mortality Lead

The Coronavirus Act 2020 significantly changed the requirements for completion of the Medical Certificate of Cause of Death (MCCD) and Cremation Forms. It also became clear that the local custom and practice process of verification of death needed changing in view of the number of predicted deaths in the community and to protect general practitioners and reduced the risk of spread of the coronavirus.

On behalf of the LMC I worked in close association with stakeholders, and in particular Professor C Mason, to rapidly develop a scheme for Remote Verification of Death. This has been successfully embedded into normal practice. It has been agreed that this process will persist beyond the pandemic.

I also developed guidance for the completion of MCCD and Cremation Form 4 in compliance with the current legislation. With the help of Susan Marsh (NHS Leicestershire Health Informatics Service) both the RVOD and Crem Form 4 have been developed electronic forms in PRISM.

The LMC has petitioned nationally for improvements to the death process, including that the MCCD should be an electronic form.



MEETINGS & LMC REPRESENTATION

We continue to regularly attend and be 'in attendance' at several meetings to ensure we are representing our members at every platform possible to make our voices heard . The LMC are now in attendance at the following meetings:

- Primary Care Cell
- Mortality Cell
- PCCC in common
- PCCC Confidential (Leicester City and East Leicestershire & Rutland)
- Training & Development
- GP workforce group
- Transferring Care Safely
- STP Flu Planning
- Flu task & finish group
- Practice Managers meetings
- LMSG
- Violent Patients Scheme panel

The LMC has other regular meetings with key organisations to share knowledge and issues with the view it supports our members.

- Monthly CCG Chairs, Chief Executive & LMC meeting
- Bi-monthly CCG Heads of Primary Care & LMC meeting
- Bi-monthly CQC liaison meeting
- Regional LMC meeting

TREASURER'S REPORT

Dr. Hisham Haq



I am pleased to report that the LMC finances are stable and the LMC board has used levies responsibly.

There is strong oversight of all aspects of the LMC finance and there I am satisfied with the annual spending.

The LMC is keen on developing services for levy payers and this year has managed to reimburse practices some of the levy, as well as purchasing face shields for practices at the beginning of the pandemic when PPE was in need.

We have actively co-ordinated virtual webinars on topics to support our members, as well as funding this year's practice manager conference.

I would recommend the accounts to the members.



FINANCIAL INFORMATION

Leicester, Leicestershire and Rutland Medical Committee

Trading and Profit and Loss Accounts for the year ended 31 March 2020

	2020	2019
	£	£
Turnover	536,771	532,115
Cost of sales	116,115	340,170
Gross surplus	420,656	191,945
Administrative expenses	265,830	297,573
Operating surplus / (deficit)	154,826	(105,628)

The above results were derived from continuing operations.

The company has no recognised gains or losses for the year other than the results above

Leicester, Leicestershire and Rutland Medical Committee Limited

Trading and Profit and Loss Accounts for the year ended 31 March 2020

	2020	2019
	£	£
Turnover	285,684	308,891
Cost of sales		
Project expenditure	25,952	8,797
Gross surplus	259,731	300,093

FINANCIAL INFORMATION

	2020	2019
	£	£
Administrative expenses		
Accountancy	5,214	5,400
Rent and services	10,578	8,705
Repairs and renewals	383	1,786
Depreciation of fixtures and equipment	1,763	2,828
Wages and salaries (non directors)	32,118	38,777
Social security costs (non directors)	2,292	3,837
Other staff costs (non directors)	3,755	3,461
Salaries and fees, directors	30,600	26,615
Medical secretary and committee costs	91,429	100,006
Travel and subsistence	635	675
Legal and professional	15,376	22,783
Bank charges	255	342
Licences and insurance	2,804	2,530
IT and computing	5,133	5,600
Telecommunications	3,776	4,370
Printing, postage and stationery	1,556	770
Subscriptions	-	410
Hire of rooms and refreshments	909	958
Conference and seminar expenses	7,849	5,423
GP defence fund	42,000	63,400
Sundry expenses	1,325	1,435
	259,751	300,111
Other interest receivable	20	18

Although the figures are considered correct at the point of going to print, they are yet to be put under an independent review. This could lead to other adjustments being required.

LEICESTER LEICESTERSHIRE & RUTLAND PRACTICES

East Leicestershire & Rutland

South Leicestershire Medical Group

Countesthorpe Health Centre

Market Harborough Medical Centre

Oakham Medical Practice

Bushloe Surgery

Long Clawson Medical Practice

The Central Surgery

Billesdon Surgery

The Wycliffe Medical Practice

Latham House Medical Practice

Kings Way Surgery

The County Practice

Empingham Medical Centre

The Rosemead Drive Surgery

The Limes Medical Centre

The Glenfield Surgery

Forest House Medical Centre

The Croft Medical Centre

Northfield Medical Centre

Wigston Central Surgery

The Uppingham Surgery

Jubilee Medical Practice

South Wigston Health Centre

Hazelmere Medical Centre

Husbands Bosworth Medical Centre

Spectrum Health

The Masharani Practice

Enderby Medical Centre

Market Overton Surgery (& Somerby)

Leicester City

Groby Road Medical Centre

Oakmeadow Surgery

Manor Park Medical Practice

Sturdee Road Health & Wellbeing Centre

DeMontfort Surgery

Spinney Hill Medical Centre

Willowbrook Medical Centre

Downing Drive Surgery

Johnson Medical Practice

Humberstone Medical Centre

East Park Medical Centre

Saffron Health

Hockley Farm Medical Practice

Dr S Shafi (Westcotes 1)

Sayeed Medical Centre

East Leicester Medical Practice

Merridale Medical Centre

Shefa Medical Practice

Dr B Modi

Fosse Medical Centre

Evington Medical Centre

Leicester Medical Group

Beaumont Lodge Medical Practice

Al-Waqas Medical Centre

The Hedges Medical Centre

Ar Razi Medical Centre

Brandon Street Surgery

Dr UK Roy

Highfields Surgery

Narborough Road Surgery

Clarendon Park Surgery

Victoria Park Health Centre

The Parks Medical Centre

Spirit Asquith Surgery

Dr S Shafi (Briton Street)

Heatherbrook Surgery

Spirit Beaumont Leys

Pasley Road Health Centre

LEICESTER LEICESTERSHIRE & RUTLAND PRACTICES

Westcotes Health Centre

Highfields Medical Centre

The Melbourne Centre

Broadhurst Street

Dr S Shafi (Westcotes 2)

St Peters Health Centre

Walnut Street Surgery

The Charnwood Practice

Aylestone Road Surgery

Inclusion Healthcare

Belgrave Health Centre

St Elizabeth's Medical Centre

Spirit Rushey Mead

The Willows Medical Centre

Leicester City Assist Practice

Heron GP Practice

Merlyn Vaz Healthcare Hub

Bowling Green Street Surgery

Westcotes Medical Practice

West Leicestershire

Greengate Medical Centre

Castle Donington Surgery

Pinfold Medical Practice (Training Practice)

Ibstock & Barlestone Surgeries

Castle Medical Group

Measham Medical Unit

Bridge Street Medical Practice

The Old School Surgery

Markfield Medical Centre

Anstey Surgery

Quorn Medical Centre

Park View Surgery

The Surgery, Charnwood Medical Group

Station View Health Centre

The Surgery

Maples Family Medical Practice

Long Lane Surgery

Newbold Verdon Medical Practice

Whitwick Health Centre

The Burbage Surgery

Barwell & Hollycroft Medical Centre

Barrow Health Centre

Forest House Surgery

Woodbrook Medical Centre

Broom Leys Surgery

Castle Mead Medical Centre

Hinckley & Bosworth Medical Alliance Ltd

Birstall Medical Centre

The Orchard Medical Practice

Alpine House Surgery

Hugglescote Surgery

Charnwood Surgery

Manor House Surgery

Dishley Grange Medical Practice

Medical Centre

Whitwick Health Centre

Heath Lane Surgery

Banks Surgery

Silverdale Medical Centre

Groby Surgery

Ratby Surgery

Highgate Medical Centre

Desford Medical Centre

Field Street Surgery

Charnwood GP Network

Cottage Surgery

Contact

LLR LMC is open to hear from all our members. Get in touch and connect with us.

Leicester, Leicestershire and Rutland Local Medical Committee

109 Station Road, Glenfield, Leicester, LE3 8GS

Telephone: 0116 296 2950

Email: enquiries@llrlmc.co.uk

Website: www.llrlmc.co.uk



Sunrise at Thornton Reservoir, Leicestershire

LLR LMC is a Limited Company by Guarantee. Company registration number: 06278584

Place of registration: England and Wales. Registered Office address: Edward House, Grange Business Park, Whetstone, Leicester, LE8 6EP