

How did LMCs come about?

When the National Insurance (NI) Bill was first introduced in 1911 no provision was made for general practitioners to participate in the administration of the new state health insurance scheme. The British Medical Association (BMA) was determined that the profession should have a voice in its day-to-day running. It therefore ensured that locally elected committees of general practitioners i.e. Local Medical Committees were given statutory recognition in the 1911 National Insurance Act as the representative voice of the 'panel' doctors.

The 1911 Act required the Local Insurance Committee (the forerunner of the NHS Executive Council, the Family Practitioner Committee and latterly the Family Health Services Authority) to consult all general practitioners participating in the health insurance scheme on a wide range of matters via the LMC.

After the LMCs had been set up, a national committee was established within the BMA to represent the interests of 'panel' doctors in negotiations with government.

This national committee, the Insurance Acts Committee (the forerunner of the General Medical Services Committee), was recognised by government as the authoritative voice of general practitioners.

It was a Liberal Government that had agreed to these arrangements for representing general practitioners because the success of the 1911 health insurance scheme depended on the willing co-operation of a large number of independent practitioners.

The profession supported the introduction of a state medical scheme but was strongly opposed to a salaried service; it recognised that the loss of the independent contractor status would undermine the freedom of doctors to practice without state interference, and ultimately put patient care at risk. General practitioners feared that government would seek to direct them in their day-to-day treatment of patients.

This commitment to the contractor status remains a guiding principle of the GMSC. Indeed, had it not been for the tenacity of its forerunner - the National Insurance Acts Committee - on this crucial issue, general practitioners could have been drawn into a salaried service (as were their hospital colleagues in 1948). The well tested and proven value of the contract for service with the local insurance committees led to the preservation and extension of this type of contract when the NHS was established in 1948. The Local Insurance Committees - the predecessors of the FHSAs -knew that this contract worked successfully and were active in ensuring that it was preserved in the new NHS structure.