

Welcome

Welcome to the winter edition of the Sessional GPs subcommittee's newsletter. We aim to keep you up to date with current issues affecting salaried and locum GPs (Sessional GPs) and the continuing work that we and the parent committee, the General Practitioners Committee (GPC), undertake on your behalf.

It has been a busy year for the subcommittee. Our work has included revising the GPC's Focus on Salaried GPs guidance to include legal advice on the continuity of service provisions, producing new guidance on job planning and in-house performance reviews, undertaking a survey of salaried GPs, as well as the organisation

of a highly successful conference for salaried GPs in April. We are also currently looking at possible amendments to the model salaried GP contract. As ever there is much work to do and work continues into 2008 to ensure that Sessional GPs are recognised and supported for their important work.

How the GPC's sessional GPs subcommittee represents you...

We are here to represent you. The subcommittee represents **all** salaried and locum GPs throughout the UK and is elected democratically on a biennial basis by all sessional GPs regardless of their BMA membership status. We are often informed of new issues through the media, Department of Health statements or through our own personal contacts. Sessional GPs are also actively encouraged to contact the subcommittee with issues that they consider

we should be pursuing.

The subcommittee is part of the General Practitioners Committee (GPC) of the BMA, and is supported by a dedicated GPC negotiator. We are therefore able to benefit from the fact that the GPC is statutorily recognised as representing all GPs and that it has sole negotiating rights with the Departments of Health for GPs employed under the national contract.

Revised Focus on Salaried GPs guidance

The GPC's 'Focus On Salaried GPs' guidance is essential reading for all salaried GPs. It explains in detail the minimum terms and conditions for salaried GPs (the Model contract), which came into effect under the new General Medical Services (nGMS) contract on 1 April 2004. This guidance was revised in October 2007. It now includes a detailed legal view on what counts as continuity of service and the use of this in calculating entitlement to maternity, sickness and redundancy pay for those employed under the model salaried GP contract. The guidance also notes the statutory maternity,

sickness and redundancy provisions for those who are not employed under the model contract. The Focus On is available at: <http://www.bma.org.uk/ap.nsf/Content/FocusSalariedGps0604>

The BMA website also contains copies of the Model Contract for salaried GPs and AskBMA provides a contract checking service that all members are advised to use prior to signing any new contract.

Membership of subcommittee

The election for the sessional GP subcommittee was held in June 2007. The following sessional GPs were elected to the subcommittee for the 2007-09 session:

Vicky Weeks

Salaried GP, Chairman*

Andrew J Cole

Locum GP, Deputy Chairman*

Malcolm Kendrick

Salaried GP

Mark Selman

Salaried GP*

Franco Tacconelli

Locum GP

Janet Watters

Salaried GP, Northern Ireland

Lydia West

Locum GP

Paula Wright

GP Retainee*

* denotes members of the subcommittee who continue in post following the 2005-07 session.

Joanne Bailey is the GPC representative and Stewart Drage is the GPC Negotiator to the subcommittee.

Ian Thompson, a Locum GP, has also been co-opted to the subcommittee as the Scottish GPC sessional GP representative.

Salaried GP pay

While there is a minimum salary for GPs employed by a Primary Care Organisation (PCO) or GMS practice since 1 April 2004, the Sessional GPs subcommittee continues to work to ensure that this is increased. One way of us doing this is through evidence to the Doctors' and Dentists' Review Body (DDRDB). From April 2007 this resulted in the DDRB recommending a £1,000 uplift to the top and bottom points of the salary range, and so salaried GPs should have now received such an annual uplift (pro rata for a less than full time salaried GP). Nevertheless this was felt to be unsatisfactory in light of the substantial work undertaken by salaried GPs.

In order to try to achieve a more substantial uplift for 2008-09, the Sessional GPs subcommittee commissioned the BMA's Health Policy and Economic Research Unit (HPERU) to conduct a survey to ascertain current contract arrangements for salaried GPs. The results showed that a number of GMS and PCO employed GPs did not have contracts that conformed to the nationally agreed minimum terms and conditions (the model salaried GP contract). This evidence has been submitted to the DDRB and we trust that they will recognise the need to appropriately reward salaried GPs for their work.

The DDRB will report its findings in March 2008. The BMA's evidence (including our evidence on salaried GPs) can be found on the website. <http://www.bma.org.uk/ap.nsf/Content/DDRBevidence2007>

In the meantime, if you consider that your salary does not recognise the work that you do, then you may wish to discuss this with your employer. The GPC has produced guidance to help salaried GPs in negotiating with their employer, which is available at <http://www.bma.org.uk/ap.nsf/Content/negotiatingalary>.

Revalidation

In February 2007 the White Paper 'Trust, assurance and safety – the regulation of health professionals in the 21st century' was published. It set out a programme of reform for the UK system of regulation of health professionals with proposals of revalidation and recertification.

The GPC wants to ensure that any revalidation and recertification process is fit for purpose, and is also keen to stress that these processes need not place an unnecessarily high burden on locum GPs. Following the publication of the White Paper, the RCGP have set up a recertification working group, of which the Chairman of the Sessional GP subcommittee, Vicky Weeks, is a member. We will keep you informed of developments.

Flexible Careers Scheme

The Flexible Careers Scheme (FCS) was introduced in England in November 2002, to help to ensure that opportunities were available for GPs who were only able to work on a part-time basis. We therefore consider that the English Department of Health's decision to withdraw new central funding for this scheme to be short-sighted.

While no new FCS posts are being created, GP practices with an FCS doctor in place continue to receive funding until the end of the three year scheme. The main problem arising for FCS GPs is the possibility that their employment contract may be amended or terminated. The subcommittee is aware of the problems faced by this group of doctors and have included details for FCS GPs in the Focus on Salaried GPs guidance, which is available at: <http://www.bma.org.uk/ap.nsf/Content/FocusSalariedGps0604>. Where problems arise it is important for FCS GPs to contact askBMA for assistance.

Returner Scheme GPs

There have been funding issues for the GP Returners' Scheme throughout the UK. For example, in England the Department of Health has fully withdrawn its central funding of the Scheme. However many PCOs throughout the UK require GPs who have been out of practise for two years or more to undergo a period of refresher training before being fully included on a Performers List. Some PCOs also ask potential returners to undertake this refresher training without funding.

The Chairman of the GPC, Laurence Buckman, and the Chairman of COGPED, Arthur Hibble, have written jointly to all PCTs and SHAs in England. This recommends that PCTs should assess a doctor's competence and requirements for refresher training on a doctor's individual merits, rather than having a blanket policy on length of time for refresher training. This would help to reduce the burden placed on potential GP returners. The subcommittee has taken advice on the legal issues surrounding GP returners funding and under Minimum Wage Regulations it would be illegal for a practice to take on a GP returner without paying them a salary given that GP Returners would be undertaking 'work' whilst at the practice. The GPC also considers that, as the majority of GPs undertaking a returners' scheme are

female, the lack of PCT funding for the scheme constitutes a breach of the Sex Discrimination Act.

Similarly in Northern Ireland, the local health boards (equivalent to PCTs) have the option to remove doctors who have not worked in the board area over the previous year, unless they can justify this with the medical advisor of the board. Doctors who have not worked at all over the previous two years are referred to the Northern Ireland Medical and Dental Training Agency (NIMDTA), The Post-graduate Education Authority, which requires that returning GPs not only have an approved placement for retraining with a training practice, but also that they should pass a written and clinical examination to be eligible to rejoin the Performers List. Unfortunately returner places are limited, and the GPs must meet the fees for the examination sections. The subcommittee has raised this the Northern Ireland GPC chairman, who is taking the matter forward. We will give you an update on developments via the GPC website.

The GPC has produced guidance for all GP returners which has been revised and is now available at: <http://www.bma.org.uk/ap.nsf/Content/gpreturners>

Retainer Scheme GPs

We are pleased that funding for the GP Retainer Scheme is continuing, with new GP retainer posts being approved. If there are problems in receiving such funding, GPs should contact their Local Medical Committee (LMC) for this to be investigated locally in the first instance.

Details for LMCs are available from the BMA website at: www.bma.org.uk

Salaried GP Conference



The first BMA/GPC Salaried GPs conference was held in April 2007 at BMA House, London. This was a huge success. The conference aimed to ensure that all salaried

GPs were aware of their employment rights and to provide taster sessions for negotiating skills.

Following the success of the conference, future conferences are planned, and will be held across the UK to reach a wider audience. The next one will be held on Tuesday 26 February 2008, at the Queens Hotel in Leeds.

The conference aims to:

- Advise delegates on ways to develop their career as a salaried GP, including effective part-time working, and how salaried GPs can increase their chances of success
- Advise on employment rights for nGMS, PMS, APMS, and PCO-employed GPs – including sickness, maternity and redundancy issues, as well as general guidance on contractual rights following

maternity leave and at the end of FCS and Retainer Scheme funding

- Outline in detail the benefits of the model/minimum salaried GP contract negotiated by the BMA, and how to ensure that at least these minimum are obtained
- Provide helpful tips for successful negotiations on salary, terms and conditions, and contract changes for use with current and new employers, with practice sessions
- Provide an interactive setting, with the opportunity for delegates to submit questions in advance and on the day.

For more information and registration details please see the BMA's website at:

<http://www.bma.org.uk/ap.nsf/Content/MakingtheMost>

Pension Issues

Employer contributions (ER) for locum GPs are currently being made by the PCO and not by the employing practice.

The option to purchase added years will be withdrawn with effect from 1 April 2008 following the review of the NHS pension scheme in England and Wales. All existing members of the scheme will have the opportunity to purchase added years during the period 1 April 2008 to 31 March 2009 but they **must** make an application to do so prior to 31 March 2008 as there will be no further opportunity after this date.

If you wish to purchase added years then the first step is to obtain an added years quotation from your PCO, this will tell you the amount of added years you are able to purchase and also the extra contributions required. If you then wish to proceed with the purchase you should complete the form AB54, this is available from your PCO. Whilst the application to purchase added years must be received by the NHS Pensions Agency by 31 March 2008 at the very latest, the contributions will not start to be deducted from your earnings until the contract starts on your actual birthday. Therefore if you were to send in your application in by 31 March 2008 and your birthday was 1 January 2009 then the deductions would not begin until then.

From 1 April 2008 a new option will be introduced which will replace added years. It will enable doctors to make extra contributions in return for extra annual pension – up to a maximum of £5,000 p.a. This option will also be available to doctors who have, or are purchasing added years. The technical details of this additional pension purchase are being finalised. Doctors who are currently paying for added years should note that these contracts will be honoured in full if they intend on remaining in the existing NHS pension scheme. If you do wish to remain in the current scheme, there is nothing you need do.

The BMA pensions department is not licensed to give financial advice so if you are considering buying added years then you may wish to consider speaking to an independent financial adviser before doing so. If you have any queries about added years or any other aspect of the NHS pension scheme review agreement then please feel free to contact the BMA Pensions Department by telephone: 020 7383 6166/6138 or by email pensions@bma.org.uk

There is also a wide range of information available on the BMA webpage: <http://www.bma.org.uk/pensions>

GPC/NASGP Liaison

The chairman of the subcommittee, Vicky Weeks, recently met with the National Association of Sessional General Practitioners (NASGP) chairman, Mike Uprichard. It was a helpful meeting in which it was agreed that both groups were working to protect the rights of sessional GPs, and will continue to work together as appropriate on issues arising in the future.

Freelance GP locums: appraiser fees and pensions

In order for a freelance locum GP's appraiser work to be pensionable, they must be formally employed (i.e. with an employment contract) by the Primary Care Organisation (PCO) for the GP appraiser part of their work. They can still remain as a freelance locum for other work. If a PCO will not provide a freelance locum with a contract of employment for appraiser work, then their appraiser earnings will not be pensionable. At this stage freelance locum GPs should therefore consider whether or not they are willing to undertake this work on this basis and/or whether a higher appraiser fee could compensate for this.

Further information is available at:

<http://www.bma.org.uk/ap.nsf/Content/locumsasappraisers0805?OpenDocument&Highlight=2,appraiser,pension>

Medico-political magazines

In July 2007 Vicky Weeks, Chairman of the Sessional GP subcommittee, wrote to the editors of GP, Doctor and Pulse, to ascertain the reasons behind the fact that a number of salaried and locum GPs were no longer automatically receiving copies of these publications. Whilst GP providers continued to receive the magazines, free of charge, sessional GPs were being required to pay to receive them.

We made the point that salaried and locum GPs comprise a significant part of the GP workforce (in some areas 33-40% of the workforce) and make a major and important contribution to general practice. In addition GP, Doctor and Pulse generates revenue by advertising jobs that are primarily of interest to salaried and locum GPs, and so it is important for these doctors to receive their publication.

Following our letters, we are pleased to report that in November the subcommittee received notification that GP newspaper would be reinstating circulation to Sessional GPs. If you are not currently receiving GP, please log on to request receipt at: www.healthcarerepublic.com/reader. If you would like to continue receiving copies of Pulse and Doctor, please do contact them directly.

Membership benefits for Sessional GPs

Through membership of the BMA, Sessional GPs are able to take advantage of a number of employment related support services. These include:

- Receiving advice on GMS standard contracts, related regulations and directions, and how the Statement of Financial Entitlements (SFE) may impact upon them;
- A contract checking service;
- Representation on matters arising out of the day-to-day operation of the model salaried GP contract;
- Advice on PMS contracts; and
- Representation on pension issues;
- Representation at grievance hearings, disciplinary hearings and externally before employment tribunals and the civil courts.



Members may telephone *askBMA* for immediate help, information or advice on 0870 6060828. Online help is also available at www.bma.org.uk/askbma

We need your details!

Whether or not you are a BMA member, please ensure that your details held in the BMA records are up to date, so that we can ensure you receive all the news and documents that are relevant to you. To update your details please email membership@bma.org.uk or go to the BMA website www.bma.org.uk