

## Welcome

This is the second of our newsletters for 2010. We aim to keep you informed about new and ongoing issues that affect sessional GPs and about the continuing work of the Sessional GPs Subcommittee and General Practitioners Committee (GPC) to **make sure your voice is heard**.

We were grateful to receive your feedback about the last newsletter and would welcome suggestions about this edition. Please send any ideas to Will Jones at [wjones@bma.org.uk](mailto:wjones@bma.org.uk).

**Please feel free to forward this newsletter to any sessional GP colleagues in your practice, or locally.**

## REPRESENTATION

### GPC Sessional GPs Representation Working Group report published

It has been over a decade since the BMA General Practitioners Committee (GPC) first set up a sessional GPs subcommittee to represent salaried and locum GPs throughout the UK. In that time, the make-up of the GP workforce has changed drastically, with a dramatic increase in the number of sessional GPs and a new dynamic between employer and employee GPs.

In order to address this challenge, the GPC last year set up a working group to review the arrangements for the representation of sessional GPs at a national and local level. It has been working intensively for the last year, and its final report is now available on the [BMA website](#).

To inform its work, the group commissioned a comprehensive research programme to ascertain the views of sessional GPs, LMCs and other external organisations. We received an extremely large number of responses to this, including 1800 responses to our survey of sessional GPs, and are extremely grateful for this input. You can also find the reports from this research on the [BMA website](#).

The surveys revealed that whilst sessional GPs wanted real improvements to their national representative structure, there was no real appetite for a divide from the GPC. The solution that has been developed is for the Sessional GPs Subcommittee to remain part of GPC, but in a significantly enhanced form. The report makes four main recommendations about the structure of the subcommittee, as follows:

- **the number of elected representatives will be doubled, from eight to 16;**
- **an executive body will be created to carry out day to day business;**
- **four permanent seats will be reserved on GPC for members of the subcommittee;**
- **the subcommittee will be given delegated authority to act on issues that wholly or primarily affect sessional GPs.**

The research also highlighted that many sessional GPs wish to improve the way in which they are represented at a local level through their Local Medical Committee (LMC). The report therefore includes good practice guidance to LMCs and sessional GPs on improving sessional GP involvement in and representation by LMCs.

The report has been overwhelmingly endorsed both at the Annual Conference of Local Medical Committees and the BMA's Annual Representative Meeting. We will now start to implement its recommendations. As part of this, we will shortly be advertising elections for the new-look subcommittee. If you want to become involved, please look out for updates on this on the [BMA website](#).

### This issue covers the following topics:

#### Representation

- GPC Sessional GPs Representation Working Group report published
- Annual Conference of Local Medical Committees 2010

#### Contractual and Professional Issues

- Salaried GPs' pay
- BMA Salaried GPs' handbook – 2010 edition
- Revalidation
- Locum GP pensions
- Contacting the Sessional GPs Subcommittee about issues in your area

#### Upcoming events

- 'Making the most of being a salaried GP' seminars

#### Devolved Nations

- Wales
- Scotland
- Northern Ireland



## Annual Conference of Local Medical Committees 2010

On the 10th-11th June 2010 the Annual Conference of LMCs was held at Logan Hall, the Institute of Education, London. The conference is the key policy-making body for the General Practitioners Committee and its subcommittees. At the conference, the LMCs' representatives voted on a variety of policy motions on matters affecting general practice. The motions that were carried by the conference have become resolutions that the GPC will act on over the next year.

The conference carried a motion that all employers of salaried GPs should offer terms and conditions that are no less favourable than those in the BMA's model salaried GP contract. The representatives also resolved that the GPC highlight the current lack of a dependable system for informing peripatetic sessional GPs about important NHS and PCO information, and that the GPC pursue maternity, paternity and adoption leave benefits for locum GPs. The Sessional GPs Subcommittee will now consider the best way to take forward the conference resolutions concerning sessional GPs.

Further information on the 2010 conference including the resolutions can be viewed on the [BMA website](#).



## CONTRACTUAL AND PROFESSIONAL ISSUES

### Salaried GPs' pay

One of the main aims of the Sessional GPs Subcommittee is to ensure that salaried GPs receive a salary that reflects their workload, professionalism and experience. Ways that the subcommittee does this include putting forward evidence to the Doctors' and Dentists' Review Body (DDRB), as well as producing guidance for salaried GPs on how to negotiate their pay.

In March, the DDRB recommended that the **minimum and maximum salary range for salaried general medical practitioners should be increased by 1 per cent for 2010 - 2011**. This meant that the minimum salary for PCO-employed and GMS-employed GPs became **£53,963**. Salaried GPs employed on the BMA's model salaried GP contract should have received their uplift from 1 April 2010. Although we would have liked the percentage increase to be larger, to reflect the increase workload and responsibility being taken on by salaried GPs, it was equivalent to the recommended uplift for other salaried doctors and dentists.

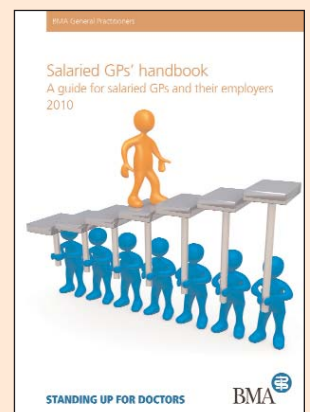
Further information about the DDRB award for 2010 - 2011 and the evidence submitted by the BMA can be viewed on the [BMA website](#).

### BMA Salaried GPs' handbook – 2010 edition

The 2010 edition of the Salaried GPs handbook for salaried GPs and their employers is now available to BMA members. The handbook is a comprehensive guide to the legal entitlements of salaried GPs as employees. It helps to ensure that salaried GPs are aware of their statutory and contractual rights, and also helps to prevent GP employers contravening the law unwittingly. In addition, it explains how to become a salaried GP and the work involved in doing so.

The handbook is a benefit of BMA membership. A hard copy of the 2010 edition was sent out to all salaried GP BMA members at the beginning of March. If you are a salaried GP BMA member and have not received a copy of the handbook, then please contact the BMA about this by calling **0300 123 123 3** or e-mailing [support@bma.org.uk](mailto:support@bma.org.uk). Locum GPs who are members of the BMA can also request a copy of the handbook using the same contact details as above.

Alternatively the Salaried GPs' handbook can be viewed by BMA members on the [BMA website](#).





## Revalidation

### *General Medical Council consultation*

In March the General Medical Council (GMC) launched its consultation document *Revalidation: The Way Ahead*. The BMA supports revalidation in principle but in its response to the consultation stated that revalidation should not be implemented until the pilots have been fully evaluated and the lessons learnt have been incorporated into plans for the national roll-out. The BMA have pointed out that a significant omission from the consultation document was the lack of reference to costings of revalidation and remediation, and how it will be funded. The response also reiterated our concerns about the specialist standards frameworks being devised by the royal colleges not being equitable, fair or proportionate to the extent that revalidation will prove impractical, expensive and ultimately unworkable.

The BMA response made clear our concerns about locum GPs being disadvantaged by the current proposed methods of evidence gathering for revalidation. Throughout the GMC consultation document and in the annexes, there was a significant emphasis upon clinical audit and the audit cycle, and colleague and patient feedback surveys as a means of demonstrating fitness to practise. We fed back our concerns that locum GPs are likely to be disadvantaged by these proposals as they are not generally based within one specific practice and do not benefit from the support mechanisms for collecting this evidence that come with being based in such a setting.

The full BMA response to the GMC consultation can be viewed on the [BMA website](#).

### *Pilots*

A series of RCGP-commissioned pilots have been assessing the feasibility of gathering evidence for the RCGP's proposed standards for the revalidation of GPs. The Sessional GPs Subcommittee and GPC are concerned that some of the proposed methods of assessment for revalidation will lead to locum, salaried and out-of-hours sessional GPs being disadvantaged. The RCGP's sessional GPs and Warwick pilot reports are available [here](#).

In March the Department of Health's Revalidation Support Team (RST) launched ten pathfinder pilots across England. Amongst other activities, these pilots were established to test the role of the responsible officer and the proposals for strengthened appraisal. The RST pilots are scheduled to end in March 2011.

However, Andrew Lansley MP, the Secretary of State for Health, has since written to the GMC stating that the Department of Health's piloting period will be extended for a further year to enable the Department to develop a clearer understanding of the costs, benefits and practicalities of the implementation of revalidation, and allow full engagement with the profession, the service and the public before a decision to move to full implementation is made. The BMA has welcomed the decision and will continue to work constructively with all concerned to ensure that revalidation is suitable for doctors and patients.



## UPCOMING EVENTS

### 'Making the most of being a salaried GP' seminars

The BMA is running a series of seminars aimed specifically at salaried GPs across the UK during 2010. The seminars aim to advise on employment rights, how to ensure that the terms of the BMA's model salaried GP contract or equivalent are obtained, as well as provide tips for successful negotiations on salary and contract changes for use with current and new employers.

For more information and to register please go to the [BMA website](#).

## Become a BMA member

Join today and ensure you have our full support when you need it.

[www.bma.org.uk/join](http://www.bma.org.uk/join)  
or call 0300 123 123 3



## London Deanery coordinated Revalidation pathfinder pilot – Have your say

The London Deanery has been selected to coordinate one of 10 pilot sites for the Revalidation Support Team to test proposals for revalidation based on a model for strengthened appraisal.

Details can be found at:

[http://www.revalidationsupport.nhs.uk/Strengthened\\_Medical\\_Appraisal.asp](http://www.revalidationsupport.nhs.uk/Strengthened_Medical_Appraisal.asp)

There are 20 participating London PCTs who are looking to recruit 23 doctors each to the pilot and who are interested in gaining sign up from a broad range of GPs, particularly locum and sessional doctors and doctors working in single-handed practices.

**This is your opportunity to shape the development of revalidation.**

If you belong to a participating PCT then please contact the relevant person below as soon as possible. The deadline is 30 July 2010, but places are generally being offered on a first come first served basis.

### Organisation

**Bexley**  
**Brent**  
**Bromley**  
**Ealing**  
**Enfield**  
**Greenwich**  
**Haringey**  
**Harrow**  
**Hounslow**  
**Kingston**  
**Lambeth**  
**Lewisham**  
**Newham**  
**Redbridge**  
**Southwark**  
**Sutton and Merton**  
**Tower Hamlets**  
**Waltham Forest**  
**Wandsworth**  
**Westminster**

### Pilot PCT contact email address

maria.broad@bexley.nhs.uk  
maxine.mcLeod@brentpct.nhs.uk  
joe.warner-johnson@bromleypct.nhs.uk  
dymphna.tansinda@nhs.net  
elaine.yeo@nhs.net  
janette.matthews@greenwichpct.nhs.uk  
alex.hawkins@haringey.nhs.uk  
madeleine.stewart@harrowpct.nhs.uk  
bevley.webster@hounslowpct.nhs.uk  
phil.moore@kpct.nhs.uk  
liz.flanders@lambethpct.nhs.uk  
cherilyn.yeates@lewishampct.nhs.uk  
petra.nittel@newhampct.nhs.uk  
ann.o'brien@redbridge.nhs.uk  
afaf.boutros@southwarkpct.nhs.uk  
Wendy.Meynell@smpct.nhs.uk  
Lisa.Browne@thpct.nhs.uk  
Kishani.Widyaratna@wf-pct.nhs.uk  
maxine.hastings@wpct.nhs.uk  
Rita.Altana@westminster-pct.nhs.uk

## Locum GP pensions

We are aware of anecdotal evidence of PCOs increasingly enforcing the rule whereby locum GPs engaged by GP practices have a "10-week window" in which to pension their income.

In order for locum GPs' pension contributions to count towards the NHS pension, locum GPs have to complete locum "A" and "B" forms. The locum "A" form is a record of each piece of work completed for a practice / PCT / LHB, and the locum "B" form is a monthly record of pay received within that month. The forms have to be returned to the PCO, along with the cheque for the pension contribution, no later than the 7th day of the month following the month that they relate to - the "B" form for pay received that month and the "A" form for any corresponding work. Additionally, in order for the work to be pensioned, pension rules state that **the forms must be returned no later than 10 weeks of the corresponding work being completed.**

In response to this, the GPC has been issuing reminders to practices to pay locum GPs as quickly as possible, thus enabling them to pension their income.

Additionally, a motion was passed at this year's LMC conference, stating that PCOs should exercise sensible discretion on the maximum timescale for locum GPs to submit their pension forms and that locum GPs should be allowed to pay contributions by direct debit or standing order, with reconciliation at the year end. The subcommittee will now consider the best way to take forward this motion.

## Contacting the Sessional GPs Subcommittee about Issues in your area

To ensure that we are addressing the issues affecting sessional GPs, we need to hear from you. The BMA should be contacted on **0300 123 123 3** if you are a BMA member and need individual employment advice but if you would like to bring an issue to the attention of the subcommittee then please email the details to [wjones@bma.org.uk](mailto:wjones@bma.org.uk).

# DEVOLVED NATIONS

## Northern Ireland

In Northern Ireland there are a number of continuing specific issues affecting sessional GPs, including a lack of partnership opportunities, professional isolation and ability to access important data such as prescribing information. There is also the need to promote and foster leadership opportunities for sessional GPs.

During the Northern Ireland LMC Conference 2010, a motion that urged NIGPC to consider the development of a subcommittee to review the specific challenges experienced by sessional GP practitioners was debated and passed as a resolution. It is anticipated that this group will function as a working group of the NIGPC acting to facilitate the formulation of solutions for the specific issues affecting sessional GPs.



## Scotland

Dr Mary Anne Burrow is the sessional GP representative on the Scottish General Practitioners Committee (SGPC). Dr Burrow is working with other committee members and the SGPC secretariat to facilitate discussion and promote greater communication amongst sessional GPs in Scotland.

SGPC continues to press the Scottish Government Health Directorates about the ongoing lack of funding available for sessional GP appraisal in Scotland. Since 2004 GP appraisal has been a requirement for inclusion on the Performers List. SGPC strongly believes that all GPs should be offered the same GP appraisal process and has consistently called for sessional GP appraisal to be fully funded. SGPC had previously advised all sessional GPs across Scotland to request that their host NHS Board arrange for them to be appraised and provide them with appropriate payment to support their participation in the process. Following a number of very helpful responses from sessional doctors highlighting the difficulties that they experienced, SGPC has now called on the Scottish Government to address this issue as a matter of priority.



## Wales

Oak Aung-Kyi is the sessional GP representative on GPC Wales. In March, the Welsh Assembly Government published a summary of 2009 GP workforce statistics which mentioned that arrangements are in progress to include locums in the data for 2010. Recent figures obtained from the Wales Deanery Appraisal database show the proportion of sessional GPs to be approximately 25% of the total number of GPs in Wales. The five LMCs in Wales are keen to improve representation of sessional GPs through direct election and co-opting sessional members. However, LMCs cannot contact Sessional GPs directly unless they have their contact details. Please contact your LMC in Wales if you would like to know more about how the LMC can represent you and the benefits for sessional GP members. You can find contact details for Welsh LMCs on the BMA Website.



## Making the most of BMA membership

### Contact the BMA for advice and support

If you are a BMA member, and require advice relating to your employment, please telephone **0300 123 123 3** or e-mail [support@bma.org.uk](mailto:support@bma.org.uk). The BMA offers individual representation and advice, including a contract checking service, advice relating to maternity/paternity, sick leave and redundancy.

