

Sessional GPs Newsletter



www.bma.org.uk

for salaried, locum and freelance GPs

August 2012

Welcome. This is the second edition of our newsletter for 2012.

This issue covers the following topics:

BMA Industrial Action update: Pensions

Money matters: Pensions and Sessional GPs

Locum GPs and taxable expenses

Make your tax investigation less taxing

Specialist guidance for sessional GPs – agency workers regulations and sessional GP groups

Sessional GP involvement with LMCs: a how to guide

LMC and ARM Conference reports

Revalidation update

Information cascades – get in touch

Updates from the Celtic nations

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 of the BMA.

If you have any suggestions for how we might improve this newsletter, or have any ideas of articles you would like to see included in future editions, please let us know by contacting us at the following email address:

sessionalgps.gpc@bma.org.uk

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What is a Sessional GP?

'Sessional GP' is an umbrella term to collectively refer to salaried, locum and freelance GPs. The BMA Sessional GPs subcommittee represents all sessional GPs in the United Kingdom, including BMA and non-BMA members.

The Sessional GPs subcommittee has 16 members, elected on a regional basis to ensure representation from across the UK. If you would like to contact your regional representative, let us know at this email address: sessionalgps.gpc@bma.org.uk



Locum Handbook



The BMA Locum Handbook has now been published online. Members can access this link by logging into the BMA website and visiting the Sessional GP section [here](#).

The locum handbook is a benefit for BMA members and provides useful advice on a range of issues to consider when working as a locum. The handbook includes specific sections on starting out as a locum GP, as well as others sections on setting up a business and agreeing contracts for services with different employers. It will also be a useful guide for practices who employ locums.

The official launch of the locum handbook will take place at the **Sessional GP Conference**, to be held at BMA House on Thursday 11 October 2012. Attendees will be the first to receive hard copies of the handbook before distribution to all BMA members. To register your interest in attending the Sessional GP conference, please email confunit@bma.org.uk

STANDING UP FOR DOCTORS

British Medical Association, BMA House, Tavistock Square, London, WC1H 9JP © British Medical Association, 2012

NHS Pension arrangements for Sessional GPs

We have heard a range of anecdotal evidence from salaried, locum and freelance GPs reporting errors to their pension funds. Reported mistakes have varied from incorrect tier allocations for salaried GPs with portfolio careers, to locum GPs whose overall employee contributions are not in correlation with the total amount deducted from their salary.



To avoid inadvertent errors, we would advise all sessional GPs:

- If you are a locum or freelance GP, your NHS GP earnings and contributions should be recorded on forms GP Locum A and B at the end of each calendar month.
- To ask the NHS Business Authority for an annual statement of the pension contributions you have paid each year.
- It is also important to keep a dynamising sheet, recording your total career earnings to date as your final pension will be based on this amount.
- To check you are on the correct tiered rate. This should be based on your total income.
- To make sure to complete an end of year certificate to calculate any necessary adjustments no later than 30th April each year.

The NHS Business Authority provides detailed pension guidance on their website. For Locum GPs, a list of frequently asked questions can be found here:

<http://www.nhsbsa.nhs.uk/2061.aspx>

If you are experiencing pension-related problems similar to those described above, please let us know. Guidance for members is available on the [Pensions section](#) of our website. Queries can also be sent to this email address: pensions@bma.org.uk

Pensions: Industrial Action update

Following the day of action on 21 June and debates at the BMA Annual Representatives Meeting in Bournemouth, the newly elected BMA Council met in Edinburgh on July 18 to decide what next steps to take in the pension dispute. The decision taken at this Council meeting was for the BMA to suspend further plans on industrial action and to pursue a strategy of working with other health unions to negotiate on the detail of proposed changes to the NHS pension scheme.

To keep up to date on current developments, visit the pensions section of our [website](#).

Make your tax investigation less taxing

There are three arrivals on the doormat we all dread – the GMC summons, the HMRC investigation notification and the mother-in-law's birthday party invitation. Luckily, it was only the second that I received in January. Even more luckily, I had taken out an insurance policy which specifically provided cover against the cost of HMRC investigations.

A tax investigation is stressful; even with the assistance of an accountant, there's a lot of work to be done to ensure that the three or four hour interview with an inspector goes smoothly. The investigators are professionals, very well prepared and very knowledgeable on how medical accounts work. You may have an insurance policy with your accountant which indemnifies you against the costs of an HMRC investigation, but I was delighted with the addition of the professional services of a tax consultant which came bundled with my policy. My dedicated consultant was phenomenally helpful and skilled in preparing me and my documents for the challenging interview, and holding my hand throughout it. Given the high chances of an investigation, especially if your sessional portfolio work gives rise to multiple income and expenditure streams, I would recommend insuring against this risk as soon as possible.

My policy was easy to invoke: a simple process of faxing the HMRC letter to my tax consultants, who took care of the rest in as un-bureaucratic a way as I could have hoped for. And the cost? An annual fee of £120. There are many policies available, but my advice would be to select one which provides the services of a consultant.

Dr Stephen Bassett is Deputy Chairman of the Sessional GP Subcommittee, a portfolio GP and practices in Wales.

Self-employed locum GPs and taxable expenses

Recent high-profile tax and legal cases have highlighted the importance of clarifying the tax and National Insurance status of business costs such as travel expenses, and whether these will be considered to be tax deductible by HM Revenue and Customs. We would recommend that locum and freelance GPs seek personalised financial advice to ensure that their particular circumstances are considered fully and that the appropriate level of tax is being paid. General guidance on good practice for locum and freelance GPs and tax arrangements can be found in our new [locum handbook](#). See page 20 for advice on taxation and accounts.

Retainer and Returner schemes

Ensuring continued funding for GP retainer and returner schemes, following the passing of the Health and Social Care Act, remains a key issue for the Sessional GPs subcommittee. Work is being carried out by the Sessional GPs Subcommittee currently with the Equality and Diversity committee of the BMA to ensure funding and maintenance of these schemes. **It is important that we gain as much information as possible about these schemes across the UK. If you are a returner or retainer trying to access these schemes and would like to share your experiences, please contact us at this address:**

sessionalgps.gpc@bma.org.uk

Information cascades



Locum GP forum



The online community for doctors, doc2doc, has recently launched a dedicated forum for GP locums. Registering online to create an account is quick and straightforward. To get involved and network with fellow locum GP colleagues, you can visit the forum [here](#).

Revalidation

The current timetable for the implementation of revalidation remains a concern, and the BMA is continuing to engage with the Department of Health and the General Medical Council to resolve outstanding issues. Suitable arrangements for non-practice based GPs such as freelance locum and Out of Hours GPs, particularly in terms of gathering supporting information, is firmly on the BMA negotiating agenda.

A new version of the Medical Appraisal Guide was recently published. This is available on the [Revalidation Support Team website](#) and highlights the extent of recommended requirements for appraisal for revalidation.

The Royal College of GPs have also recently published an update to their guide to revalidation, which you can access via their [website](#).

For further information, the new BMA website is a great resource for up-to-date information on evolving issues related to revalidation. Visit our in depth section [here](#).

Improving the flow of information to all GPs – salaried, locum or freelance – is an ongoing priority of the BMA Sessional GPs subcommittee. After consistently raising this issue at a national level, in September last year the Department of Health National Managing Director of Commissioning Development, Dame Barbara Hakin, wrote to all PCTs in England. This letter recommended that the use of the medical performers list to identify and contact sessional GPs for information sharing purposes was not a breach of the Data Protection Act.

While this is an important step forward, the Sessional GPs subcommittee remains committed to highlighting this important issue and are actively working to ensure that as Clinical Commissioning Groups develop, structures are put in place to allow effective information cascading to all salaried and locum GPs on medical performers lists.

We are interested in hearing updates of local information sharing practices across the UK. Please get in contact with us to share your experiences at this email address: sessionalgps.gpc@bma.org.uk

Revalidation – Key Terms

MAG: Medical Appraisal Guide – produced by the RST, this guidance explains the standard requirements for medical appraisals.

MSF: Multi-Source Feedback – a tool to sample attitudes and feedback from colleagues on both clinical performance and professional behaviour. This could include colleague, patient and self-assessment questionnaires.

ORSA: Organisational Readiness Self-Assessment Tool – based on Responsible Officer regulations and guidance, this tool helps assess readiness for the implementation of revalidation.

PDP: Personal Development Plan – this plan can help provide structure to your education and development needs when preparing your appraisal portfolios.

RST: Revalidation Support Team – the RST is a Department of Health funded body who support the implementation of revalidation.

Local Medical Committee email distribution lists are an important source of information. If you have not already done so, register locally with your LMC to ensure you receive local updates and information. Find out how to contact your LMC here.

Another important information resource, as mentioned in our guidance section below, are local Sessional GP groups which provide point of contact with salaried, locum and freelance colleagues in your area.

SESSIONAL GP CONFERENCE 2012 – FOR SALARIED AND LOCUM GPs

Thursday 11 October 2012 | BMA House, Tavistock Square, London, WC1H 9JP

Sessional GPs: Redefining Success

Why you should attend

Working as a sessional GP has its particular challenges, and this one day conference aims to offer expert advice practical information and guidance to support all sessional GPs in making the most of their careers.

Addressing the issues that matter to you, including pensions, appraisal and revalidation as well as making successful career choices, you will also be able to personalise the programme by selecting from a choice of breakout groups.

Topics will include:

- Appraisal and revalidation
- Working as a locum GP
- Managing your pension
- Common challenges of working as a salaried or locum GP

You will also have the chance to meet colleagues from around the country, discuss shared issues and concerns as well as develop networks and cascade information.



To register your interest in the conference and receive further information as it becomes available, please email confunit@bma.org.uk

BMA 

Specialist BMA guidance for salaried and locum GPs



The BMA regularly produces guidance on issues affecting salaried and locum GPs. On the re-branded BMA website, contractual advice relevant to you can be found [here](#).



Agency Worker Regulations

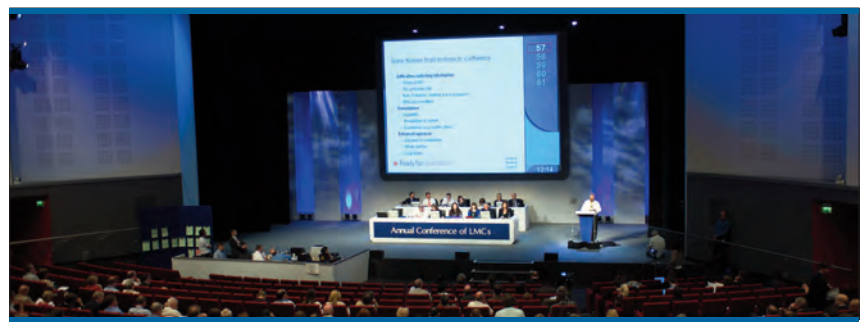
This new guidance is aimed at locum GPs who work for locum agencies. Following the enforcement of European legislation in Autumn 2011, agency workers now have enhanced employment rights. You can access the full guidance in the Locum GP section at this [link](#).

Setting up and developing Sessional GP groups

Published earlier this year, our guidance on sessional GP groups is an important resource for all sessional GPs thinking of establishing an informal local network of salaried and locum GP colleagues. Such groups are important in combating professional isolation as well as allowing you to keep abreast of information cascades in your area. To read the full guidance, visit the Sessional GP page [here](#).

Annual Conference of Local Medical Committees

22 – 23 May 2012, Liverpool



On 22 – 23 May 2012 the Annual Conference of Local Medical Committees was held at the BT Convention Centre in Liverpool. This conference is the key policy-making arena for the General Practitioners Committee and its subcommittees. At the conference, representatives from LMCs across the UK vote on a variety of policy motions on matters affecting general practice. All motions passed by the conference become resolutions that the GPC will act on over the next year.

Sessional GPs have a dedicated section on the conference agenda. This year, motions were debated on a variety of issues, including extending death in service benefits to all sessional GPs, improving career development opportunities for sessional GPs, as well as the overall status of the salaried GP model contract.

Sessional GP motions were proposed by representatives from Glasgow and Southwark LMC, highlighting the common issues affecting salaried and locum GPs across the United Kingdom. In a positive step, LMC conference voted to pass the motion calling for the extension of death in service benefits and accompanying protection to sessional GPs. This issue highlights the current inequity for locum GPs, who are only eligible for full death in service benefits while under a contract for service, despite making pension contributions at the same level as GP partners who are earning a similar salary.

All motions passed at LMC conference will be taken forward by the Sessional GPs subcommittee over the forthcoming year. If you have any questions or comments to make on this issue, please let us know by contacting us at this address: sessionalgps.gpc@bma.org.uk

Annual Representative Meeting (ARM)

Sessional GP issues were also on the agenda at the 2013 Annual Representative Meeting which was held on 25 – 28 June in Bournemouth.

At the ARM, motions were passed calling for doctors' clinical knowledge and skills, that are maintained while working abroad, to be recognised upon their return to the UK workforce. As highlighted in the retainer and returner scheme above, ensuring continued funding for GP retainer and returner schemes following the passing of the Health and Social Care Act, remains a key issue for the Sessional GPs subcommittee and is on the current subcommittee work plan.

To watch webcasts of key conference speeches and debates from the ARM, visit the BMA [website](#).

All policies passed at BMA conferences, can be searched online at the [BMA Policy database](#), accessed [here](#).

Becoming involved with your LMC

Dr Kamilla Porter and Dr Lisa Harrod-Rothwell

Just over two years ago we were part-time salaried GPs in different parts of Essex and independently of one another decided to stand as representatives of salaried and locum GPs on the North and South Essex LMC.

Neither of us knew a great deal about our LMC but having completed our GP training around the time of the introduction of the New Contract we had considerable experience of working as salaried doctors in various practices and meeting many other sessional colleagues like ourselves. Neither of us imagined that one year after being elected onto the LMC we would take up the roles of Vice-chairmen. But a doctor's training is full of steep learning curves- especially in general practice. With the nurturing and encouragement of our respective Chairmen Dr John Guy and Dr Beverley Davies as well as considerable support from the North and South Essex CEO Brian Balmer we were willing to rise to the challenge.

about their role as a great deal of kudos in the GP community is often attached to established principals. A sessional doctor may find this intimidating, feel that he or she won't be taken seriously or won't be seen as "a proper doctor" and without any encouragement or guidance may simply pass by an opportunity to get involved in local issues and medical politics.

Having never been GP partners we have learnt a great deal about the organisation of general practice, its local delivery and practice management that many sessional doctors do not get exposed to. We both have a much better understanding about our profession, and seek to stand up for sessional colleagues as well our principal

We would encourage any sessional doctor who is contemplating standing for a position on his or her LMC to take the plunge. All you need is a sense of curiosity, motivation, a willingness to commit and a desire to stand up for your colleagues and patients.

Many sessional doctors remain unaware of the work of their LMC and of important decisions that are being taken in their region. Where a partner regularly attends practice meetings and has the support of his or her practice manager and fellow partners, a locum or part-time salaried doctor has no such network. Sadly, there are still some GP principals who espouse the view that a sessional doctor's role is purely to see patients and that their opinions on other matters are unimportant.

From studying the appraisal database in Essex we have ascertained that over 400 GPs work as sessional doctors, which amounts to one third of the work force. At the recent national LMC Conference in Liverpool we learned that in some areas of London 50% of GPs are sessional. It is not just churlish to exclude such a significant and growing part of the workforce but damaging and wasteful to the profession as a whole. At this time of unprecedented change to the NHS and threat to the very survival of general practice the talents, skills, knowledge and experience of the entire workforce need to be harnessed; full-time, part-time, male or female, partner or sessional. We should **all** have the opportunity to develop professionally and to get involved in matters outside of our consulting rooms.

The barriers that prevent fellow professionals from making valuable contributions need to be recognised and ultimately removed. Sessional doctors themselves may harbour a negative mindset

colleagues who we also represent in our Vice-chair roles. After stepping down from her LMC Vice Chair role, Lisa has gone on to become more involved in commissioning and last year was appointed as Chair to the Mid Essex Clinical Commissioning Group, a role she would not have contemplated had she not taken that first step to finding out about her LMC. Alongside Kate Barusya who is Sessional GP representative on the Sessional GPs subcommittee for the Eastern Region, Kamilla helped to lead last year's Essex Sessional GP Conference which was a successful collaborative project with the North and South Essex LMC and Anglia Ruskin University. This has proved to be a catalyst for sessional GP networking and an opportunity to raise the profile of sessional GPs and promote peer support groups across the region.

Kamilla is now working on the second conference and has taken on a new role as Sessional GP lead and Clinical Advisor to EQUIP (Education and Quality in Primary Care), an educational organisation responsible for organising appraisal for all GPs in Essex, undertaking audits and supporting and providing education and training for all members of the primary care team. We had little idea about the repercussions of putting our names down on the LMC nomination papers in 2010 nor did we anticipate finding such supportive and friendly networks. It has been reassuring to share some of the trepidation and concerns we initially felt on joining the LMC and our confidence has grown as a result.

Devolved Administration Updates



SCOTLAND

There is a new newsletter especially for Sessional GPs in Scotland. You can view the latest edition [here](#).

Join the BMA

If you are not a member of the BMA you could be missing out on the support of your national and local committees, individual representation on personal employment issues and the online guidance and information available to juniors.

[Don't be left out, join today.](#)



NORTHERN IRELAND

Continued Professional Development is important to all medical professionals, including sessional GPs. With locum opportunities thin on the ground, many sessional GPs could find it difficult to fulfil criteria for their appraisal. The most exciting news to develop from Northern Ireland is the introduction of the **NI Affiliate Practice Scheme** for sessional doctors. It is a concept which allows the development of a voluntary, informal relationship between a sessional GP and a GP practice in order to maximise the opportunities for appraisal, revalidation, communication and for general information cascading. There is an extensive list of practices which will facilitate the outworkings of the scheme for sessional GPs.

NIGPC is also working closely with **Out of Hours providers** to enable newly qualified sessional GPs to join the OOH teams.

Revalidation is still looming and we are continuing to make efforts to build upon sessional GP broad based learning.

Watch out for the **Northern Ireland Sessional GP Newsletter** coming out in Autumn 2012.



WALES

Ensuring effective **information cascades** remains a priority in Wales. GPC Wales continues to work with LMCs to improve information sharing locally and across Health Board regions.

GPC Wales is committed to ensuring that reported **changes to GP hours in Wales** are agreed through negotiations which consider fully the funding and practical arrangements involved in implementing these proposals.

If you have an issue you would like to raise you can contact the GPC Wales secretariat at this email address: dmartin@bma.org.uk or via the sessionalgps.gpc@bma.org.uk