

Preparing for a new GP locum

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Most practices will, from time to time, employ locum GPs to supplement their workforce. This might be on a short-term basis – to cover for sick leave, for example – or longer-term, such as a maternity cover.

Sometimes, a locum agreement can be useful if the practice needs a doctor with a certain set of skills (for example, minor surgery or coil-fitting) to fulfil a specific need on a semi-regular basis.

However, it would be wise to consider the risks associated with long-term locums, which are often centred around tax. For instance, for tax purposes, the locum might be better off as an employee, and if the locum does not pay tax, the practice may be considered responsible.

Additionally, funding regulations are different for locums, such as CCGs' discretionary funds and NHS sickness schemes in cases where others are off sick.

The newly announced indemnity contract means practices should negotiate more up-to-date deals with locums, and remember that medical mistakes now have to go through the Government, not the locum directly.

Finding a locum

Finding a reliable locum can be challenging, and in some parts of the country extremely so. However, as more GPs look for flexibility in working that is rarely offered in traditional partnership or salaried contracts, the locum pool is growing.

Agencies

To find a locum at short notice, and if the practice has never employed locums before, then a commercial agency is often the quickest and most hassle-free way to find someone suitable. There are several national and regional providers of such services.

The price of convenience is that agency rates will usually be higher than employing the doctor directly (with a lower hourly rate going to the doctor themselves).

And, if you find a locum who works well in your practice and you're tempted to bypass the agency to use them again, agency agreements usually prohibit this.

Locum chambers

Many areas operate locum chambers or similar systems, where a looser collective of locums work together to offer some of the convenience of scale of a locum agency but without such restrictive contracts and with a greater percentage of the fee going to the doctor.

Employing a doctor directly usually makes the most financial sense for both practice and doctor, but obviously you need to do more leg-work initially.

Advertising

For longer-term locums, practices can advertise through NHS jobs or other regional or national advertising spaces, such as the CCG or LMC website, industry titles such as Pulse, or medical journals.

For short-term cover, word of mouth, asking around neighbouring practices and contacting previously used locums – or looking through any CVs that have been dropped off – are all the basic standbys.

Increasingly, locum GPs are more proactive in advertising their services and looking for work online and through social networks such as LinkedIn.

The role

It is important to be clear on what exactly you will need from your locum. Some questions to consider include:

- Will they see pre-booked or emergency/same-day patients or a mix?
- Will they see a defined list or number of patients, or walk-ins, or both?
- If your permanent GPs are willing to take extra phone calls in the middle of a surgery, would you expect a locum to work in the same way?

Many surgeries are content that a locum turns up five minutes before the surgery and leaves when they have finished their list. In some cases, you might need them to stay until closing time if they are, for example, the only doctor on site.

You may need your locum to take a share of incoming documents and investigation results, or you may prefer them to undertake their own admin and letter writing, then leave.

It may be more convenient to pay the locum for a session or list completed, or it might be better to pay an hourly rate. You will need to consider:

- If paying an hourly rate and the locum runs over time, will you be paying any extra?
- Will they do visits?
- Will you pay them mileage if they do?
- Will they see patients in 10-minute slots or 15-minute slots?
- What arrangements will you have in place for breaks?
- If you are employing a locum to offer a specific skill, such as joint injections or minor ops, who is providing the equipment?
- Are you providing a nurse/assistant?
- If they are an NHS pension member, who is taking responsibility for the pension paperwork?

These thorny issues will usually be ironed out for you by using a locum agency. If you're planning to manage without, then make sure it has all been given due consideration. The BMA offers online guidance and model contracts to use and adapt on its website.

Eligibility and diligence

Once you have found a locum who appears to meet your needs, there are additional considerations, chief among them is whether they are actually allowed to do the work.

If the GP is on a UK performers list – a pre-condition for most practices employing one – then immunisations, bloods, and occupational health and DBS checks will have been carried out at some point when they joined the list. You will need to ensure this is recent enough and decide whether you need to see any additional evidence.

All GPs undergo appraisal and revalidation as a condition of staying on the register. As a bare minimum, this should mean they are up to date with mandatory training, but as the employer, it would be prudent to see evidence of this as well. Most GPs who do regular locum work will be prepared for these requests.

Part of the role of a GP locum agency includes getting this sort of thing in order as a condition for the GP being on their books: again, you may wish to see copies of the relevant paperwork yourself.

Preparing for the locum

Once the locum is on board, you will need to prepare for their arrival, so they are ready to work.

Equipment

- Tell them what you are providing. An equipment list of what should be in their room would be helpful, but many locums bring a bag to use.
- If they use their own equipment, are you willing to let them restock consumables?
- If the locum is going to work in a room that isn't regularly used, it would be good to check that the computer works, the printer is stocked and the phone works.
- Make sure all other equipment in the room works properly, such as the blood pressure machine and thermometer.

Locum pack

- Every practice has different policies, standard operating procedures and pathways. It is a good idea to have an up-to-date copy of these and put together a reference guide for the locum.
- Consider a PDF copy to send to the locum in advance, and a paper copy to keep in the practice.
- A locum pack should include:
 - Details of any practice or regional prescribing rules
 - A who's who guide (photographs are helpful)
 - o A list of phone numbers, and special interests/skills within the practice
 - An outline of ways for the locum to direct a patient to someone for their particular needs; for example, smoking cessation advice or a shoulder injection

Information technology

Hopefully your locum will already know how to use the relevant IT and equipment. However, in some CCG areas, three or four different patient electronic records are used in neighbouring practices.

How your practice requests blood tests and x-rays might differ from their local area if they have travelled across a CCG or hospital boundary to work for you. Think about:

- If the locum needs any extra training, are you happy to provide it?
- If so, are you happy to do this in paid or unpaid time?

It is now considered best practice for everyone accessing patient information to do so with their own login and password. Someone will need to set one up if the locum is working for you for the first time and, if relevant, arrange to sync their NHS smartcard.

On the day

You should have agreed in advance who will meet the locum when they arrive, and if any extra preparation, training or induction is required, who will deliver it, where and when. Notwithstanding, they should, at the very least, know where the toilets and fire exits are located.

During the session it may be prudent – especially if they are working for you for the first time – to designate another permanent staff member as a mentor or supervisor, so the locum knows who to contact for clinical and administrative queries during the session.

After the session

You might be happy for the locum to simply pack up and leave, but it is helpful to make sure someone is available for a five-minute debrief. For example:

- Is there anything clinical or administrative they need to hand over to anybody to deal with, especially if they're not coming back?
- Is everyone agreed on who is invoicing whom and how payment will be made?

Main points

- Employing a locum needn't be an administrative nightmare.
- Using a locum agency can be costly, but it will alleviate a lot of the extra burden on the practice.
- Preparing a locum pack might involve a lot of work, but it will save time in the long run.
- Defining your needs and contract at the outset will make using a locum in the future much easier.

Checklist

Advanced preparation

| ☐ Does the practice have a standard locum contract to use? |
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| ☐ Does the practice have a locum pack? |

Before hiring a locum

| $\hfill\square$ Define the dates and times the locum is required |
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| ☐ Define the duties required |
| □ Visits |
| ☐ Phone calls |
| ☐ Test results |
| □ Number of patients |
| \Box File a request with the locum agency (if applicable) |
| ☐ Advertise through formal/informal networks |
| \square Meet (or call) the locum to agree terms/duties/times/dates in advance |
| \Box Pre-employment checks (performers list, GMC, indemnity, etc) |
| ☐ Additional checks (immunisations, DBS, etc) |
| ☐ Prepare a room for the locum |
| \Box Check the room (printer, computer, equipment, etc) |
| ☐ Arrange computer logins for the locum |
| \square Make sure the locum's appointment availability is on the computer system |
| \square Send out, or make available, a copy of the locum pack |
| On the day |
| \Box Determine who is meeting the locum (when and where) |
| ☐ Is any training/induction required today? |
| ☐ Who is their contact at the surgery during their session? |
| ☐ Start session – see some patients |
| After the session |
| □ Debrief |
| ☐ Anything to hand over (clinical or non-clinical)? |
| ☐ Has payment/invoicing process been agreed? |
| ☐ Pension paperwork |
| □ Process payment(s) |

Looking to fill a vacancy at your practice? Contact the Pulse Practice Jobs team on 020 7214 0570 or email pulsepracticejobs@cogora.com

Guide URL:

http://preview.pulse-intelligence.co.uk/staffing/a-basic-guide-to-preparing-for-a-new-locum/





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