Thursday 29 June 2017: Motions arising from the ARM – 11.40-12.55pm

Order of Business

CHosen MOTIONS

37e  Motion by NORTH WEST REGIONAL COUNCIL: That this meeting calls for social care to be available free at the time of need, financed out of general taxation and provided as part of the comprehensive health service.

362  Motion by NORTH WEST REGIONAL COUNCIL: That this meeting opposes charges for patients:-
       i) to see a GP;
       ii) if an appointment is missed.

364  Motion by EAST MIDLANDS REGIONAL COUNCIL: That this meeting notes that the single shareholder of NHS Property Services (NHSPS) is the Secretary of State for Health in England and that NHSPS and agencies acting in its name are:-
       i) seriously threatening the financial viability of many NHS GP practices;
       ii) causing massive psychological distress and managerial work for GP partners diverting them away from caring for the sick;
       iii) behaving very badly as landlords in a manner unbecoming of either a publicly quoted company, or as one of Her Majesty’s Secretaries of State.

422  Motion by MANCHESTER & SALFORD DIVISION: That this meeting recognises the evidence that the policy approach of full decriminalisation of sex-work, as adopted by New Zealand, has resulted in public health benefits for both sex workers and wider society. This meeting therefore calls upon the BMA to:
       i) publicly announce support for this policy approach and to lobby the government towards this end;
       ii) develop educational resources to enable doctors and medical students to better understand and respond to the specific healthcare needs of sex workers, such as CPD events and BMJ Learning resources;
       iii) write an open letter calling upon the TUC Women's committee to also support the policy of full decriminalisation;
       iv) create a working-group in order to achieve the above aims and consider collaboration with peer-led sex worker organisations such as SCOT-Pep, the English Collective of Prostitutes and the Sex Worker Open University, as well as other organisations working on this issue such as Amnesty International.

542  Motion by SOUTH WEST REGIONAL COUNCIL: That this meeting notes that retired members are the only branch of practice not represented by a standing committee and:-
       i) believes they need and should have a standing committee;
       ii) calls on the organisation committee to bring forward proposals to set up a standing committee for retired members.
EMERGENCY MOTIONS

Emergency Motion 1

Proposed: Stephen Watkins (north west regional council)
Seconded: Amanda Owen (Tower Hamlets division)

This ARM recognising that the entirely properly and adequately worded motion 18A was rewritten by agenda committee as a motion which could only be carried as a reference therefore:
  i) adopts motion 18A;
  ii) directs agenda committee to conduct a root causes analysis of its error.

Emergency Motion 2

Proposed: Dr JS Bamrah (north west regional council)
Seconded: Dr Kailash Chand (north west regional council)

That this meeting expresses its heartfelt condolences to the families and friends affected by the recent events in Manchester and London. We would also like to applaud the swift and compassionate actions of the public, NHS and other emergency services in the face of these catastrophic events.

Emergency Motion 3

Proposed: Jackie Applebee (conference of LMCs)
Seconded: David Wrigley (council)

That this meeting opposes the recently revealed “capped expenditure process” which instructs certain NHS providers to make ‘difficult choices’ in order to achieve financial balance and:-
  i) demands that these proposals are withdrawn;
  ii) instructs the BMA to campaign against these proposals.

Emergency Motion 4

Proposed: Jackie Applebee (conference of LMCs)
Seconded: Allyson Pollock (council)

That this meeting notes that facilities services at Barts Health have recently been outsourced to Serco and that Serco immediately sought to undermine terms and conditions of the transferred employees by cutting staff and increasing the workload of those that remain and:-
  i) supports the staff in their action to retain their previous terms and conditions;
  ii) regrets that Serco and Barts Health have allowed the situation to deteriorate so that 98% of those balloted feel forced to take industrial action as a last resort.

Emergency Motion 5

Proposed: Iain Kennedy (conference of public health)
Seconded: Sara Hedderwick (consultants conference)

That this meeting welcomes the introduction of electronic nominations and voting as a means of improving the BMA’s democratic mandate and congratulates the association for the provision of voting boths in the ARM exhibition.
However this meeting believes further development on the design and implementation of system, particularly in regard to use on portable devices, is needed prior to rollout of the system to other elections.

**Emergency Motion 6**

**Proposed**: Dr Peter Bennie (Scottish council)
**Seconded**: Dr Nikki Thompson (Scottish council)

That this meeting notes the role of doctors in the assessment process for exceptions to the general rule that child tax credits, and universal credits, are to be limited to the first two children – known as the "rape clause" because mothers seeking benefits for a third child must demonstrate that they have been sexually assaulted or that the child was conceived during an abusive relationship - and:-

i) views the restriction of benefits to families with more than two children as an abhorrent attack on low income families and children;

ii) views the "rape clause" as a shameful process, which would force people to relive a terrible ordeal in order to be eligible to be paid child support;

iii) recognises that the role that doctors are expected to play in the implementation of this policy presents them with both ethical and professional challenges; and

iv) believes that many doctors will choose not to participate in this process, and fully supports them in that decision.

**Emergency Motion 7**

**Proposed**: Dr Nikki Thompson (Scottish council)
**Seconded**: Dr Peter Bennie (Scottish council)

After the appalling tragedy of the fire at Grenfell Tower, we call upon the Ministers responsible for each of the four nations to:

a) ensure that all external cladding fitted to NHS premises meets the requirements of European fire certification EN 13501-1, class A2; that the cladding has been fitted according to specification, with barriers at floor and wall plates; and that the barriers have not been degraded by later work;

b) ensure that automatic sprinkler systems are present in all hospital areas where patient care is provided; and

c) arrange for urgent inspection of NHS premises to ensure that the above requirements have been met; and institute immediate remedial work for any premises where they are not met.