Committees play an important role at the BMA. They represent members’ views across branches of practice, specialisms, and professional activities and provide expert views and opinions to shape our strategies and policies.

2018-19
The BMA can only function with the contributions of those members who seek election as representatives. Thank you for making the commitment to help represent your colleagues. In order that elected BMA representatives can work together effectively the following principles are important.

- When you are speaking to or communicating in the broadcast, print or social media as an elected BMA representative, or are identified as such, you should honestly represent the views of the BMA.
- When speaking in a personal capacity you should explicitly ask not to be identified as an elected BMA representative.
- Committee officers should coordinate media engagements with the press office.
- You should declare conflicts of interest to your committee chair/committee secretary as appropriate.
- You should uphold the confidentiality of your committee when requested. If in doubt, ask the chair of committee.
- You should uphold the confidentiality of your committee at all times. As a member of the medical profession and as an elected representative, you should behave in a professional manner at all times. You should always treat patients, colleagues and staff with respect. If you have a concern, raise it straight away with the chair of committee or with the committee secretary.

In standing for any election you agree to uphold these principles.
Junior doctors committee

About the committee
Remit, subcommittees and where it sits in the BMA structure:

The JDC (junior doctors committee) represents all junior doctors across the UK, whether they are BMA members or not. JDC members, led by the committee officers and executive subcommittee, work throughout the year on the issues most relevant to junior doctors’ working lives.

Remit of the committee
JDC’s remit is set out by its official terms of reference – the formal statement of its purpose within the BMA – which is located in the BMA’s articles and bylaws. The committee is empowered to:

‘Consider and act in matters affecting those engaged in hospital practice in the training grades, including matters arising under the National Health Service Act or any Act amending or consolidating the same and to watch the interests of hospital medical staff in the training grades in relation to those Acts.’

Terms of reference
To consider and act in matters affecting those engaged in hospital practice in the training grades, including matters arising under the National Health Service Act or any Act amending or consolidating the same and to watch the interests of hospital medical staff in the training grades in relation to those Acts.

The body entitled to appoint one or more representatives to the committee shall be entitled to appoint an additional representative to be a member of the committee during any period for which a representative appointed by such body shall hold office as Chairman of the committee.

Constitution
The committee shall have power to co-opt up to three members.
**Members ex officio**
The Chairman of the Junior Doctors Conference, when not already a member of the committee in another capacity. The Chairmen of the Scottish Junior Doctors Committee, the Welsh Junior Doctors Committee, and of the Northern Ireland Junior Doctors Committee; Chairman of the Junior Members Forum, where he/she is predominantly employed in one of the training grades in the hospital service; and elected members of Council representing doctors in the training grades, if not otherwise elected; Chairman of the Flexible Training Forum if he/she has not otherwise been elected (without voting rights).

**The committee comprises the following members:**

**Voting seats**
- Chair of the Scottish JDC
- Chair of the Welsh JDC
- Chair of the Northern Ireland JDC
- 13 Chairs of the English Regional JDCs (RJDCs)
- 37 national and regional JDC representatives
- 8 junior doctors elected by the Representative Body
- Members of BMA Council who, at the time of the first JDC meeting of the session, are junior doctors
- 2 doctors in training appointed by the GP trainees subcommittee of the general practitioners committee
- 1 doctor in training appointed by the public health medicine registrars subcommittee
- 2 medical students appointed by the medical students committee
- 1 dentist in training appointed by the Council of the British Dental Association (BDA)
- 1 doctor in training appointed by the armed forces committee
- 1 doctor in Less Than Full-Time Training elected by the junior doctors conference
Your committee – Junior doctors

Non-voting seats
- Chair of the junior doctors conference
- Chair of the junior members forum (where he/she is a junior doctor)
- Chief Officers of the BMA:
  - President
  - Chairman of Council
  - Treasurer
  - Chairman of the Representative Body
- Immediate past Chair of JDC if not elected via another route
- 1 appointed by the consultants committee
- 1 appointed by the general practitioners committee
- 1 appointed by the medical academic staff committee
- 1 appointed by the staff, associate specialists and specialty doctor committee

The constituency of the JDC chair is also entitled to send an additional junior doctor member to serve on JDC in their place, holding this position for as long as the chair remains in post.

Your role as a committee member

There are a number of roles on committees with varying responsibilities depending on the position and the work of the committee. To find out more, please see our standard committee role profiles: www.bma.org.uk/collective-voice/committees/joining-a-committee/role-profiles-for-bma-committees

Voting rights
JDC members who hold a voting seat have full voting rights. Deputy members have the same rights as the member for whom they are deputising. The chair does not vote, but is entitled to give a ‘casting’ vote where required. Non-voting and ex-officio members, co-optees, observers and visitors do not have voting rights.
**Code of conduct**

Members are required to familiarise themselves with the BMA’s constitution as set out in the memorandum and articles of association and bye-laws of the Association. The code of conduct provides guidance on expected behaviour and sets out the standards of conduct that support BMA’s values in the work it does.

**Our values**

Values are at the heart of an organisation and help to distinguish it from others. They guide an organisation’s conduct, and its relationship with its stakeholders and the outside world. They guide us in our thinking and our actions, and enable us to set standards of behaviour against which we can assess ourselves. The BMA values underpin policies, objectives, procedures and strategies and provide an anchor and reference point for all things that happen, and express how we look, speak and act.

**Our behaviours**

We have taken the BMA’s values — expert, leading, challenging, committed and reliable — and with your help, turned them into behaviours to provide clarity on what we expect from each other as we go about our work and provide a consistent approach for discussing behaviour. They describe what we expect of each other, and what we don’t, as well as what is considered above and beyond. Our behaviours form part of our culture change to become a better BMA. Our aim is to adopt them in all we do.

It is our responsibility as BMA members to role model and promote positive behaviours and to challenge poor behaviours.

Behaviour principles are:

- Be professional
- Respect others
- Be representative
- Be kind
- Be accountable
Members must act within the memorandum and articles of the Association and bye-laws of the BMA and to promote the success of the Association for the benefit of its members, and exercise reasonable care, skill and diligence in all their duties.

**Attendance** — Members should be able to allocate sufficient time to the Association to enable them to discharge their responsibilities effectively. Member role profiles provide further detail.

**Personal conduct** — Members are expected to maintain a high standard of personal conduct and to treat staff and other members with respect. In particular, members are required to promote and role model the behaviour principles outlined in this code of conduct. Doctors should display the same duty of care towards one another as they would towards patients and in the workplace.

**Election behaviour** — The BMA can only function with the contributions of those members who seek election as representatives. In order that elected representatives work together effectively, on standing for election, members agree to uphold the principles outlined in this code of conduct. Candidates will abide by electoral bylaws and respect other candidates. Members will not put undue pressure on other members, or staff to favour a particular candidate.

**Members are recommended to read the complete BMA code of conduct.**
GDPR

The GDPR (General Data Protection Regulation) came into force from 25 May 2018. It introduced wide-ranging and significant changes to UK data protection legislation.

The BMA will be open and transparent when processing and using personal information by following 6 principles as set out in the new GDPR/ DPA act:

**Principle 1**: Personal data shall be obtained and processed fairly, lawfully and transparent.

**Principle 2**: Personal data shall be obtained only for the specified and lawful purposes and shall be processed for limited purposes.

**Principle 3**: Personal data shall be adequate, relevant and not excessive in relation to the purpose for which it is obtained.

**Principle 4**: Personal data shall be accurate and kept up to date.

**Principle 5**: Personal data shall not be kept for longer than necessary.

**Principle 6**: Handled in a way that ensures appropriate security, including protection against unlawful or unauthorised processing, access, loss, destruction or damage.

The GDPR will increase the penalties for transgressions from a maximum of £500k under the previous law to up to £17m or 4 per cent of turnover, whichever is higher. It strengthens existing requirements, and places greater emphasis on demonstrating compliance, as well as introducing a number of new concepts.

Due to the complex nature of the new regime for data protection laws, the BMA cannot offer comprehensive legal advice on GDPR, but rather it help you navigate the legislation and point you in the right direction for guidance on the questions you may have. For further information please visit the BMA website on the following links:

[www.youtube.com/watch?v=uE3aLeBEAxI](www.youtube.com/watch?v=uE3aLeBEAxI)

[www.bma.org.uk/collective-voice/committees/committee-policies/committees-technology-tcs](www.bma.org.uk/collective-voice/committees/committee-policies/committees-technology-tcs)

Key committee dates

How the committee meets, dates of meetings, conferences and apologies for absence

JDC meets on four formal occasions each year although members may also contribute to steering groups or working parties established by the secretariat to deal with specific areas of work and projects.

The meetings of the committee for the session will be held on:
- Friday 21 September 2018 – Grassroots Induction
- Saturday 22 September 2018
- Tuesday 11 December 2018
- Thursday 7 March 2019
- Tuesday 4 June 2019

JDC Exec dates;
- Saturday 20 and Sunday 21 October 2018 (Strategy weekend)
- Tuesday 20 November 2018
- Tuesday 22 January 2019
- Thursday 18 April 2019
- Wednesday 22 August 2019

All meetings are held at BMA House and will usually commence at 10.15am, with an approximate finishing time of 4.30pm.

Apologies for absence
It is very important that you advise the secretariat in advance if you are unable to attend a meeting.

See below for contact details. In line with council byelaws, if any elected or appointed member of JDC is absent from three successive committee meetings, that member shall (except in cases of illness or for some reason approved by the chair of the committee) be deemed to have resigned their membership, and a casual vacancy will arise.
Key priorities for the committee for the 2017-18 session

2018 Review – JDC is currently undertaking the 2018 Review as equal partners with NHS Employers. We are hopeful that the outcomes of the review will address the outstanding key concerns that junior doctors have raised about the contract. The outcome of these negotiations will be put to a referendum of eligible members to decide on whether to accept the new contract.

Foundation Programme Review – Health Education England (HEE) began a review of the UK-wide Foundation Programme in July 2018, leading the work on behalf of the four nations. Given the importance of the Foundation Programme for newly qualified doctors in terms of experience, training and future careers, this review is a vital piece of work for the BMA. The JDC is well represented across the review, with seats on each working group to discuss specific issues.

JDC is leading this work on behalf of the association, and is working very closely with the medical students committee (MSC), JDC devolved nation committees and other branches of practice to share information and ensure that views from across the profession are represented.

Exception reporting – The introduction of exception reporting within the 2016 contract, was a significant benefit for junior doctors. However, it is currently not being used to its full potential, although there are numerous examples where it has delivered for junior doctors. This unfulfilled potential is attributable to a variety of causes, but they can broadly be categorised as; culture, processes and resources, and Guardian support. We have engaged with an NHS Improvement-led exception reporting working group with multiple national health bodies to address these issues and make exception reporting more effective and widely used. We will continue to progress this work throughout this session.
Gender pay gap in medicine – There has been increasing evidence of a sizeable gender pay gap in the medical profession. Its role in the 2016 junior doctors’ contract dispute was a big driver for a new independent review of the gender pay gap in medicine, announced by the department of health and social care (DHSC) in 2016. The review, chaired by Royal College of Physicians (RCP) president, Prof Jane Dacre, launched in May 2018. Its scope includes flexible/ less than full time (LTFT) working, unequal caring responsibilities and the underrepresentation of women in senior posts. The BMA and particularly JDC have a major role in the review: the JDC deputy chair with responsibility for professional issues sits on the steering group, along with chair of representative body, Anthea Mowat, and deputy chair of Consultants Committee, Helen Fidler. The BMA has also established a cross-branch of practice group to feed different perspectives into the review. This includes representatives from the LTFT forum, GP Trainees, Joint academic trainees subcommittee (JATS), Public health medicine registrars subcommittee (PHMRS), and Women in academic medicine (WAM).

The research team appointed to gather qualitative and quantitative evidence, are currently interviewing doctors, including trainees, to understand the ongoing barriers to pay and careers. The review’s report and recommendations, which are expected to lead to policy reforms and influence the junior doctors contract review, will be published early in 2019.
Helping you participate

Role of committee services
Committee services are responsible for providing support to all the committees and conferences which are covered by the policy directorate.

Committee secretaries work directly with the committee and their chairs, providing high level support, maintaining an overview of all the committee’s work and taking forward policy work not covered elsewhere. The committee support team undertake all associated committee administration from carrying out research and policy matters to preparing agendas and action notes. The team also respond to members enquiries, support diary management, travel and rooms bookings and coordinating and monitoring committee listservers.

LMC liaison responsibility also falls within the team and is led by a senior policy adviser.

Key contacts
The JDC secretariat provides support for the committee. Please get in touch with members of the secretariat if you have any questions or queries.

Karly Jose
Head of committee secretariat
T: 0207 383 6518
E: kjose@bma.org.uk

Nikolas Baksi
Policy advice and support officer
T: 0207 874 0741
E: nbaksi@bma.org.uk

Angela Kyle
Head of committee services
T: 020 7383 6842
E: akyle@bma.org

Melissa Isaac
Coordination and support officer
T: 020 7874 7375
E: misaac@bma.org.uk
Daniel Carry  
Senior policy advisor  
T: 0207 874 7377  
E: dcarry@bma.org.uk

Stuart Abrahams  
Senior policy advisor  
T: 0207 383 6687  
E: sabrahams@bma.org.uk

Committee support team  
T: 020 7383 6027  
E: info.jdc@bma.org.uk

**Going paperless**
We recognise that we have a responsibility to promote and adopt organisational policies that support sustainable practices and improve health. We would be grateful for your support in supporting these environmentally friendly practices. All meeting papers will now be available electronically. Hard copies will be available (and posted out) on request.

**Video conferencing facilities**
For some meetings you may find it easier to join via video conference from your home or workplace. Video-conferencing and webcam facilities are also available at BMA house, regional centres, and in the Scotland, Wales and Northern Ireland offices. For more details about how to connect, see the In your area section in your pack. If you would like to video conference into a meeting, please talk to your committee secretariat or staff contact.
Childcare
We have a family-friendly fund to help all our members participate fully in current expenses-qualifying activities. We can provide care facilities for children under 14 years and adults and children requiring care. If you require care for a dependent you must request this four weeks before the event or meeting. For more information or for an application form contact committeesupport@bma.org.uk


Prayer room
A prayer room is available at BMA House and the national offices. If you would like access to the prayer room please ask your committee secretariat or staff contact who can provide you with further details.

Catering
Please let us know your dietary requirements and what we can do to make our meeting fully accessible to you. You can email committeesupport@bma.org.uk

How to claim expenses and honoraria

Expenses
You are eligible to claim expenses incurred when attending committee meetings. This includes costs of travel, subsistence and accommodation. Payments are made directly into your bank or building society accounts.

We have a web-based expenses system called Concur, which members use to claim all committee expenditure from. The website can be used on all current web browsers and is also available on most smart phones and tablet devices.

We do not provide mobile telephones or land lines, but if you incur significant call costs on BMA business, you can submit a copy of your itemised phone bill highlighting the costs incurred on our behalf of and we will reimburse you.

Please contact committeesupport@bma.org.uk to get approval for expenses for other committee related activities, such as attendance at conferences or stakeholder meetings. You can find more information about how to claim expenses on our website.
Concur quick reference guide
bma.org.uk/about-the-bma/how-we-work/concur-training-committee

Reimbursement of locum costs
We will reimburse locum costs on production of receipted invoices, in line with the maximum level which is set annually by the finance committee (currently £550 per day), and where the expense would otherwise be payable by you. Locum reimbursement is available from the first meeting. If you have to pay above the level set for the year by the finance committee, you can make a claim to the remuneration committee at the end of each session showing evidence of your loss by means of receipted invoices from your locums. You’ll also need to give details of the work undertaken for us during the period of the claim.

Honoraria
Our members are entitled to claim honoraria for attendance at committee meetings or on business on behalf of the committee (including participation by video or telephone conference).

An honorarium is only payable to members who have completed twelve meeting days without payment and will not be eligible to claim an honorarium until their thirteenth attendance. This restriction underlines the fact that members are not employed by us. The rate of the honorarium will continue to be set annually by the finance committee (currently £250 per day).

You should ensure that you indicate on the meeting attendance form that you wish to claim an honorarium for that meeting. Payments will be made directly into your bank or building society accounts. You can find more information about how to claim honoraria on our website.
Key links and other useful information

Committee webpages

www.bma.org.uk/jdc


www.bma.org.uk/advice/career/applying-for-training/applying-for-a-specialty-training-post

Publications

The junior doctors’ handbook is your guide to the main contractual issues which may crop up in your work as a junior doctor.

It aims to help you understand your terms and conditions of service and point you in the right direction for further support when needed.

Currently there are two handbooks available:

— 2015 handbook is for junior doctors working under the 2002 terms and conditions
— 2016 handbook is for junior doctors working under the new 2016 terms and conditions (currently still in dispute)

See more information and download the handbook relevant to you.
Further guidance is available to help you understand key parts of the terms and conditions of service:

- **Exception reporting** – key guidance
- **Work scheduling**
- **Rota checking and rota rules under the 2016 TCS**
- **Frequently Asked Questions (FAQs)** on pay, transition, and general issues related to the 2016 contract

The committee regularly produces new guidance on key issues for junior doctors, which is accessible through the BMA webpage. Please check the website for other updates regularly.

If there are any publications produced by the committee that are not available through the website and you would like a copy of, please contact a member of the secretariat.

**Listserver address**

juniors-l@listserv.bma.org.uk

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**Key policies**

**Dignity at work policy**

We try to ensure that all members of staff have a safe, healthy and fair working environment. We do not tolerate bullying or harassment of any kind. Bullying may be characterised as offensive, intimidating, malicious or insulting behaviour, an abuse or misuse of power through means intended to undermine, humiliate, unfairly criticise or injure the recipient. Harassment includes unwanted conduct related to a protected characteristic, conduct of a sexual nature, or less favourable treatment for rejecting or submitting to unwanted conduct. You can read further details online, including what to do if a complaint is made against you and contact details for confidential support.

**Defamation statement**

The BMA requires all its committees to be issued with a statement on defamation at the first meeting of each political session and similar statements are provided to members of its Annual representative meeting each year.
An individual making a public statement on behalf of the BMA and its committees needs to be aware of the potential pitfalls of the law of defamation. In general, a defamatory statement is one which

‘tends to lower an individual’s reputation in the eyes of right thinking members of society, or which would cause him to be shunned or bring him into hatred, ridicule or contempt, or which tends to discredit him in his profession or trade.’

There are two forms of defamation — libel and slander. Libel is the publication in permanent form of a defamatory statement. Slander is its publication in transitory form. So, to give examples, typically slander is spoken unrecorded word, whereas libel includes the written form such as hard copy or electronic communications, but also spoken words that are recorded, for instance in video form, or even in a voice recording such as potentially on a voicemail. An individual can bring proceedings for libel in the absence of any proof of loss. Proceedings for slander, however, can only generally be brought if loss can be shown although there are limited exceptions such as the slander of an individual in his profession.

There are a number of defences to a claim of defamation these include:

a. truth – being able to show that what was said is true or substantially true;
b. honest opinion – a statement of genuinely-held opinion on a stated factual basis;
c. public interest defence – a defendant can avoid liability if the truth of a statement cannot be proved but if it can be established that publication was responsible and in the public interest;
d. qualified privilege – a partial defence where the defendant can prove that the publication was in the public interest (there are two forms of qualified privilege – statutory and common law); and
e. absolute privilege – a complete defence applying to statements made in certain situations e.g. in Parliament, between solicitor and client, statements to the police in a criminal investigation.

An action for defamation can only be brought in the High Court. Legal aid is not available and proceedings are notoriously expensive.
Where it is necessary to mention individuals or organisations, great care should be taken to ensure that no gratuitous or unsustainable comment is made, this being so whether the discussion is on or off the record. Great care must also be taken to ensure that where an issue regarding an individual or organisation is the subject of rumour, it is not given weight or authority by being publicised by the BMA to the detriment of that individual or organisation's reputation. Similarly unsubstantiated comment should not be made about individuals and organisations.

**Internet postings**

There is a common misconception that because of the informal and accessible nature of the Internet, different rules apply. The position is, quite simply, that the author of material posted over the Internet is every bit as liable in defamation as the author of off-line material.

Publication of defamatory material takes place once it has been posted on the Internet. It is not necessary for an aggrieved person to prove that anyone has actually read the material. There is the added danger that the material can be accessed anywhere in the world enabling anybody who is aggrieved to sue in that country as well as here.

Website hosts may also be liable, along with the author, for publishing defamatory material if they have been made aware of its presence on a website and have failed to remove it within a reasonable period of time. People who hide behind anonymous postings will find that the website hosts can be required to disclose the identity of the author. If in doubt the BMA’s Legal Department or other professional lawyers should be contacted for advice.

**Electronic communications**

Under the current Data Protection Act 1998 (DPA), which has been replaced by the General Data Protection Regulation (GDPR) and the UK Data Protection Act 2018 (DPA 2018), data subjects are entitled to request the disclosure of information held on them by the BMA. The DPA, GDPR and DPA 2018 extends not only to electronic files (including external and internal email correspondence and including activity tracking) but to manual files as well. Subject to exemptions, the BMA is legally obliged to provide the information requested. To avoid the risk of a claim for defamation, it is extremely important that all recorded information relating to individuals is accurately and properly expressed. Anything which could be regarded as offensive, insulting and defamatory must be avoided unless approved by the BMA’s Legal Department or other professional lawyers.
The best practical advice is that any reference to an individual or an organisation should be made in measured terms after a careful appraisal of the evidence available with legal advice being sought where appropriate. If this advice is followed there should be no difficulties with respect to defamation.

Conflict of interest

What is a conflict of interest?
A conflict of interest can be defined as a ‘set of circumstances that creates a risk that an individual’s ability to apply objective judgement or act in one role is, or could be, impaired or influenced by a secondary interest.’ (National Audit Office “Conflicts of interest”, 27 January 2015).

Conflicts of interests occur where a person acting in a representative capacity (in this case, elected and appointed members, BMA directors and representatives) could be unfairly influenced by financial or other commitments into failing to represent his or her constituency adequately, or adequately discharge their responsibilities in their appointed position.

It is appropriate, therefore, that there is openness and transparency about other commitments that Members may hold. By ensuring that any potential conflicts of interest are disclosed and known to others, they are less likely to influence debates/votes in meetings etc.
The information provided by Members will be processed in accordance with data protection principles as set out in the Data Protection Act 1998. Data will be processed only for the purposes set out in this policy and not for any other purpose.

**What type of information should I declare?**
All Members must complete and return to the committee secretary a ‘Declaration of Interest’ form as soon as possible. Members will be responsible for notifying any changes in their registrable interests within fourteen (14) days of the change occurring to ensure that the register is kept updated.

Some guidance on the type of information which Members should consider declaring as potential conflicts of interest is set out below. It is important to note that this list is not exhaustive and it is impossible to list every potential situation or circumstance that could give rise to a conflict of interests. Members should therefore use their judgment to decide whether any of their interests should be disclosed.

**Directorships and committee appointments:** Both paid and unpaid directorships (including non-executive directors or senior employees) of any public or private company or other body, together with any roles or positions with other committees.

**Alternative trade union membership external to the BMA:** any membership of another trade union must be disclosed.

**Other remunerated work:** Any paid employment or other sources of income outside their normal medical work. Examples might be paid consultancy or advisory positions with government departments, pharmaceutical companies or the medical press, articles sold to the paramedical press, or remunerated speaking engagements. Also included should be work for companies active in other healthcare fields, NHS Trusts, health authorities, any NHS commissioning body or health boards and endorsements or appointments which could be used by other organisations for marketing purposes.
Gifts, benefits and hospitality: This includes any substantial gift or material advantage received by a member which in any way relates to his/her membership of BMA committees. This would include trips or visits arising out of membership, where the cost has not been wholly borne by the member or the BMA. Gifts of less than £500 in value and other benefits of less than £500 in value would be exempt, as would events to which all members are invited.

Shareholdings or other positions: Declaration of the name of any public or private company (including any not-for-profit), business, partnership or consultancy active in the field of healthcare or certain other sectors where a conflict of interest might arise (e.g., retail financial services, STM (scientific, technical and medical) publishing) in which the member holds significant shareholdings, interests or control. Significant in the context of shareholdings is defined as either (a) greater than 1 per cent of the issued share capital of the company or body, or (b) less than 1 per cent of the issued share capital but more than £25,000.

Indirect social/business relationships and family interests: These would include any close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest (and any other interests) of close family members/friends/business partners that might be considered relevant to an individual’s position as a member of any BMA committee.

Appointments which could lead to a commercial conflict of interests.

Potential conflicts arising from the possession of confidential information.
Miscellaneous and unremunerated interests: This includes other interests which do not fall clearly within any of the above categories, for example, an active role within a political party, membership of societies such as the Freemasons or of other organisations. Membership of, or work for, other bodies such as charities or trusts which could possibly influence a member’s position with regard to his/her BMA associated activities should also be included, as well as membership of UK Governments or Department of Health committees/working groups (or their equivalents in Scotland, Wales or Northern Ireland) on which the member is not a designated BMA representative.

Members are recommended to read the complete BMA conflicts of interest policy.

BMA listserver guidance and terms and conditions of use

Each BMA committee has a listserver, an email function that distributes an email to each contact registered with it. Examples of what is appropriate to use the listserver for include circulating documents or drafts for comments, while inappropriate use would include complaints about services to members or the actions of BMA departments. In cases where the listserver is judged to have been used inappropriately the committee chair has the right to remove access to the listserver.

BMA committee expenses and honoraria business rules

You can claim back expenses you may incur in order to attend BMA committee meetings. You are entitled to claim up to £35 for dinner expenses and up to £205 for accommodation, per night. You can also reclaim locum costs at a limit of £550 per day.

Honoraria payments are payments made by the BMA to members for their voluntary services. You qualify for honoraria payments for each BMA meeting you attend once you have attended 12 meetings in a session. Payments are £250 per day, and you can claim by making sure that you sign and tick the relevant
column on the committee attendance sheet from your thirteenth meeting onwards.

**Preferential hotel rates**
We have negotiated special discounts at hotels near regional headquarters in London, Scotland and Northern Ireland for use by BMA members, BMA and BMJ staff. You can see the list of hotels available for each region and details on how to book on the BMA website.

**Anti-corruption and anti-bribery policy**
We take a zero-tolerance approach to bribery and corruption, and do not make or accept facilitation payments, also known as 'kickbacks', of any kind in return for a business advantage. Corruption is dishonest and fraudulent conduct, which often involves bribery. Bribery is the inducement or reward offered, promised or provided in order to gain any commercial, contractual, regulatory or personal advantage.

**Time off for trade union duties and activities**
Employees who are representatives of a recognised trade union have the legal right to be permitted a reasonable amount of paid time off work to enable them to carry out trade union duties. The code of practice for trade union duties is different in Northern Ireland than the rest of the UK. Further details, including a list of key documents that you may need to secure paid time off work, are available online.

**Whistleblowing guidance**
Whistleblowing is a term applied to a situation where an employee, former employee or member of an organisation raises concerns to people who have the power and presumed willingness to take corrective action. You are protected in law from harassment and bullying when you raise a concern, and we can support you in addition to local support structures. A more detailed guide to whistleblowing, including case studies, is available online.
Equal opportunities policy
We are committed to equality in the provision of services to our members and stakeholders. This ensures that all members, those applying for membership, and other service users will receive the highest possible standards of service from us, irrespective of race, ethnicity, gender, sexual orientation, marital status, civil partnership status, age, disability, chronic illness, religion or belief. You can read further details on our equal opportunities policy online.

Co-chair guidelines
Co-chairing of committees can be an effective way of sharing a heavy workload and harnessing the strengths and expertise of two people. In the event of a co-chairship both chairs should only attend committee meetings and negotiation meetings of the committee they are chairing. Attendance at other committees, external meetings and conferences, both internal and external, should be shared unless they sufficiently important to merit both chairs. You can read more detailed guidance on co-chairship online.

Care guidelines for BMA members
We can provide care for under 5s, 5-14 year olds, and dependants (adults and 14-18 year olds requiring care) through the BMA family friendly fund. With a minimum of four weeks’ notice care can be provided for approved BMA meetings, either at BMA House, or elsewhere to minimise disruption. In order to apply for care you must complete a copy of the care requirements form, which will be available from committee staff or the BMA conference unit.

Baby friendly policy
Breastfeeding is supported at BMA House and other BMA offices, including in the public areas of BMA House and during meetings. There are also private areas available that include appropriate facilities that you are able to request. Additional breaks are also available during meetings if you are breastfeeding.