

Your committee

Private practice committee

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.
- As a member of the medical profession and as an elected representative, you should behave in a professional manner at all times. Robust debate is sometimes essential in forming policy, but you should always treat patients, colleagues and staff with respect.

In standing for election you agree to uphold these principles as set out above. The information that you provide to the BMA will be processed in accordance with the data protection principles as set out in the General Data Protection Regulation and the UK Data Protection Act 2018.

Private practice committee (PPC)

About the committee

Remit, subcommittees and where it sits in the BMA structure

The PPC considers and reports on matters of direct concern to the profession in the field of private general and consulting practice, whether whole or part time, and such other matters as may be referred to it by council from time to time.

The committee engages with key stakeholders in private healthcare to represent the views of the profession. This includes private medical insurers, private hospitals providers, royal colleges and specialty associations.

You can find out more about the committee on the BMA website bma.org.uk.

Remit of the committee

To consider and report on matters of direct concern to the profession in the field of private general and consulting practice (whether whole or part time), and such other matters as may be referred to it by Council from time to time. With power to co-opt.

The PPC is composed of:

- The BMA President
- The Chair of Council
- The Treasurer
- The PPC Chair
- One members elected or Appointed by the Representative Body
- One member elected by the Junior Doctors Committee
- One member elected by the General Practitioners Committee
- One member elected by the Professional Fees Committee
- One member elected by the 1 by the Staff and Associate Specialists Committee
- Two members who do not provide and/or perform primary medical services under the National Health Service Act 2006 (and/or the equivalent legislation in the devolved nations) and who earn 75% or more of their income from private general medical practice and are engaged in private medical practice to the extent of at least 20 hours per week. They will be elected by members who are registered with the BMA as not providing and /or performing primary medical services under the National Health Service Act 2006 (and/or the equivalent legislation in the devolved nations) and are engaged in active private general medical practice

- Two BMA members who are engaged in active consultant or specialist clinical practice, treat patients who are receiving privately funded healthcare (via a private medical insurer or self pay), have no contract of employment, earn 75 % or more of their professional income from private consultant or specialist clinical practice and are engaged in active private consultant or specialist clinical practice to the extent of at least 20 hours per week, elected by BMA members who meet the same criteria
- Four BMA members who are engaged in consultant or specialist practice under the National Health Service Act 2006 (and/or the equivalent legislation in the devolved nations) and who are also engaged in active private consultant or specialist clinical practice
- One representative of hospital dental practice, nominated and funded by the Central Committee for Hospital Dental Services
- One representative nominated by the Academy of Royal Medical Colleges
- One co-optee

Your role as a committee member

As an active member of the board you are expected to:

- contribute to the work of the committee
- assume various roles as the need arises, for example, providing particular assistance with projects in your area of expertise
- provide a steer to the work of the secretariat
- 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.

Roles of other committee members

Chair

The chair plays a pivotal role within the private practice committee. During the meeting, he/she is responsible for:

- Abide by the BMA behaviour principles and [code of conduct](#)
- Ensure effective working relationships between the officers and members
- Promote and ensure compliance with data protection legislation and confidentiality
- To ensure committee members are aware of their responsibilities in this area, monitor compliance and address any issues that may arise
- Work in partnership with the BMA secretariat and staff
- Facilitate change and address conflict within the committee/council
- Act as figurehead and spokesperson as appropriate
- Represent the BMA and the committee/council and the specialty/grade in discussions with stakeholders
- Keep up to date with developments
- Review committee/council governance, performance and skills
- Facilitate succession planning
- Plan, set the agenda and prepare for meetings with others as appropriate
- Run meetings in accordance with governance guidance and BMA policy
- Ensure matters are dealt with in an efficient and orderly manner
- Bring impartiality and objectivity to meetings and decision making
- Maintain order during meetings, establish a finish time and prioritise items for discussion
- Ensure a fair and balanced discussion, giving every member an opportunity to contribute – including visitors as appropriate
- Aim to reach collective decisions and agreed action points, summarising these for members at the end of each agenda item and at the end of the meeting
- Ensure notes of meetings are accurate and timely and actions are taken and reported
- Ensure that regular reports to BMA council reflect the committees' work and position
- Encourage members to contribute to consultation responses
- Contribute to and help guide list server discussions
- Take action as necessary, and in consultation as appropriate, and make decisions on behalf of the committee between meetings
- Mentor less experienced committee/council members

The chair will also take action and make decisions on behalf of the PPC between meetings.

Deputy chairs

Two deputy chairs are elected annually. This usually occurs via an electronic ballot over the summer period or at the first meeting of the session. The deputy chair supports the work of the chair of the board throughout the year, and may be required to stand in for the chair as the need arises.

Ex-officio members

These members hold positions on the PPC by virtue of their office within the BMA, for example the chief officers of the association.

Co-optees

Co-optees can be PLG members or non-members, and are selected on the basis of providing broad experience on private practice or to support a specific project.

Visitors/observers

PPC operates a visitor scheme to allow BMA members to attend a committee meeting as an observer. This provides an opportunity to see PPC in action, and is a useful to encourage new members to stand for election to the committee.

Voting rights

The Chair, other members and co-optees hold full voting rights for the committee and should remember the groups they represent when casting a vote. Observers, secretariat and other attendees at the meeting so not hold 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.

[bma.org.uk/collective-voice/committees/committee-policies/bma-code-of-conduct](https://www.bma.org.uk/collective-voice/committees/committee-policies/bma-code-of-conduct))

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.

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 six 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

bma.org.uk/collective-voice/committees/committee-policies/committees-technology-tcs

bma.org.uk/advice/employment/ethics/confidentiality-and-health-records/general-data-protection-regulation-gdpr

Register of interests (declarations)

Members are required to complete the register of interests form which will be kept in the secretariat.

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 representatives¹ (hereafter referred to in the collective 'member/s'), 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 (eg 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.

Key committee dates

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

The private practice committee meets on three formal occasions each year. The meetings of the board for the session will be held on:

- **Thursday 1st November 2018**
- **Thursday 7th February 2019**
- **Thursday 23rd May 2019**
- **Friday 5th April 2019 – PPC Conference**

All meetings are held at BMA House and will commence at 1pm, with an approximate finish at 5pm.

Apologies for absence

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

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

Role of the committee secretariat

Committee services provides support for all the committees and conferences for which the policy directorate is responsible, including all the branch of practice committees and a wide range of other committees from medical managers to the patient liaison group.

Senior policy advisors work directly with the committees and their chairs providing high level support, maintaining an overview of the committee's work and taking forward policy work not covered elsewhere.

Your senior policy advisor is responsible for:

- helping you develop your work plans, working with policy colleagues to ensure that these plans fit with BMA policy priorities
- commissioning work to support those priorities
- making sure that you have the opportunity to contribute to relevant policy development and
- preparing for meetings making sure that they are effective, run smoothly and that agreed actions are progressed.

Our committee support team undertake all the associated committee administration, for example preparing agendas and action notes, diary management, room bookings and maintaining committee list-servers. We also have an Equality, Inclusion and Culture team which partly works with our team and partly with professionalism and guidance. Within the committee services function, the purpose of the equality, inclusion and culture team is to ensure that the BMA's democratic structures are transparent, fair and increasingly reflective of equality and inclusion principles.

Key contacts

Get in touch with members of the secretariat if you have any questions or queries.

Reena Zapata

Senior policy advisor

T 020 7383 6042

E rzapata@bma.org.uk

Rosemary Hammond

Policy advice and support officer

T 020 7383 6553

E rhammond@bma.org.uk

Bernadette Ross

Coordination and support officer

T 020 7383 6191

E brross@bma.org.uk

Key priorities for the committee for the 2018-19 session

Competition and Markets Authority

To participate fully in consultations with regards to the CMA's order.

PHIN (private healthcare information network)

To continue to engage with PHIN on the implementation of the CMA's 'information remedy' to ensure that doctors' views are effectively represented.

Private medical insurers

To continue to actively seek solutions to address the imbalance on the bargaining position between the Private Medical Insurers and consultants.

Representation of BMA members employed by independent providers

To ascertain the issues affecting this group of doctors and how best the BMA can represent them.

Private Practice Conference

To hold a highly successful conference on 5 April 2019.

Communication

To improve engagement with the wider BMA membership.

Helping you participate

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.

Skype for Business – video conferencing facilities

For some meetings you may find it easier to join via Skype for Business video conference from your home or workplace. Video-conferencing and webcam facilities are 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.

Skype for Business:

- lets you connect with co-workers or business partners
- start conversations with IM, voice or video calls
- see when your contacts are available online, in a meeting, or presenting
- Skype for Business is industrial- strength security for meetings
- broadcast online to a large audience
- present your screen during meetings or give control to others
- use Skype for Business in other Office programs to chat, call, or join a meeting with a click.

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 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 direct from our child care providers, who the committee staff or the BMA conference unit will provide contact details for. For more information or for an application form contact Bernadette Ross (brross@bma.org.uk).

See [bma.org.uk/about-the-bma/equality-and-diversity/care-guidelines](https://www.bma.org.uk/about-the-bma/equality-and-diversity/care-guidelines) for the full guidelines and conditions.

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.

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

Members who have special dietary requirements should notify secretariat at least 4 days in advance, so that the secretariat can liaise with Catering accordingly. Please let us know your dietary requirements and what we can do to make our meeting fully accessible to you. You can email Bernadette Ross (bross@bma.org.uk) or ring her on **020 7383 6191**.

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. If you have any queries regarding Concur please contact John O'Connor on **020 7383 6458**.

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 Reena Zapata at rzapata@bma.org.uk or on **020 7383 6042** 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-us/how-we-work/committee-expenses

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 oversight and 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 oversight and 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 oversight and 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 by ticking the honoraria column. 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.

bma.org.uk/collective-voice/committees/committee-policies/committees-expenses-and-honoraria

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.

bma.org.uk/membership/hotel-rates-for-staff-and-members

Key links and other useful information

Committee webpage

bma.org.uk/ppc

Publications

All of the publications are available on our website at

bma.org.uk/ppc

Listserver address

privatepractice-l@listserv.bma.org.uk

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.

bma.org.uk/collective-voice/policy-and-research/education-training-and-workforce/promoting-dignity-at-work

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:

- truth – being able to show that what was said is true or substantially true;
- honest opinion – a statement of genuinely-held opinion on a stated factual basis;
- 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;
- 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
- 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.

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. bma.org.uk/advice/employment/leave/trade-union-leave

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. bma.org.uk/advice/employment/raising-concerns/guide-to-raising-concerns

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. [bma.org.uk/about-us/equality-diversity-and-inclusion](https://www.bma.org.uk/about-us/equality-diversity-and-inclusion)

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 are sufficiently important to merit both chairs. You can read more detailed guidance on co-chairship online.

British Medical Association

BMA House, Tavistock Square,
London WC1H 9JP
bma.org.uk

© British Medical Association, 2018

BMA 20180609