1. The British Medical Association (BMA) is an independent professional association and trade union representing doctors and medical students from all branches of medicine all over the UK and supporting them to deliver the highest standards of patient care. We have a membership of over 160,000, which continues to grow every year. BMA Cymru Wales represents almost 8,000 members in Wales from every branch of the medical profession.

2. BMA Cymru Wales welcomes the opportunity to contribute to the Committee’s inquiry into lobbying activity in Wales. Some of the questions asked by the committee are not relevant to the work of the BMA. Where it is appropriate for us to share our views we have ensured that the responses given are within the scope of this inquiry.

3. BMA Cymru Wales recognises that lobbying is an essential and legitimate activity which forms part of the democratic process and is a fundamental part of the political process in developing and implementing well considered public policy and robust legislation.

4. BMA Cymru Wales is supportive of ensuring transparency in lobbying activities although we are not aware of a particular lack of transparency in Wales. As a trade union, the BMA already operates in a highly transparent sector. The Trade Union and Labour Relations (Consolidation) Act 1992 as amended by the Employment Relations Act 1999 requires the BMA to adhere to a number of regulations and standards. Additionally, as a national, high profile and well-respected organisation, there are certain standards that the BMA expects of its public affairs staff, as representatives. In Wales, our Media and Public Affairs team are all members of the CIPR and as such adhere to the CIPR’s code of conduct. Additionally, membership of Public Affairs Cymru (PAC) is encouraged and the two members of staff who undertake lobbying activities are members of PAC adhere to its code of conduct.

5. BMA Cymru Wales undertakes lobbying activities to inform Assembly Members, Government Ministers, Special Advisors and Civil Servants of the medical profession’s views on certain policy areas including medical workforce issues, public health matters and wider NHS policies. We also provide a practical perspective on how certain policy proposals will impact on NHS services and patient care. BMA Cymru Wales does not have any commercial interest, nor does it seek to gain a financial advantage as a result of its lobbying activities.

Is there a need for change?

6. We acknowledge that there is a different political climate now compared to when the last inquiry was held into lobbying in 2013. In particular, regulation of lobbying activity in Scotland and the UK Parliament’s Lobbying, Non-Party Campaigning and Trade Union Administration Act 2014. However, BMA Cymru Wales is unconvinced of the need for change in Wales, particularly in terms of any register of lobbyists.

7. Since devolution, there has been an open and transparent approach to engagement of the public and professions in the development of policy by all administrations, past and present. The consultation process is set out very publicly and many organisations, including BMA Cymru Wales allow responses to be published. The legislative process too is very open, particularly with the publication of evidence received by external organisations and the public forum in which Assembly Committees meet, including their broadcast. However, we would note that the short notice given by some committees when written or oral evidence is
called for does sometimes limit organisations’ ability to respond in the fullest and most effective manner.

What do you understand by the term lobbying?

8. BMA Cymru Wales undertakes a range of activities to help shape and influence policy but would not necessarily consider all of this activity to be lobbying. Additionally, the BMA as a trade union, often meets with Ministers and government officials for the purposes of negotiating contractual issues. These meetings are attended by elected members and secretariat staff. BMA Cymru Wales is firmly of the opinion that negotiating activities with government officials and Ministers should not be defined as lobbying as they are completely separate and different activities, subject to existing legislation and which are part of the routine work of a trade union.

9. BMA Cymru Wales is often invited to nominate representatives from the medical profession to attend government-led meetings to develop policy e.g. workforce planning etc. Our presence at these meetings is to influence the shaping of policy to ensure it is practical and implementable from the professional perspective. We do not believe this activity should be captured under any definition of lobbying. However, for the sake of transparency we would contend that all organisations’ attendance at such government-level meetings should be available publicly from the government or under a freedom of information request.

What would you consider to be the impact of introducing a new regime to deal with lobbying?

10. BMA Cymru Wales would advocate that any proposed changes to how lobbyists are defined and regulated must be proportionate to the risks identified by this inquiry. Whilst it is impossible to predict the inquiry’s findings, we advocate a cautious approach to changing how lobbying is regulated without a clear and compelling evidence base to support the need for change.