Your committee

General practitioners committee (Wales)

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.

2020-21
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 executive officers should coordinate media engagements with the press office.
- You should declare conflicts of interest to your committee chair/committee executive officer 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 and confirm that the BMA may process your personal data as defined by the General Data Protection Regulation and UK Data Protection Act 2018.
Introduction from the chair, Dr Phil White

Welcome to GPC Wales

I have been a member of this committee since 2007 and have been representing GPs as a member of LMCs in North Wales since 1985 (Gwynedd first where I was chair for three years and its successor, North Wales LMC where I was chair for six years, then medical secretary and CEO).

I work as a GP in partner practice, and since becoming chair in July 2019 I will be sitting on a range of committees at Welsh and UK level covering a wide portfolio of briefs including unscheduled care, indemnity, education, workforce and vaccinations and immunisations.

My main aims for the committee are to ensure a sustainable future for Welsh general practice and I am committed to working proactively to ensure we champion the views of our members and their patients.

I look forward to welcoming you in person as a member of the Welsh general practitioners committee and working with you to improve general practice in Wales.

Dr Phil White Chair, GPC Wales
**Welsh general practitioners committee (GPC(W))**

**About the committee**
GPCW represents the views of GPs in Wales. As a subcommittee of GPC UK, it considers matters relevant to the medical profession in Wales, confers with the Welsh Government and other external bodies in Wales, and acts as a conduit for the views of Welsh LMCs (local medical committees). GPCW has the delegated authority to negotiate on devolved matters.

The committee meets four times a year. All GPs in Wales have the chance to have their voice heard at these meetings through their elected LMC representatives.

You can find out more about GPCW on the BMA website: [bma.org.uk/what-we-do/committees/general-practitioners-committee/welsh-general-practitioners-committee](http://bma.org.uk/what-we-do/committees/general-practitioners-committee/welsh-general-practitioners-committee)

**Membership of the committee**

GPCW is composed of:

**Voting members**
- The chair, who is elected by members of GPCW for an initial term of three years
- 16 representatives of LMCs in Wales (three from each LMC plus one additional co-opted seat for Bro Taf for 2020-21 session only)
- The chair of GPC UK (ex officio)
- The two members of GPC UK representing Welsh regional constituencies (ex officio)
- Any member(s) of GPC UK elected by the ARM who has their principal workplace in Wales
- Any other GP practising in Wales, or medically qualified secretary of a Welsh LMC, elected by the annual LMC conference
- One representative of the GP trainees subcommittee
- One sessional GP practising in Wales
- One representative of a constituency if an existing representative from that constituency is elected chair
- One GP representative of Unite practising in Wales (not eligible to be chair or a negotiator).
Four voting members of the committee are elected to join the chair as GP negotiators. Negotiators are elected for an initial term of two years.

Up to two deputy chairs are appointed annually by the chair from among the elected negotiators.

**Non-voting members**

**Co-opted members**

The committee can co-opt up to two members. The committee decides whether these co-opted members are permitted to vote. For 2020-21 one of these seats will be a Bro Taf LMC elected representative.

**Observers**

- The chair or vice chair of Welsh council (ex officio)
- The chair of the Welsh LMC conference (ex officio)
- One representative of the Welsh consultants committee
- One representative of the Welsh staff and associated specialists committee
- One representative of the Welsh committee for public health medicine
- One representative of HEIW
- One representative of the RCGP Welsh council (observer)
- One representative of the Welsh General Dental Services Committee (BDA) (observer).

**Your role as a committee member**

As a member of GPCW you are expected to:
- contribute to the work of GPCW
- assume various roles as the need arises, eg providing particular assistance with projects in your area of expertise
- provide a steer to the work of the committee executive officer
- 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 executive officer.
Roles of other committee members

Chair
The chair plays a pivotal role within GPCW.

In advance of the meeting they will agree with the committee executive officer the items for discussion and their priority. During the meeting, they are responsible for:

– deciding which of the items on the agenda should take greatest priority, or will require the greatest amount of time for discussion
– abiding by the BMA behaviour principles and [MOU1] Code of conduct
– establishing a finishing time for the meeting
– maintaining order
– ensuring that all members have an opportunity to contribute to the discussion
– ensuring that the important points are covered when considering an issue
– managing the discussion to ensure that time is not wasted and that any arguments remain balanced, constructive and impersonal
– remaining objective and impartial
– encouraging members to reach a conclusion collectively and to decide how GPCW should proceed
– giving their opinion when GPCW is divided to manage the discussion
– summarising the conclusions reached, and any decisions taken, at the end of each agenda item. This enables all those present at the meeting to go away with a sound understanding of the action to be taken by GPCW on a particular issue. It also ensures that the committee executive officer can record an accurate minute
– ensuring that the minutes of a GPCW meeting are accurate and clear.

The chair will also take action and make decisions on behalf of GPCW between meetings. Refer to BMA guidance for chairing a meeting and the role profile online.

Deputy chair(s) (Role profile)
The deputy chair is elected annually. This usually occurs at the first meeting of the session, from the pool of four elected negotiators’. There is an option to share this role. The deputy chair supports the work of the chair throughout the year and may be required to stand in for the chair as the need arises.
Negotiators
The five GP negotiators (including the chair) take action and make decisions on behalf of GPCW between meetings. The negotiators represent GPCW in meetings and negotiations with Welsh Government and other external bodies.

Ex officio members
These members hold positions on GPCW by virtue of their office within the BMA, for example the chair of GPC UK.

Co-opted member (Role profile)
Co-opted members may or may not be BMA members, and are selected on any basis the committee sees fit. This may for example be on the basis of providing broad experience on Welsh health policy, or to support a specific project. The committee decides whether co-opted members are permitted to vote.

Visitors/observers
The chair may invite non-members to observe or present to the committee from time to time.

Voting rights
All voting members have full voting rights. Co-opted members can vote if permitted to do so by the committee. The chair of GPCW is also entitled, in the case of equality of votes, to give a second or ‘casting’ vote. Non-voting members, observers and visitors do not have the right to vote at meetings but can offer valuable advice to help members reach decisions.
**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 by-laws of the Association. The code of conduct provides guidance on expected behaviour and sets out the standards of conduct that support the BMA’s values in the work it does. 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 by-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 the 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 the code of conduct. Candidates will abide by electoral by-laws 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
The six principles set out in the new GDPR/DPA act:

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

**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:** Personal data shall be 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 several 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 can 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:

www.youtube.com/watch?v=uE3aLeBEAxI

Technology and GDPR T&Cs
Confidentiality policy
Privacy policy
Acceptable use policy
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 representatives (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 or elected 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 as defined by the General Data Protection Regulation (EU) 2016/279. 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 14 days of the change occurring to ensure that the record 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.
Your committee – General practitioners committee (Wales)

- 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, 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.

Senior elected positions
There is also a procedure to assess declared conflicts at the nomination stage for senior elected positions (chairs, deputy chairs, officers and executives), as follows:

– Declaration
Two questions will be added to the nomination forms for elections (paper or electronic via the online elections system) to allow individuals to declare any conflicts of interest.

The committee chair and secretariat will consider the declaration and decide whether an actual or potential conflict exists. If the chair and secretariat consider that any matter needs further exploration, they will refer it to the corporate development directorate for consideration by an independent conflicts of interest assessment group.

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

GPCW normally meets four times each year, and members are expected to contribute to discussions on the listserver (an email group managed by the committee secretariat). Members may also contribute to steering groups or working parties established by the secretariat to deal with specific areas of work and projects, and may be asked to represent the committee on external boards and groups. Due to the COVID-19 pandemic 2020-21 will be a truncated session with three meetings only.

GPCW meeting dates for the session are:
- Thursday 22nd October 2020
- Thursday 28th January 2021
- Thursday 29th April 2021

Meetings are normally held at the BMA office in Cardiff Bay. They will commence at 10.30am and finish by 5.00pm. However, due to COVID-19 meetings may be held virtually.

Apologies for absence
Please advise the committee executive officer in advance if you are unable to attend a meeting.

Role of the committee executive officer

Committee executive officers work directly with the committee and the chair providing high-level support, maintaining an overview of the committee’s work and taking forward policy work not covered elsewhere. The committee executive officer is responsible for:

- helping develop work plans and working with policy colleagues to ensure these plans fit with BMA policy priorities
- making sure members of the committee have the opportunity to contribute to relevant policy development
- preparing meetings, making sure they are effective, run smoothly and agreed actions are progressed.

Committee executive officers also undertake all the associated committee administration, for example drafting committee agenda and minutes.
Key contacts

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

**Dulaine Mulcahy**
Committee executive officer
5th Floor, 2 Caspian Point, Caspian Way, Cardiff Bay, Cardiff, CF10 4DQ
T 029 2047 4625
E dmulcahy@bma.org.uk

**Gareth Williams**
Senior policy executive
E garethrhyswilliams@bma.org.uk

**Alison Edwards**
Assistant secretary
E aedwards@bma.org.uk

**Rachel Podolak**
National director, Wales

**Lucy Merredy**
Head of policy and committee services

**Carla Murphy**
Head of media and public affairs

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 help 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/Microsoft Teams – video conferencing facilities**
For some meetings you may find it easier to join via Skype for Business/Microsoft Teams 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 has 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 5, 5- to 14-year-olds, and dependants (adults and 14- to 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 childcare providers, who the committee staff or the BMA conference unit will provide contact details for.

For more information or for an application form contact dmulcahy@bma.org.uk
See care guidelines for BMA members

Baby friendly policy
Breastfeeding is supported at BMA House and other BMA offices, including in the public areas of BMA House and during meetings. We can organise a private room if requested in advance of the meeting. Additional breaks are also available during meetings if you are breastfeeding.

Prayer room
A prayer room is available at BMA House and prayer facilities can be made available in our national offices. We can organise a private room if requested in advance of the meeting.

Catering
Members who have special dietary requirements should confirm their attendance 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 Dulaine Mulcahy dmulcahy@bma.org.uk or call on 029 2047 4625.
Your committee – General practitioners committee (Wales)

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 account.

We have a web-based expenses system called Concur, which replaces committee expense claim forms. The website can be used on all current web browsers and is also available on most smartphones and tablet devices. If you have any queries regarding Concur please contact John O’Connor on 020 7383 6458.

We do not provide mobile phones or landlines, 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 and we will reimburse you.

Please contact Dulaine Mulcahy at dmulcahy@bma.org.uk or 029 2047 4625 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
Committee expenses
Committee expense rates
Scrutiny of expenses

Visit Concur
Concur set up guide
Concur user guide
Concur quick ref guide

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.[MOU2]

**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 12 meeting days without payment and will not be eligible to claim an honorarium until their 13th 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 account. You can find more information about how to claim honoraria on our website.

**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](http://bma.org.uk/membership/hotel-rates-for-staff-and-members)
Key links and other useful information

Committee webpages
www.bma.org.uk/what-we-do/committees/general-practitioners-committee/welsh-general-practitioners-committee
Taking part in a BMA committee
Committee policies
Support schemes for you
Mentoring scheme
Effective influencing at the BMA
Valuing difference programme
Leadership programmes[MOU3]

Listserver address
wgpc-l@listserv.bma.org.uk

Concur quick reference guide
bma.org.uk/about-us/how-we-work/committee-expenses

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.

As a member of the listserver, you must observe agreed guidance for the use of listservers and other means of electronic communications, as set out in the BMA email guidelines, BMA technology terms and conditions and GDPR guidelines. These policies form part of the code of conduct.

The Code of conduct provides guidance on expected behaviour and sets out the standards of conduct that support our values in the work that we do. We are a trade union governed by company law and trade union law. Our code applies to all members of the BMA and members of committees/groups.
Members must conduct themselves so as to promote the success of the BMA and maintain the individual and collective reputation of the Association and its members. They must also, at all times, comply with relevant trade union laws. This code of conduct incorporates and supersedes existing BMA council and board approved codes of conduct.

The code ensures that there is parity between staff and members, with each being held to an equitable standard of conduct. Every BMA member is bound by this code of conduct when conducting BMA business.

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.

‘Member’ includes all BMA members, BMA directors and representatives, observers, visitors and lay members on BMA committees, councils, boards and groups.

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. [www.bma.org.uk/advice-and-support/discrimination-and-harassment/bullying-and-harassment/promoting-a-positive-working-environment](http://www.bma.org.uk/advice-and-support/discrimination-and-harassment/bullying-and-harassment/promoting-a-positive-working-environment)
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 unrecorde 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, eg 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 offline 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/pay-and-contracts/leave/trade-union-leave/trade-union-leave](http://bma.org.uk/pay-and-contracts/leave/trade-union-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](http://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](http://bma.org.uk/about-us/equality-diversity-and-inclusion)