

Resolutions

Workforce

CARRIED AS A REFERENCE	3	That this meeting calls on the BMA to work with NHSE to create fully funded ring fenced locally sensitive retention schemes relevant to later career doctors.
CARRIED AS A REFERENCE	4	<p>This conference notes the valuable contribution made by retired doctors who return to work in the NHS, welcoming the initial steps taken by the NHS Emeritus scheme to promote this</p> <p>(i) but is dismayed that the scheme excludes doctors who work in mental health services despite the workforce crisis there</p> <p>(ii) and demands that NHS England include retired doctors from all specialties providing the best patient care, in the scheme.</p>

Medical Associate Professionals

CARRIED AS A REFERENCE	5	<p>This meeting notes</p> <p>(i) that in other countries, healthcare PAs are 'Physician Assistants'; that no other profession has 'associates' who are not members of the designated profession; that in the NHS, until 2013, PAs were styled 'assistants';</p> <p>(ii) notes the assertion of the RCP that change of title would 'enable the profession (of PA) to proceed to statutory regulation', but regards this rationale as spurious, there being no reason to suppose that the title 'assistant' would be an impediment to regulation;</p> <p>(iii) demands that in order that the public not be misled or confused and so that patients can give properly informed consent, the BMA and its members henceforth refer to Physician Associates (PAs) as 'physician assistants' in all relevant documentation, communication and circumstances;</p> <p>(iv) demands the same policy be applied to Anaesthetic Associates (henceforth, anaesthetic assistants, AAs);</p>
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		(v) in the interests of professional integrity and to avoid 'passing off', calls on the government and all other bodies to adopt the same policy.
CARRIED	6	<p>This meeting reiterates its previous calls for PAs and AAs to hold their registration through the Health and Care Professions Council (HCPC) and not through the General Medical Council – noting</p> <ul style="list-style-type: none"> (i) the GMC was founded to register appropriate medical practitioners and protect the public from unqualified medical practitioners; (ii) the Health and Care Professions Council is competent to regulate a number of other professions supplementary to medicine; (iii) to suggest the HCPC could not properly regulate PAs is impertinent. <p>Rider - to be added at the end of 6(i)</p> <p>and requests BMA formally complain to the Charity Commissioners as by agreeing to regulate Physician Associates, GMC appears to have breached its charitable objectives</p>

National Health Service

A CARRIED WITHOUT DEBATE	7	That this meeting deplores the fact that the removal of impacted ear wax is no longer available for patients on the NHS in some areas. This unacceptable postcode lottery further disadvantages patient who are on a low income and already subject to health inequalities. This conference calls on the BMA to press governments across the UK to restore this service to all patients who require it.
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Pensions

CARRIED	8	<p>This conference:</p> <ul style="list-style-type: none"> (i) Welcomes the ability to rejoin the NHS Pension Scheme to those who retire and return to work in the NHS. (ii) Demands that retired doctors in Northern Ireland receive the same rights to rejoin as those in the other home nations. (iii) Asks that the COVID regulations to suspend Abatement are continued indefinitely, rather than cease next year.
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Retired doctors

CARRIED	10	<p>This conference:</p> <ul style="list-style-type: none"> (i) Notes the contribution and experience brought to the profession and the BMA by retired members; (ii) Notes increasingly varied and mixed patterns of working by doctors, especially as members advance in years; (iii) Asks the Association to adapt to these new models of working through greater working together of Branches of Practice.
CARRIED	11	<p>That this conference believes the government should facilitate and reimburse GMC restoration fees for those recently retired members wishing to be considered for re-engagement as emeritus Consultant in the NHS.</p>

Finance of the Association

CARRIED	13	<p>That this meeting believes reducing the length of full membership required to achieve free life membership will work to the BMA's economic benefit and asks the BMA to examine doing so.</p>
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BMA structure and function

<ul style="list-style-type: none"> (i) CARRIED (ii) CARRIED (iii) CARRIED (iv) CARRIED AS A REFERENCE (v) CARRIED 	*14	<p>This meeting can only conclude following the circulation of the document "Your local BMA Consultation Findings" that the</p> <ul style="list-style-type: none"> (i) BMA does not appear to value the knowledge, expertise or historic and continuing commitment of retired members (ii) BMA sees no significant role for retired members in the organisation of, or future development of the Association (iii) BMA plans to mostly isolate retired members from all working doctors by placing them in "Retired members Regional units". (iv) BMA, presumably apart from the Treasurer, has little interest in retaining the membership of retired members, who may wish to take this into account when their subscription renewals come due (v) BMA may want to apologise to retired members and consider withdrawing some of the comments in the document (particularly the anonymous statements about retired members)
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CARRIED AS A REFERENCE	14a	This meeting believes that the valuable expertise of retired members in the Divisions will be lost as under the proposals to abolish divisions in Serving Your Needs Better as there will be no opportunities in the proposed place of work units for experienced retired members to hold any office and we call on the Organisation Committee to address and resolve this act of disenfranchisement.
CARRIED	15	This meeting: <ul style="list-style-type: none"> (i) notes motion 261 from ARM 2022, mandating the Organisation Committee “to develop a proposal for removing a reliance on divisions from the articles and bye-laws of the Association whilst ensuring local support and organisation of members continues”; (ii) notes this proposal “must be brought to ARM 2023 for consideration”; (iii) is concerned that no proposal was brought to ARM 2023; (iv) notes that in November 2023, UK Council approved a proposal from a member which replaces divisions and removes the authority under article 30 for divisions to have autonomy for how they run elections; (v) calls on UK Council to rescind that determination in respect of divisions and electronic voting for ARM representatives in 2024 and re-run any elections already decided; (vi) in the absence of which, this meeting supports reference of a grievance to the Trade Union Certification Officer by the group of BMA members styled as the ‘Certification Officer Application Group (COAG)’.
CARRIED AS A REFERENCE	16	This meeting regrets the Association, having supported the formation of a Retired Members Conference and Retired Members Committee, in the document Serving Your Needs Better, <ul style="list-style-type: none"> (i) now abandons its retired members by proposing to abolish their divisional member base and, (ii) by relegating them to the regions, which can be many hundred miles distant from home, the Association risks losing the valuable local connections for retired colleagues and may cause many thousands of members to resign, and (iii) calls on the Association to urgently rethink these proposals.
CARRIED	17	That this Conference supports the creation of a regional structure for retired members with at least one organisational unit for each of the ten regions in England and for each of the devolved nations, with each organisational unit having an annually-elected Chair and Deputy Chair, and with each organisational unit holding at least one meeting for all retired members in its area in every BMA session, and that this Conference mandates the Retired Members Committee to achieve this.