

# **Locum Life Made Slightly Less Complicated!**

Dr Andrew Noble

# *Introduction*

## **Dr Andrew Noble (Portfolio GP!)**

- Completed VTS 2002 Sheffield
  - Worked Salaried for PCT and Practice
  - Locum GP Somerset and then East Riding
  - Director of Clinical Studies HYMS
- Year in Australia Melbourne 2008/9

## **Current Roles**

- Freelance GP
- Clinical Director of the Yorkshire Medical Chambers
- East Riding CCG Lead for Dementia
- GP Appraiser - East Riding PCT
- Part Time Salaried GP Brough and South Cave

# What is in this presentation.

- Action when finishing reg jobs
- Money, tax etc..
- Getting work and organisation
- Terms and conditions
- Invoicing and Pension forms
- Appraisal
- Freelance GP Chambers

# The freelance GP – now a positive career choice!

- GP Partnership changing, more business orientated, bureaucracy++
- Your own boss
- Control of workload – work/life balance, reduce burnout.
- Concentrate on the clinical side of General Practice (less hoop-jumping)
- No heartsinks!

**What do you need to do when  
you finish your Reg jobs?**

# Post CCT

- CCT certificate (in my day JCPTGP)
- RCGP certification unit 0203 170 8230
- Local Performers List
- Important all of these completed before you start work, issues may occur with booking work before these are in place.
- Collect all relevant documentation

# Post CCT

- CRB check / Hep B Status
- Buy own equipment/Drs bag
- Buy a sat nav or A-Z map
- Insure car for business use
- Can join NASGP £8 per month
  - [www.nasgp.org.uk](http://www.nasgp.org.uk)
- Consider joining union BMA or MPUnite
- Register with MDU/MPS as a locum
  - MDU – 0800 716 376
  - MPS – 0845 718 7187
  - MDDUS - 0845 270 2038

# Self Employed

- Register with HMRC
- Can do over the phone
  - 0845 915 4515
- Need start date & NI number
- Will be given 10 digit UTR number in 6/52 don't need straight away
- Consider Income protection



# National Insurance

- Pay Class 2 and 4 (as employed you pay Class 1)
- Set up direct debit for class 2 NI contributions - pay monthly
- OR quarterly BACS transfer
- Class 2 £2.75 week - 2014/15 Flat rate
- Special form CWF1 ask for it when register as S-E, they will post out to you or print it out from website:
- [www.hmrc.gov.uk](http://www.hmrc.gov.uk) click on link – forms

# Money Tips

- Set up separate bank account
  - put earnings into it / expenses on card
- OR an offset/ current account mortgage
  - ideal with variable cashflow
- Get an accountant! (tax deductible)
- Apply for a mortgage before you become self employed! (you need 3 years accounts)

# **Financial Planning**

What are your expected costs post registration year as a locum?

# Financial Planning

- CCT - £805 paid to PMETB
- MPS - £5250 (5-6 sessions/wk)
- GMC - £410
- BMA -£399
- Car insurance/tax/MOT/servicing
- Petrol £££'s
- Equipment
- Holidays/time off
- Chambers management costs?
- All tax-deductible

# Tax

- Tax return submitted every year
- 2 payment dates Jan 31 and July 31
- 1/2 of earnings into a high interest savings account (or offset account)
- Keep all receipts
- Fuel, drugs for Drs bag, stationary, equipment, sat nav
- Record (all) work mileage

**How will you get work?**

# How to get work?

- You have to sell yourself
- Write a good CV and covering letter, show trainer & PM- send to local practices
- Word of mouth, practice managers and GPs
- Registrar practices
- 'Locum' list at CCG
- Locum agencies – lower rates of pay, not pensionable but can fill gaps
- Out of hours work
- Know your locum market

# How will you get work?

- Colleagues – going on mat leave
- BMJ careers
- Pulse/GP magazine
- Healthcare republic website
- Doctors.net.uk
- Join a freelance GP chambers



# Extras on your CV

- MRCP - Minor ops
- MRCS
- DCH - ALS
- Child Protection - Dip GUM
- DRCOG - Dip Elderly m
- DFSRH – coils & implants
- Special interests

# Terms and Conditions

- In writing, confirmation via email
- Clearly state date, times of surgery, and pay
- State clearly what you have agreed to do eg max 2 visits, no visits, scripts, paperwork, queries, on call
- Cancellation policy
- When payment due (end of the month)
- Method of payment cheque/BACS (provide details of your account)
- Penalty for late payment – e.g. 10% if more than 2 weeks after due date

# Invoice

- State clearly date of work done, charges itemised
- Clearly state total
- Method of payment cheque/BACS (provide details of your account)
- State when due by and again re iterate charge for late payment
- For NHS pension - ask for locum form A to be filled in
- Useful software
  - [www.pennyperfect.co.uk](http://www.pennyperfect.co.uk)
  - [www.locumorganiser.org](http://www.locumorganiser.org)

# Locum form A

- Download from <http://www.nhsbsa.nhs.uk/pensions>
- One has to be filled in for each practice worked in every month

# Locum Form B

- Download from
- <http://www.nhsbsa.nhs.uk/pensions>
- Fill one in at the end of each month
- 10% for expenses -> 90% pensionable

Tier Full time pensionable pay used to determine contribution rate Contribution rate (before tax relief) (gross) 1 April 2015 to 31 March 2019

- Up to £15,431. 99 5%
- £15,432.00 to £21,477.99 5.6%
- £21, 478.00 to £26,823.99 7.1%
- £26,824.00 to £47,845.99 9.3%
- £47,846.00 to £70,630.99 12.5%
- £70,631.00 to £111,376.99 13.5%

# Employers Contributions

As of April 2013 practices will now be responsible for paying the 14% employers contributions.

- Will need to be paid direct to the GP locum who is legally obliged to pass on to CCG with the employees contribution
- Must therefore be invoiced as separate line on the invoice clearly stating what it is for
- Paid on 90% of invoiced work
- Is now included in practices global sum.

# Locum Forms A and B

- Post all original form A's
- Plus form B for that month with your cheque
- Keep photocopies of everything!
- Send by the 7th of the next month
- Post to, Pensions Officer, Finance Department, local CCG. - (now north Yorks and Humber local area teams (CSUs))
- These should be returned with a receipt slip each month

# Stay Organised

- Keep a diary with a back up!
- Online diary
- Train your spouse to take bookings!
- Have a ledger - record of invoices, payments due at end of month and update
- Internet banking



**What will a practice look for in  
a locum?**

# Keep Practices sweet and hungry for more.

- Turn up!
- Be on time
- Clear referral letters
- Concise clear notes
- Familiarise with computer systems
- Never cancel a locum unless truly necessary
- Reliability is key!!

**What are the potential Pitfalls**

# Pitfalls

- Practice not supportive
- No one in practice to ask about referral process
- Disorganised practices
- Lack of respect from other GPs
- Underselling yourself – new reg's are snapped up quick as locums – cheap?!?
- Practice refusing to pay
- Cancellations last minute
- Late payments
- Additional extras

# Pitfalls - Solutions

- Feedback (eg patients, receptionists)
- Support – non-principals groups, Chambers, Trainer, GPs, LMC, BMA, PCT, NASGPs

# What to charge!

- your fees are gross income, not a simple labour charge;
- your income will be variable;
- know the rates others are working for locally, or you may price yourself out of the market. Getting together in a group to set local rates helps prevent practices shopping around and empowers individuals to be assertive; - be careful here you may be accused of forming a Cartel
- know the demand for locums locally;
- know what you need to live on and how hard you want to work; remember you need to cover first:
  - holidays;
  - sickness insurance;
  - a pension;
  - your business running costs;
  - postgraduate education;
  - national insurance payments;
  - tax;
  - maternity/paternity pay;
  - and then the rest you can live on.

# Appraisal

- Appraisal now has teeth!
- PUNs/DENs – gpnotebook
- Pri-Med coffee break learning / courses
- Doctors.net educational modules
- GP Update / BMJ Learning courses
- Meetings (but out of the information loop)
- NHS appraisal toolkit/ RCGPs tool kit/MAG form (RST)
- Audits - how to do as a locum?
- Feedback, colleagues and patients (difficult to do as a locum)
- Can be managed through a chambers.
- Find a good CPD tracker. [www.impaxcpd.com](http://www.impaxcpd.com)

# Keeping Sane

- Talk to colleagues
- Don't work in practices you don't like!
- Meet up in out of work setting (non-principals group)
- Join a Chambers
- Enjoy your flexible diary and being your own boss!
- Good luck



# Freelance GP Chambers

*"Freelance GP Chambers, as pioneered by Pallant Medical Chambers, is an exciting model for how locum GPs can work in a managed, professional, and supportive environment, which should benefit locums, the practices they work for, and ultimately patient care".*

**Professor Sir Graeme Catto**  
**Former President, General Medical Council**

# Freelance GP Chambers

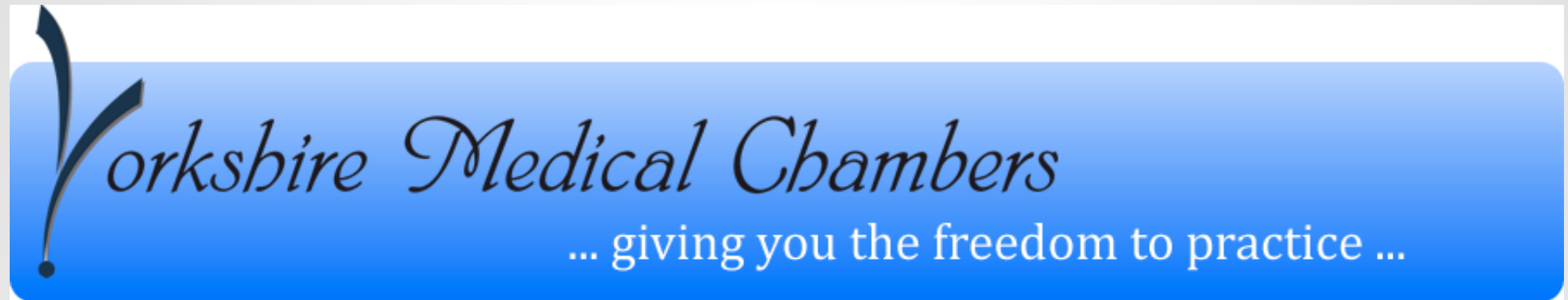
- Take the Hassle out of locumming
- Manage the business side of being a locum
- Provide a supportive "virtual practice" base.
- Usually divided into localities
- Manager and Clinical Director
- GPs pay a percentage of income (usually 10%) from bookings into the chambers (as rates of pay through chambers are often higher this is usually offset)
- GPs maintain their independent status and pension rights.
- Different to Agencies - GPs employ the chambers to work for them.

# **STERLING MEDICAL CHAMBERS**

[www.sterlingmedicalchambers.co.uk](http://www.sterlingmedicalchambers.co.uk)

**Chambers Manager: Imogen Gilmore**  
**Clinical Director: Andrew Gammack**

# Local Chambers



Manager - Steve Shaw  
([Steve.Shaw@yorkshiremedicalchambers.co.uk](mailto:Steve.Shaw@yorkshiremedicalchambers.co.uk))

Clinical Director - Andrew Noble

[www.yorkshiremedicalchambers.co.uk](http://www.yorkshiremedicalchambers.co.uk)