



NHS North of Tyne

[Clinical Governance]

No: DMG (02) Procedure for GPs not working locally

Version	1
Ratified by:	Decision Making Group
Date Ratified:	7 th August 2008
Name & title of Originator/Author:	Performance Advisory Group
Date Issued:	August 2008
Review Date:	August 2011
Target Audience:	General Practitioners

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Section 1: Introduction

1.1 Introduction

1.1.1. This document sets out the procedures for the North of Tyne Primary Care Organisations, namely Newcastle PCT, North Tyneside PCT and Northumberland Care Trust (from now on referred to as the three PCO's), to adopt in response to GPs on the Medical Performers List (MPL) of the 3 PCO's.

1.2. Purpose

1.2.1 This procedure outlines the North of Tyne procedure to be applied to GPs who are not working locally.

1.3 Duties and Accountability

1.3.1 The Performance Advisory Group (PAG) will be the responsible committee for monitoring these procedures and updating them as required.

1.4 Definitions

Medical Performers List (MPL) – any doctor who wants to perform general medical services (GMS) or personal medical services (PMS) must be registered on a Medical Performers List.

1.5. Related Documents

Appraisal Policy

NHS (Performers List) Regulations 1004

Section 2: Procedure for GPs not working locally

2.1 Background

These procedures will help to make clear how the regulations governing PCT management of MPL are to be applied to GPs who are not working locally.

The requirements of the NHS (Performers Lists) regulations 1004 in relation to regulation 10 (6) allows for discretionary removal of a performer who is not currently, or intending in the future to work locally.

2.2 Using the Procedures

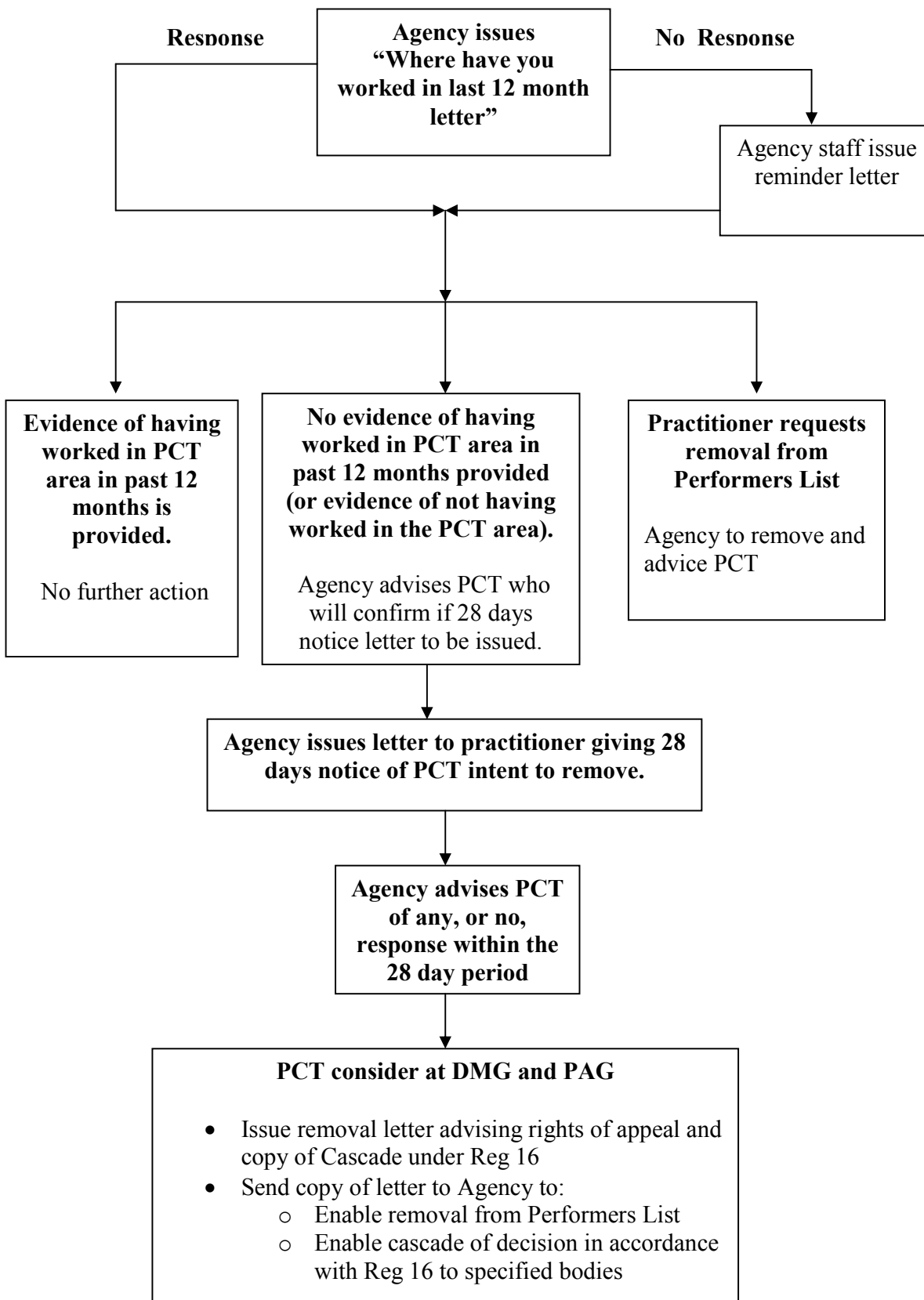
1. Introduction

1.1 The requirements of the NHS (Performers Lists) Regulations 1004 in relation to Regulation 10 (6) allows for discretionary removal of a performer who is not currently, or intending in the future to work locally.

2. Using the procedures

2.1 These procedures should be used when it becomes apparent that a GP is not working locally.

**Procedure for Discretionary Removal
[Regulation 10(6) of NHS (Performers Lists) Regulations 2004]**



Section 3: Document Consultation, Approval & Ratification

3.1. Consultation

3.1.1. This document has been produced by the Performance Advisory Group.

3.2. Document Approval & Ratification

3.2.1 The Performance Advisory Group is the committee with delegated authority for the approval and ratification of this document.

3.2.2. This procedure was formally approved by the Performance Advisory Group (7th August 2008).

3.3. Review

3.3.1.1 This procedure will be reviewed every 3 years by the Performance Advisory Group or as and when significant changes make earlier review necessary.

Section 4: Distribution & Implementation

4.1 Distribution

4.1.1. This procedure is available for all staff to access via the Infonet/extranet. Staff without computer network access should contact the PCO for information on how to access procedures.

4.2 Implementation

4.2.1. The procedure will be implemented by the Performance Advisory Group who will report to the Decision Making Group

Section 5: Monitoring Compliance

5.1. Monitoring Compliance

The Performance Advisory Group will monitor compliance of this procedure. Quarterly reports will be presented to the Performance Advisory Group or as and when deemed necessary.

References

NoT MD01 “Policy for handling concerns about the professional performance of independent healthcare professionals”.

Useful Contacts

NHS North of Tyne Tel 0191 2765

Deputy Medical Director

Associate Director of Governance, Performance and Appraisal