

General Practitioners Legal Briefing

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Tony Harris

Quo Vadis? Where do we go from here?

Our new coalition Government, as we are only too well aware, is considering various health reforms as indicated in the NHS 2010 White Paper.

May we be forgiven for wondering if we've heard all this before. Those of you that were in practice at the time of Thatcher, will well remember the notional budgets allowed under the Purchaser Provider split! We all thought then that a revolution was on the way with regard to the financing and administration of healthcare, yet the changes that may come in the next few years will be of much greater impact.

We have all read the White Paper, no doubt prepared with the best of intentions to offer patients wider choice in relation to healthcare. The document sets out the Government's general ideas and invites discussion on its terms and objectives. The debate will continue, until the results of the consultation are published early in December, within the media, the House of Commons and of course at practice level!

The key question for General Practitioners is how will the changes affect you?

GP Consortia – the practicalities



The creation of GP Consortia means that you may be responsible for up to 80% of the budget!

A new NHS Commissioning Board is to be established which will oversee the commissioning process and it is likely that the Care Trusts will only be involved in the costs of these services.

The new NHS Commissioning Board will be an independent board whose role, we assume, will be to oversee the commissioning process and set prices/tariffs and whose other role will be to oversee the GP Consortia.

Sydney Mitchell have considerable experience in setting up commissioning and providing companies in England, in anticipation of these changes. We have helped groups of GP practices combine to offer such services for the benefit of their patients.

The usual procedure for setting up GP Consortia is through the establishment of a Limited Liability Partnership (LLP) or a Limited Company.

We know from our experience that difficulties can arise and crucial questions need to be thought through at an early stage.

- Who will be the directors of the company/LLP?
- How will voting rights will be established between the various GP practices?

One vote per surgery? Dependant on the number of partners in each GP surgery? Dependant on the number of patients per surgery?

- Where will the employees be based and on what terms?
- How are running costs/maintenance costs to be apportioned?
- Will extra premises need to be leased to accommodate employees?

To answer these questions or discuss any concerns about forming GP Consortia contact Tony Harris.



Contact Tony now to arrange a free "Health Check" on your surgery

T: 0121 746 3300 E: t.harris@sydney Mitchell.co.uk

See article overleaf

Your surgery premises and partnership deeds – fit for purpose?

The NHS Litigation Authority reports that disputes over practice premises, between GPs and PCTs, have doubled in a year.

The disputes often relate to the current market rent of GP premises as is set out in the NHS Litigation Authority's 2010 Annual Report.

There is a procedure for local disputes that may involve areas such as remuneration, contract termination and claw back of monies.

When disputes like this arise it is good to know exactly where you stand with all your legal paperwork whether it relates to the premises or the partnership.

Too many times over the years, we have discovered that the deeds of existing GPs practices are out of order and require urgent attention and updating.

Very often when asked for the deeds GPs do not even know their whereabouts!

We are particularly looking at:

- **In whose names are the premises registered?**

It is not unusual to find that they are partly registered in the names of deceased, retired or retiring doctors.

Advice can quickly be given to rectify these difficulties.

We are happy to assist in tracing the deeds of surgery premises and offer a free "health check" on your practice deeds.

- **Does your Partnership Deed comply with current employment legislation?**

Modern ways of working, such as job sharing, are often not included in deeds particularly if they were drawn up years ago. You will need to be flexible to accommodate the changes that are coming.

- **Are the right people named in it?**

It is not unusual to find deeds which still include retired or deceased partners!

Sydney Mitchell can offer you a free "health check" on your Partnership Deed.

Call or e-mail Tony Harris and arrange a free "health check" for your practice!



Contact us today for a FREE health check for your practice.

Your Pension - whatever that might mean!

The NHS reforms that are due have led some commentators to suggest that GPs over the age of 55 may not wish to take on commissioning, causing a shortage of GPs in some areas due to early retirement.

Indeed some of you may even think that you've seen so many changes during your years in practice that you've seen enough!

Couple the new commissioning responsibilities with the fact that a recent poll suggested that two thirds of GPs oppose the Government's plan to force practices to join

Consortia, and you may wonder whether you should be getting out whilst the going is good.

With Lord Hutton's report looming, due out in time for next years budget, it could be time to check your current provisions.

We can assist you on interpreting current pension legislation and in estimating your likely pension.

At Sydney Mitchell we work with specialist colleagues and can offer you a complete legal and financial service.

There is no question that changes to pensions are on the way. The smartest thing you can do now is be prepared and know your options!

Call Tony Harris now!

Dates to be mindful of:



Nov/Dec 2010:
Results of Consultation.

Nov/Dec 2010: Health Bill introduced in parliament.

Dec 2010:
Sydney Mitchell Winter Newsletter

Mar 2011: Hutton pension report.

Apr 2011: NHS Commissioning Board established.

2011/12: GP consortia established in shadow form.

2012: All practices required to be part of a GP consortium.

2012: Practice boundaries abolished.

Autumn 2012: NHS Board makes allocations for 2013/14 direct to consortia.

April 2013: PCTs abolished and GP consortia take on full financial control of budgets.