



# Independent GP Recruitment Self-Employed

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### **INTRODUCTION**

The purpose of this SOP is to provide all the information an administrator may need for the recruitment and onboarding of Self-employed, Independent GPs at BrisDoc. For the purposes of the SOP the person administering the process will be termed the 'Clinician Relationship Coordinator' or 'CRC' for short.

### **OBJECTIVES OF THE PROCEDURE**

The objective of the procedure is to ensure the timely, safe and compliant recruitment and onboarding of Independent GPs to the IUC, System CAS and Practice Services.

### THE STANDARD OPERATING PROCEDURE – INDEPENDENT GP

### **Getting Started**

To carry out this role effectively, you will need access to; The CRC Email account, zoom account, RotaMaster Admin, DocuSign, UCheck the S: Drive (Particularly Workforce non-employee & Service Delivery team for the Remote Workers folder)

GPs may express an interest by email, on the telephone, at an event or through a BrisDoc staff member. The advertised email address for Independent GP recruitment is <u>workwithus@brisdoc.org</u> Please refer to; Appendix 1 for guidance on each step of onboarding a SEGP.

Once initial contact has been made, use the full name of the GP to try to establish if they have done work for BrisDoc historically. You may check this by checking on RotaMaster. If they have an account saved in their name, they may have done work for BrisDoc previously. Please check their folder by going to S:\Workforce - Non-Employee \Inactive GP's and check what documents will need to be updated in order for their file to be compliant. Please go to section 2.0 of this SOP for compliance instructions and section 5.0 for additional information on GPs returning within the last 2 years.

If a GP is moving from a salaried post to being an independent GP, please go to section 6.0 for instructions. If a GP has not worked with BrisDoc previously, please send them the initial communication as outlined in section 1.1.

### Introductory email

Please CC in one of BrisDoc's Clinical Leads (Anne Whitehouse or Louise Whyte) to any introductory email. (Appendix 2 and 2.1)

Setting up Go S:\Workforce - Non-Employee\Recruitment in progress and right click on the 'AAA Example Folder', click copy and then paste a new 'AAA example Folder'. Rename the new folder as the GPs name in the following format 'Surname, First name'. Use the 'GP Checklist' in the above folder as a place to log all compliance checks for individual GPs, noting key information; Name, contact number, email address, what work they are interested in, when they would like to start etc, this will be useful for when handing over to the DMD & Training Support team. Go to S:\Workforce - Non-Employee\Recruitment in progress\Recruitment in Progress Spreadsheet Add the GPs information to this spreadsheet. *Note; this spreadsheet will be used* 

as a log for GPs going through the onboarding process. See section 8.0 for information relating to the Recruitment checks spreadsheet

### **COMPLIANCE CHECKS**

### CV and references

The CV and references are usually received first. If they are not, try to obtain these as soon as possible as references can be a source of delay. At least 2 references must be provided. Ideally both referees should be clinician line managers/employers/leads. Where this is not possible, one referee can be a non -clinician line manager/employer/lead and one referee can also be a clinician colleague.

Please note, sometimes GPs already have their references and in cases where references are > 12 months old, we may need to request for more recent ones. Please consult with DMD in these instances.

To send Reference Requests Login into DocuSign using the following details:

Username: workwithus@brisdoc.org

#### Password: Osprey2022

Then open Templates > 'use' Self-Employed GP Reference Requests > enter referees contact details under 'name' and 'email' > enter GP's name in email subject as 'Reference Request – Dr Test Example' > edit email message to include referees and GPs details > next > send. Once a reference is received, save it to the references folder in the following format 'YY-MM-DD Dr 'referee name'. Delete the completed reference document from DocuSign once saved in the GPs file.

### **Training Certificates**

Occasionally, GPs do not have all training evidence required. The 'Where to obtain' column within the table below provides details of where you can signpost GPs to if they inform you that they do not have the required evidence. Some newly qualified GPs will have had to do most of the training below as part of their final assessment sign off – they may be able to evidence this in different ways for example as part of a training record instead of an actual certificate. If newly qualified GPs or Independent GPs send documents in that you are unsure about send these on to a Deputy Medical Director (DMD), they can shed light on if the certificate/training record is appropriate and will advise further. In certain circumstances, the DMD for IUC may accept GPs onto an induction without a training certificate on file subject to certain conditions. If you are unsure, send the query on to the DMD for approval. Once training certificates are received save them into the training subfolder of the GP's file in the following format YY-MM-DD 'Name of certificate'



Training	Expiry	Where to obtain	Is this essential to commence work in IUC?
Basic Life Support/ Resuscitation training certificate (must be Face to Face)	Dated within last 12 months	Advise GPs to obtain in at their daytime surgery. Alternatively, they can attend a BrisDoc BLS training session for a fee of £30. However, at busy times, priority must first be given to BrisDoc employees.	Ideally Yes, although please inform the DMD if not available for discussion
Safeguarding Children/ Child Protection Level 3 certificate. (SVC)	Please refer to the 'safeguarding	Please provide a log showing training either 4hrs over the last one year, OR 8hrs over the last	No, should aim to complete within 6 months of starting
	evidence log' form	two years, OR 12hrs over the last three years.	within IUC if not available
		*At least 50% of the hrs should be multiagency/participatory	
		The BNSSG CCG have put together lots of useful resources and guidance via their <u>Remedy</u> page.	
		<ul> <li>Details of upcoming webinars</li> <li>A regularly updated self-directed learning package</li> <li>Link to KBSP for pre- recorded webinars - Newsletters, etc.</li> </ul>	
		E-learning is available via Elfh	
Safe Guarding Vulnerable Adults (SVA) Level 3. If level 3 has not been completed, level 2 may	Please refer to the 'safeguarding evidence log' form	Please provide a log showing training either 3hrs over the last one year, OR 6hrs over the last two years, OR 8hrs over the last three years.	No, should aim to complete within 6 months of starting within IUC if not available
IUC deputy medical		*At least 50% of the hrs should be multiagency/participatory.	
		BrisDoc arrange sessions annually for a charge of £30, all listed on the <u>training plan</u>	
		E-learning is available via Elfh	
		Other development/training hrs can come from forums, reading journal articles, reflection, etc.	

Awareness of Mental	Dated within	Available on the E-learning for	No, should aim to
Capacity Act training.	last 3 years	Health Platform. Included in	complete within 6
		some SVA L3 courses. GPs	months of starting within
(This may not always		only need to complete the	IUC if not available
be required if the SVA		module 'Mental Capacity Act	
L3 certificate contains		and Adult Safeguarding'. If	
Mental Capacity Act		SVA L3 certificate states about	
training – BrisDoc's		awareness of mental capacity	
own L3 course includes		act then separate training	
this, check directly with		certificate is not required.	
the GP).			

### **GP** checks

You will need to check the clinician is correctly registered with their professional body. The Performer's List is what GPs are signed up to when they have qualified. The performer's list provides an extra layer of reassurance for the public that GPs, Dentists and Opticians practicing in the NHS are suitably qualified, have up to date training, have appropriate English language skills and have passed other relevant checks such as with the Disclosure and Barring Service (DBS) and the NHS Litigation Authority. Go to the following website (it may be helpful to save this as a bookmark) <u>https://www.performer.england.nhs.uk/Search/SimpleSearch</u>

Enter the GP's first and surname in the search box. Entries will appear underneath the search box, the numbers next to the name will be their GMC number. The GP applicants GMC number is usually provided within their CV, cross reference the name with the GMC number to confirm you are looking at the correct GP. Once you have identified that it is the right GP, click on their name on the right-hand side. This will show you more information for the GP. Please ensure the status is 'Included' on the Performers List. If the status is different to this, please inform the DMD (Deputy Medical Director), you may need to investigate further. Use the snipping tool (use the start bar search function to find 'Snipping Tool' if you are no t familiar with it) to take a screenshot of the 'Performer's details' box. Save the screenshot in the 'GP checks' subfolder of the GPs file in the following format YY-MM-DD Performer's List check'. Add the date of the check to the 'GP Checklist' document in the GPs folder.

Note: The Clinician Relationship Coordinator should perform Quarterly Performers List checks on Self Employed GPs to ensure they are still on the Performers List. This check should be recorded on the GPs RotaMaster profile. To run the report for this, follows these steps on RotaMaster; Reporting > Reports > Search > Type ' Performers' or code '592' > Select file > Rota Group > select the = button and chose 'Contains' > select the 3 dots > Tick 'IUC Clinical Rota' & ' Non IUC Self Employed staff' Team Group > select the = button and chose 'Contains' > select the 3 dots > Tick all except the following; OOH SE Nurse, Registrar, Self Employed Contractors, , Self Employed Drivers, Self EmployedPodiatrist & click 'OK' Click the 'Export' tab > click > click

### **General Medical Council**

You will need to check the clinician is registered with the GMC. The medical register will give you details of:

• the type of registration a doctor currently holds and whether they hold a license to practice

• whether they are registered to work as a GP or specialist consultant – it is normal for GPs to show as 'not on the specialist register'

• the date that they registered • whether they have any fitness to practice history since 20 October 2005.

• the year and place they were awarded their main medical degree

• whether they're taking further medical training and where the organization that looks after their performance and appraisal.

Go to the following website (it may be useful to save this as a bookmark). <u>https://www.gmc-uk.org/registration-and-licensing/the-medical-register#searchTheRegiste</u>

If the GP has provided their GMC number use this to search for the GP. Results will show the GMC number/ First name/ Last name/ Gender/ Status/ Year of Qualification. It is sometimes difficult to select the correct GP if you do not have the GMC number to hand at this stage. You can use the additional information provided (such as University they qualified at) to cross reference with their CV and confirm it is them. Click on the GP to bring up their registration details. Please ensure this shows the GP as being 'Registered with a license to practice' and shows 'This doctor is on the GP register'. If this is showing, then download a pdf of the webpage to save in the GPs file. Save the pdf in the 'GP checks' subfolder of the GPs file in the following format YY-MM-DD GMC check'. Add the date of the check to the 'GP Checklist' document in the GPs folder.

If there is no registration entry date or if it states the GP is not on the register, inform the DMD immediately and e-mail the GP explaining the situation and ask why it may be showing as not registered (note there may be more information about this on the 'Doctor History' tab).

It is important that we check the 'Doctors History tab' to check there has been no 'fitness to practice' hearings or any other unusual activity. If the status says anything other than 'registered' or 'registered with license to practice' inform a DMD, you may need to investigate further. Save a screenshot of the page using the snipping tool and save the screenshot in the 'GP checks' subfolder of the GPs file in the following format 'YY-MM-DD GMC Doctor's History'.

### **DBS Checks**

If a GP has signed up to the 'Update Service' below, we can accept their original DBS as long as we check the certificate numbers match. The DBS must be clean of convictions, and accompanied by a signed declaration of fitness to practice by the GP before they can be approved for work within IUC. We would need to see copy of the original DBS to confirm there are no convictions and also check the status of the current check as below.

### **Update service checks**

The DBS update service allows a person to pay a yearly fee so that their DBS is continuously updated. If a GP is signed up to the update service you can check the status of their DBS online. To check the status, follow this link: DBS CRSC (crbonline.gov.uk) and enter the GP's details then press search. Take a screenshot of the results, with the date clearly visible, and save this in the GP's file.

If the GP is not registered to the Update Service, we will need to find out if they are currently Employed or a Locum and how long they have been working in this role – this can usually be found on their CV.



If the GP currently works at a BNSSG practice as either a Partner or Employed member of staff and they have been there >12 months then BrisDoc will usually accept a DBS certificate dated within 3 years (assuming the GP signs a 'GP Fitness to Practice' declaration). If they do not have a DBS certificate dated within the last 3 years, then BrisDoc can facilitate a new check via the UCheck link below.

If the GP is a Locum (i.e., not employed by a particular surgery) or has been employed by the GP surgery for < 12 months, or does not work in the BNSSG area then we can accept a DBS if it is dated < 6 months. If they do not have a DBS certificate dated within the last 6 months, then BrisDoc can facilitate a new check via the UCheck link below.

All DBS checks must be clean of convictions, and accompanied by a signed declaration of fitness to practice by the GP before they can be approved for work for BrisDoc. A copy of the DBS Certificate must be saved to the GPs folder.

In the event that a GPs DBS is not clean, a new DBS check may need to be facilitated by BrisDoc, this will depend on a number of factors for example 1) did the GP inform us their DBS would not be clean? 2) what is the reason for their conviction? 3) How recent is their latest DBS check? This is decided on a case-by-case basis, if you receive a DBS certificate that is not clean, please speak to the DMD.

Please see Appendix 3.0 for guidance on DBS checks.

**BrisDoc must not pay for DBS checks for Independent GPs.** This can be done by going to <a href="https://www.hr-platform.co.uk/app/login/ucheck">https://www.hr-platform.co.uk/app/login/ucheck</a> and logging in (Workforce will need to set you up with your own login) Once logged in go to the top right corner and select 'Check a NEW applicant' complete section 2 with the first name, surname and email address. Ensure that you select the 'charge applicant for check' toggle button underneath then select 'send'. This will send an email to the applicant from UCheck, they will then be required to fill in a form with their personal details. Ask the GP applicant for a copy of their Passport, Driver's License and a Utility Bill from the last three months (Please refer to the DBS document guidance on UCheck for other documents that can be used. You will receive an email notification once the DBS application form has been completed by the GP applicant. You will need to verify that you have seen the appropriate documentary evidence and will need to enter the passport/ driving license number and verify that the utility bill address matches their home address.

### **Right to Work**

It is essential that we see evidence of the GPs right to work in the UK. A (Current or expired) UK passport or a current Visa will be suitable. Add the date of the check to the 'GP Checklist' file in their folder. A letter confirming Settlement Status is also acceptable. On occasion you may need to check the GPs Right to Work / immigration status via a share through the. Gov website. For this you will need to check over the information supplied on the link, and cross check with the information received from the GP. You will also need to check the person arriving for shift matches the image on this link. Download and save a copy to the GPs folder.

Please speak to the Workforce Team if you are unsure about Right to Work documentation. Or visit <u>https://www.gov.uk/government/publications/right-to-work-checklist/employers-right-to-work-checklist-accessible-version</u>



### Hepatitis B/ MMR Immunity

Immunisation reports may be provided from Hospitals/ Occupational Health/ GP practices amongst others. They are often presented differently and can be confusing. Many reports will use simple language such as 'Immune' however others will use different terminology. Please speak to a DMD regarding an Immunisation Report if you are not sure. If the immunisation report indicates that the GP is not immune, discuss with the DMD, who will risk assess as appropriate. **Two doses are needed for evidence of immunity**. If the GP does not have appropriate proof of necessary immunity, they must be recommended to have an MMR and Hep B vaccination. Save the immunisation report to 'GP checks' subfolder in the following format 'YY-MM-DD Immunisation Report'. Add the date of the check to the 'GP Checklist' document in the GPs folder.

Please see Appendix 3.1 for guidance on Immunisation terminology

### **Covid Vaccination**

It is recommended that all GPs to have at least two doses of the Covid vaccination, but this is NOT essential to start work with BrisDoc. Covid vaccine information is saved in the 'GP checks' subfolder. Add the date of the check to the 'GP Checklist' document.

### Indemnity

Please ensure that GPs provide evidence of their Medical Indemnity. This will usually be in the form of a letter from the Indemnity Provider to the GP listing their 'membership period' for the next year. View the dates and ensure that the GP is in date (and is likely to remain in date for their induction date). Ensure the Indemnity covers them for the service they will working in for BrisDoc I.e. Out of hours sessions. Add the date of the check to the GPs Checklist.

Rarely, some GPs state they do not plan to get personal indemnity cover so it is imperative to emphasize the importance:

Information to send to locums who signal they do not plan to get personal indemnity cover We VERY STRONGLY recommend that you take out personal indemnity cover for out-of-hours work. Although it is rare for cases to escalate to an inquest, the CNSGP (NHS cover) would NOT provide you with any support or representation at an inquest, GMC investigation or give any support with responding to a serious incident / complaint. Fees to cover representation at an inquest could easily be £60,000 or more. Without personal indemnity cover, you would be personally liable to pay this fee.

It's worth noting that the costs of personal indemnity are relatively low (they have reduced very significantly in the last few years), and are all tax deductible for locums.

### **CEST Employment Checks**

Please ensure that the employment status of all GPs, is checked via the Government CEST tool. This check will determine whether the GP is classed as employed or self-employed for tax purposes. The CEST tool can be found here - <u>https://www.gov.uk/guidance/check-employment-status-for-tax</u>

The CEST check should be completed after all other compliance checks have been completed, after DMD approval and before handing them over to the Training Support team. Please send a copy of certificate and answers to the GP to be reviewed and save a copy in both the GPs folder

and the 'CEST' folder located here: S:\Workforce - Non-Employee\CEST. Add the date the check is carried out to the GPs Checklist.

Please see Appendix 3.2 for guidance on CEST Checks. For any further support in completing the CEST please visit; <u>https://www.gov.uk/hmrc-internal-manuals/employment-status-manual/esm11000</u>

### **Final Checks**

Once the file is fully complete (excluding the CEST check), the file should be sent over to the DMD for final approval. Please send the name, contact details and brief overview (e.g. current employment, outstanding documentation) of the GP to the DMD via e-mail once you have the following in the GP file:

Evidence / Checks required	Subfolder
If remote working; Remote Worker Compliance	GP checks
CV	Main folder
Clinical reference x 2	References
Indemnity	GP checks
NHS smartcard	GP checks
DBS (uCheck summary, original DBS / Yearly update)	GP checks
Signed Confidentiality Agreement and Fitness to Practice Declaration	GP checks
GMC check	GP checks
Performer's List check	GP checks
Right to Work (Current or expired British/ EU passport, or current Visa)	GP checks
Photo for ID Card	GP checks
Measles, Mumps, Rubella, HepB, Covid-19 (Recommended)	GP checks
Basic Life Support / Resuscitation (dated within 12 months, F2F)	Training
Safeguarding Vulnerable Children Level 3 (dated within 3 years)	Training
Safeguarding Vulnerable Adults Level 3 (dated within 3 years)	Training
Awareness of Mental Capacity Act Training (dated within 3 years)	Training
Spotting the Sick Child	Training
CEST Employment Check	GP checks (& CEST folder)
Email / evidence of discussion, if anything is non-compliant/ unusual.	Main Folder or new 'Confidential' folder if issue is relating to DBS/ health issue.

The DMD will then inform you if there is anything requires further investigation. If there is nothing further, you will be able to handover the names and contact details to the training officer who will arrange induction.

### DMD threshold

Please use the following checklist to flag any concerns with the Lead GPs / DMD.

	Alert DMD if:
Performers list	No performers list registration in England
GMC registration	Evidence of any previous GMC hearings
CV	No CV, or Any evidence the GP has not worked as GP > 2yrs
DBS	Any recorded criminal convictions recorded Does not comply with DBS Policy
References	If only 1 (or none) reference Or, Any "averages" or lower in reference, or reference to "not" re-employing GP. Need for "supervision, or mentoring"
Confirmation of Indemnity	Not provided
Evidence of resus training within 12 months	If >12 months ago
Child protection training within 3 yrs	If >3 yrs ago
Mental capacity act training (within 5 yrs)	lf >3yrs
Hepatitis B / MMR status	If not present then recommend they seek occupational health advice, and notify DMD
Fitness to practice	Any reference to fitness to practice GMC hearings

# **Remote Workers**

All Remote Workers outside of the UK please follow appendix 3.3.

If a GP is onboarding as a remote worker, we will need to share the details including their name and where they will be working i.e England / another country, with the SevernSide Operational leads: Please email <u>iuc.managers@nhs.net</u> and let them know there is another GP to add to their Remote Workers Log (They can be copied into the Handover email to the Training Support team, with a line for their attention).

All remote workers must be compliant to Remote working specifications as set by the programme and service director. This document should be sent to the GP as per appendix 1.1

Additional background information for clinicians working for SevernSide IUC from abroad

Remote working GPs use exactly the same clinical systems including Adastra for logging clinical notes and prescribing, and access to the longitudinal patient record via EMIS to support patient care. Clinicians can prescribe electronically, arrange appointments and home visits, video consult/ receive photos and refer onwards (if required) using the same processes as on-site clinicians. Clinicians can also access real-time advice from a senior clinician and the operational team if required, as well as access all of the service/ system specific clinical pathways information and policies/ SOPs while working abroad.

All calls are recorded, as they would be for clinicians working in the UK

Remote worker clinicians are subject to the same clinical audit processes as UK-based clinicians

Each country is approved on an individual basis by BrisDoc's DPO

Commissioners/ the ICB support this way of working to support patient care

Clinicians must meet our minimum stated requirements for working from abroad, including a secure internet connection, private working space and phone

All clinical work is undertaken via remote access to the BrisDoc servers in the UK. As such no data is transferred or stored outside the UK

All GPs working from abroad have to meet the requirements stipulated for all GPs working for the IUC service, including meeting the requirements of appraisal/ revalidation.

### **INDUCTION**

On approval by the DMD all new and returning GPs will be sent from the Clinician Relationship Coordinator to the Training Support Coordinators via email, who will contact them to send both the clinical induction video and arrange a first live induction shift which is supported by the Training support Coordinator's and the Clinical Coordinator. The clinical induction video will be shared via email and should be watched prior to starting and can be found on the clinical tool kit. If a GP hasn't worked in IUC for over 2 years they may also be asked to view the induction video- and be offered a supported live induction shift.

### **Induction and Live**

Following handover of new and returning clinicians, the training support coordinators are responsible for contacting all approved clinicians, initially via email, (Appendix 4.0), which is then followed by sharing the induction video link and arranging a live induction date based on availability to work. It is then the training support coordinators responsibility to notify the CRC, digital and Rota teams of each clinicians start date to initiate clinician set up.

Full areas of responsibility are detailed in section 3.2 Once induction attendance is confirmed names are added to the clinical Induction calendar on S:\Workforce - Non-Employee\

### **Preparation for Induction**

The following will need to be prepared prior to live induction. In order for the person/team responsible to suitably prepare their aspect of the induction they will need information from the CRC. Ensure that all information is sent to the appropriate people in a suitable timeframe ahead of the induction.

Once a GP has been onboarded their details must be sent to <u>brisdoc.guardian@nhs.net</u> including if they are a re-start, NQGP or new. This is the responsibility of the Rota Team. Additional information on the clinical guardian team can be found at: <u>https://www.clinicaltoolkit.co.uk/meet-the-clinical-guardian-team/</u>



Person/Team	Area of Responsibility	Information required (via email)	Provided by	Timeframe
Training Support	<ul> <li>Send Induction Video</li> <li>Arrange first shifts</li> <li>Send induction invite and training links</li> <li>Following induction hand over to Rota team</li> </ul>	<ul> <li>Notify CRC and digital of induction booking</li> <li>Notify Rota team for shift booking including Full name, email address and telephone number</li> </ul>	TSC	ASAP
Clinician Relationship Coordinator	<ul> <li>RotaMaster set up</li> <li>Send RM login details</li> </ul>	Information from GP Folder Information from TSC first shift	CRC	After confirmation of induction booking
Digital	<ul> <li>Adastra /EMIS set up</li> <li>Smart Card Link</li> <li>(Smart card required)</li> </ul>	<ul> <li>Full name</li> <li>Email Address</li> <li>Indemnity number/provider</li> <li>GMC number</li> <li>Smart Card Number</li> </ul>	CRC	Following RotaMaster set up
Rota Team	<ul> <li>ID Card</li> <li>Activate CG account</li> <li>Hand over to Clinical Guardian Team</li> </ul>	<ul> <li>Photo, and Title</li> <li>If SEGP is new, a re-start, or a QGP</li> </ul>	CRC N/A	Following confirmation of induction After first shift

### **IT SET UPS**

Immediately after Training support has confirmed a GP has been booked in for their Live Induction RotaMaster, Adastra and EMIS accounts should be set up for GPs attending. The Training Support Coordinator will notify the CRC to initiate this process. The CRC will only set up RotaMaster. EMIS and Adastra is the responsibility of Digital, refer to the table in 3.2 & 4.2 below. Please be aware Digital has timeframes to set up Adastra and Emis for GPs: Adastra & Emis (base workers) = 3 working days and Remote GPs = 5 working days.

### RotaMaster set up

The GP should be added to RotaMaster once they have been booked into their Live induction (Training Support will send an email to the CRC to confirm this). This will allow for sufficient time to generate login details and to ensure they are able to book shifts once approved. If a GP does not attend induction archive their account. If you need guidance for RotaMaster please contact the Rota Team Manager.





IUC Clinical ROTA -> Locums (Inducted in 2022) 2 2. 🚔 🔞 🥢 ∕ (5) Click to add new GP record Add New Person And complete the fields; Main Detail Title = Dr 2 Enter the name and basic details of the new person, then click save. First name Surname Title First Name Gender Middle Name Surname DoB Date of Birth . Gender Email address (main) 0 Contact Detail 0 Mobile number (main) Email Address Ø Mobile Phone GMC Registration Number Θ Home Phone Inc. Renewal date A Other Detail Start date (todays date) 0 Start Date Registration Body -Subtype – add Locum 0 Registration Numbe Continuous Start Date 0 Other settings are auto Renewal Date Leave Year Start • 01-Jan generated and must stay the same 0 **Rota Settings** 0 Rota Group IUC Clinical ROTA Role 000 Теат Locums (Inducted in 2022) -Subtype -Θ 0 Save Cancel 0

Once the information above has been entered and saved, a profile for the individual will be created. You will need to enter the following information to their account.

#### Personal > Personal Details

Tick 'Locum'

Add ethnicity, disability and other personal details; This information can be taken from the 'Fitness to Practice'

#### Personal > Addresses

Add in the GPs address (ensure home address is selected)

#### Personal > Emergency Contact

Add GPs Emergency Contact information – this can be found of their completed fitness to practice form

Priority should be '1', add title, name and relationship to GP.

Add the mobile number on the contact's section & save.

#### **Employment > Employment Details**

#### **Employment > Compliance**

GMC information should have auto generated at the point of creating the GPs profile.

Add indemnity information; Company, Number, Renewal date and tick validated as we have checked this information is correct.

Add DBS information; Select Enhanced, add certificate No, tick validated.

Add Performers List information; Add Performers number, and the date the check has been carried out. It is good practice to check this again on the date of adding the GP to RotaMaster.

Post

Add 'IUC Doctor – Self Employed – Locum' for IUC OOHs, System CAS & WDPL

Add 'PS SE GP' for Practice Services

Next you will need to select the appropriate post & add change Primary Line Manager to 'Rota Team

#### Post > Contracts

Double click into the active contract > Under Financials, double click the active contract This will bring up the below box, where you need to ensure Employment Type is 'Non-Payroll' & Pension Type is 'Pensionable: SOLO' > Save



Edit Payment					
Employment Type	:	Basis of Pay		Finance Typ	
<ul> <li>Payrol</li> <li>Employed staff pa directly on compar payroll</li> </ul>	Non-Payrol      Independent Contractors     submitting own invoices     not employed directly	Standard Pay     Salary & Pay per shift		Reference Only	
Information		Pay per shift			
Effective Date	11/01/2021 - 00:00 0	Pay Rate Group Pattern	Choose a Pay Rate Group Patt	em - ×	
End Date	- × 1	Salary			
Arrangement	Choose an Arrangement -	Gross Annual Salary	• £0.00	Calculate	
Reason for Change	Choose a Reason +	Pro-rata	• £0.00	7	
Previous Pay	£0.00	Basic pay per month	• £0.00		
Pension & Invoici	ng Settings				
Pension Type	Pensionable: SOLO +				
Personal Contribution	0 0 5%	Handling of any shift work carried out			
Added Years	0 ‡ %	Pay all shift work as overtime via payroll			
AVC	0 0 %	Only pay shift work earnings in excess of basic pay as overtime via payroll			
Expenses	0 0	No shift work is payable			

#### Rota > Multi Group Rota

This will be different depending on which service the GP would like to work in. To move these from 'Available Rota Groups' to 'Rota Groups This User Belongs' scroll down and select the relevant group then press the green arrow to move across.

Personal Details × Multi Rota Group ×

Rota Groups This User Belongs To

R Comm 1. ALL Clinical inc Registrars

R Comm 2. Self Employed Clinician

R Comm IUC ALL Clinicians

R Comm IUC Self Employed GP

IUC Clinical ROTA

- IUC OOHs you will need to select these options
- System CAS should have these options
- plus 'R comm System CAS' & 'System CAS Clinical Rota'
  WDPL; IUC PL Clinical Rota
- BMC; BMC Clinical Practice Rota
- CKMP: CKMP Clinical Rota
- Homeless Health; HSS Clinical Rota
- Remote Workers; IUC Clinical Rota

#### Rota > Web Settings

This will be different depending on which service the GP would like to work in.

To move these from 'Available Rota Groups' to 'Rota Groups This User Belongs' scroll down and select the relevant group then press the green arrow to move across.

Zone Whitelist IUC OOHs select these Web Settings # 🏠 🗲 -System CAS; System CAS – Severnside, System CAS Whitelisted Zones WDPL; IUC Osprey IUC Clevedon Broadmead Medical; BMC, HSS Compass Centre, HSS Outreach, **IUC Cossham** HSS St Mungo IUC Greenway Charlotte Keel; CKMP IUC Knowle Remote; IUC Home Triage Only, IUC Home Triage IUC Osprey IUC Weston



#### Unarchiving / Unsuspending on RotaMaster

In cases when a GP has previously worked with BrisDoc they will likely already have a RotaMaster account set up. This account may have been archived or suspended and will need to be unarchived or unsuspended when the GP returns to work.

To check whether a GP has been archived or suspended;

Login to RotaMaster

Select 'Personnel Manager'

Select the 'People + Search' tab (to the left of the 'RotaMaster' tab)

Enter the GP's name into the search bar and select the 'search' button at the bottom left of the screen. If the GP has an account it will appear on the screen

Click on the GP's account

If the GP's account has been archived or suspended it will be highlighted as the GP's 'Status:'

If the GP has been suspended the GP's status will be 'SUSPENED' highlighted in yellow.

If the GP has been unarchived the status will be 'HIDDEN' highlighted in red.

		ID: 7620 Team: Locums (Self Employed)	Payroll ID: Status: SUSPENDED	Payrol ID: Status: HIDOEN
etais ×				
		Contact Details		
• M • D	r	Address (No address added currently, for this person) Address Une 1: Address Une 2: Address Une 2: Tomi: Postcode:		
th 0	v ×	Contact Information Home Phone:		

To unsuspend a GP, exit the GP's account by clicking the 'x' to the right of their name at the top of the screen to the left of 'Personnel Manager'

- > Select the GP's account so that it is highlighted in blue
- Select the unsuspend button (seen below) and select 'Yes' in the pop-up box.

To unarchive a GP follow the same process but instead of selecting the 'unsuspend' button, select the 'Unarchive' button (see below) > select 'Yes' in the pop-up box.



Unsuspend Button

+ 🖊			2	20	-
	Name				М
•	Examp	de, AAA			
/					

Unarchive Button



### Sending RotaMaster login details

Once you have set up the GPs account on RotaMaster, login to the RotaMaster Admin Web service to send the GP their login details.

Click on 'Messaging'							
Click on 'Reminders & Reque	sts' Remind	ers & Requests					
Select the type as 'Send	Message Type						
Login Details'	Туре	Please select *					
Choose the Rota Group they under.	sit <sub>Rota Group</sub>	×IUC Clinical ROTA					
Select the person you wish to send login details for. You are able to add multiple at once.	) Person	× Test Test					

Click 'Send' in the bottom right corner.

The user will then be prompted to create an account.



### **Adastra and EMIS**

Both New and Returning GPs will need to be set up with Adastra and Emis logins. Add GPs information to the Adastra & EMIS Action log (S:\Workforce - Non-Employee\IT set ups) so that usernames and passwords sent to GPs in time for their first shift by IT Support.

Once added to the Adastra & EMIS Action Log, send an email to; <u>digital@brisdoc.org</u> to inform them a GP requires setting up.

### **RETURNING GP**

When a GP expresses an interest in returning to BrisDoc within 2 years of working for us, create a new file for them in 'Recruitment in Process' and copy their documents from their inactive file into this. All inactive GP files can be found in S:\Workforce – Non-Employees\Inactive GPs.

It is essential that you collect the following updated documents from returning GPs:

CV

Medical Indemnity

**Training Certificates** 

Signed Fitness to Practice Declaration and Confidentiality Statement (Re-send Terms of Engagement for them to view)

GMC and Performers List Checks

CEST Check

If a returning GPs DBS is dated >3 years it may be necessary for them to complete another check. If this is the case, please contact the DMD to discuss whether this is necessary. It may not be necessary to seek updated references. Please consult with DMD to check on paperwork required in each instance.

# ALL RETURNING GPS MUST SIGN A CONFIDENTIALITY STATEMENT AND FITNESS TO PRACTICE DECLRATION

Returning GPs may be offered a conversation with a clinical lead depending on how recently they worked and previous experience with BrisDoc. They should also be advised to attend a Clinical Induction unless DMD suggests otherwise.

### **MATERNITY LEAVE**

When a GP goes on maternity leave, they won't have an appraisal and typically won't be up to date with their training whilst they are off. For GPs who have notified us they are going on maternity leave, they will have a year until they need to book a shift. The only checks that need carrying out for GPs returning from planned maternity leave within a year are GMC and Performers List check (this is back-dated from the last shift the GP worked). GPs may be offered a conversation with a clinical lead to discuss coming back to the service and offered to attend a Clinical Induction.



### SALARIED TO INDEPENDENT GP

f a GP wishes to work in IUC, note that they cannot be just employed in IUC. There are two options:

They may remain employed in the practices and work in IUC as overtime.

They may resign/ be terminated from their employed role at BrisDoc and work in IUC on a selfemployed basis.

In the event of both options their employee file must be passed to the DMD for review. The DMD will indicate if they are satisfied with the compliance checks on file and if any new checks are required. Once the appropriate checks have been undertaken and the DMD gives their approval, the GP is to be invited to an IUC induction if they have not attended one previously or within the last year. Depending on whether or not they wish to remain employed by BrisDoc their post will need to be changed on RotaMaster. The Rota Team manager will be able to help with this.

It is essential that you collect the following updated documents;

Medical Indemnity

Signed Fitness to Practice Declaration and Confidentiality Statement (Re-send Terms of Engagement for them to view)

GMC and Performers List

**CEST Check** 

### **PRACTICE SERVICES GPS**

If a GP wishes to work as an independent GP in practice services, they are to have the same compliance checks but their file is to be passed to a practice manager or the DMD for Practice Services for approval. Once approved, they can be added to RotaMaster, in a similar way to IUC independent GPs but must be added as a 'primary care' locum, the project manager can advise on how to do this. If a practice services independent GP wishes to also work in IUC they will need two posts, please consult the project manager for advice on RotaMaster.

### **Practice Services GPs – NON-EMPLOYEES**

Practice services GPs who are not employees get paid differently. They are required to invoice BrisDoc, by providing the following details:

Invoice number, Address, Bank Details, Details of when worked, If in the pension scheme also needs to include the following: Total earnings for this invoice, 90% of total earnings for this invoice,14.38% employer contribution for this invoice The practice manager at the practice they are doing work at will approve the invoice and confirm the shifts that they worked. They will not book shifts through RotaMaster as IUC GPs do, consult the Rota Team/ Project Manager for more information about this.



### **RECRUITMENT CHECKS SPREADSHEET**

The Recruitment Checks Spreadsheet will be the responsibility of the Clinician Relationship Coordinator. This spreadsheet will be used as a log for GPs going through the onboarding process. Data is auto generated on to the 'Analysis' and 'Graphics' tab which will be useful for the SEGP Onboarding Meetings. There will be GPs who get in contact and never complete the onboarding process. This is usually because the GPs circumstances have changed.

The following 6-week process should be followed for contacting GPs who are 'In Progress';

Two weeks since the initial point of contact: E-mail the GP to see if they are still wanting to work with us

Two weeks after the above e-mail Phone the GP to see if they are still wanting to work with us

Two weeks from the above phone call E-mail the GP to say we are taking them off of our list and express that the door is always open for them to join us, should their circumstances change.

Once the 6-week cycle of no contact is complete (or if the GP expresses that they no longer wish to go through the onboarding process), column 'B' on the spreadsheet will need to be changed to 'Cancelled'. And date added in column 'T'. This will change the colour of the cells grey & will not be included in the data for onboarded GPs.

Please see below the template for each of the emails required in the above process;

#### Two-week email;

Dear Dr XXXX

Following on from your initial email, I am getting in touch to see if you are interested in working for BrisDoc?

If you feel a conversation with a clinical member of the team would be beneficial, to discuss the options available in a little more depth, please let me know & I will arrange for one of the team to contact you.

Alternatively, if you would like some help with the documentation required, I would be happy to help.

If your circumstances have changed, please let me know and I will remove you from our list. We would like you to know the door is always open to join the BrisDoc family, should your circumstances change. We would welcome your interest and expertise at any time. Please do not hesitate to get in touch.

#### Six-week email;

Dear Dr XXXX

As we have not heard from you for a little while, we will remove you from our list of GPs looking to join our service at present.

If you are now ready to onboard, please let us know & we would be happy to discuss the options available.



If not, we would just like you to know the door is always open to join the BrisDoc family, should your circumstances change and we would welcome your interest and expertise at any time. Please do not hesitate to get in touch.

# Appendixes





Version 13. Created 19/01/2023



#### Appendix 2 - Introductory Emails

Dear xxxxx ,

Thank you for contacting us about working with Brisdoc and SevernSide. BrisDoc is committed to providing excellent patient care; it's a great place to work, with a friendly team, plenty of support and great opportunities to develop. BrisDoc's practices and urgent care services (more information below) mean we are ideally placed to offer diverse, interesting portfolio roles and work. You can join the BrisDoc family on an employed or self-employed/ locum basis, and we're very happy to talk through all of the options and opportunities in more detail. I have copied in my colleague XXXX, who is one of the Lead GPs/ Deputy Medical Directors and would be delighted to talk through these options and what works best for you.

We have a number of options available for you.

1. Salaried/Employed SevernSide IUC GP 'Out of hours' clinical work (weekday evenings, weekends and overnight)

**Core Benefits;** Competitive salary, NHS pension, 30 days annual leave pro rata (rising to 32+ with length of service), Up to three Annual Discretionary Bonus's, Paid training time /study leave, Facilitated appraisal and mandatory training, Work record to support clinical appraisal and revalidation, Opportunity to have a mentorship & to become a mentor.

- You can work your hours flexibly on our bank. You are not committed to set shifts and can choose when and where you work to suit your lifestyle, or
- A rolling rota of regular shifts including eight or more clinical hours per week. Full details and the application forms are here.

#### 2. Self-employed/Independent Contractor SevernSide IUC GP

You can also work on a self-employed basis as an independent contractor with shifts available across the out of hours period, including weekday evenings, weekends and overnights. To do this, you will need to send these documents to workwithus@brisdoc.org, and we will then invite you join a SevernSide induction session. If you have worked with us within the last 12 months, please make this clear as it is likely we can process things much more quickly.

3. Remote working as a SevernSide IUC GP (weekday evenings, weekends and overnights)

We also have opportunities for clinical work to be undertaken from home/remotely. You can do this as a self-employed/independent contractor, or as an employed GP. Please bear in mind that remote working is only possible on a Microsoft computer (not a Mac). If you are interested, please contact workwithus@brisdoc.org.

#### 4. Self-employed/Independent Contractor SevemSide Weekday Professional Line GP

The "Weekday Professional Line" (WDPL) is part of the SevernSide service and operates from BrisDoc Headquarters (Osprey Court) <u>Monday- Friday 0800-1830</u>. The WDPL takes calls from community healthcare practitioners across BNSSG seeking urgent advice and admission for adult medicine. The team also manages some advice calls from NHS111. Independent/locum GPs are sought to cover annual leave in the employed clinical team. If you are interested, please email <u>workwithus@brisdoc.org</u>

#### 5. System CAS:

As part of the BNSSG drive to get patients the "right care, by the right person, in the right place, first time". The System CAS is a multidisciplinary team of clinicians (GP's, ED consultants, Paediatricians, Mental health workers, and Urgent care Nurses) working at Osprey court Monday to Friday 2pm-10pm. This work is focused on the prompt remote assessment of NHS 111 cases that have resulted in an "attend ED" outcome, or "999 Cat 3 or 4" outcome. We are seeking GP's to fill these roles either as employees or self-employed "locum" work.

Please let me know whether you are seeking Employed or Self-Employed and which service(s) you are interested in. We look forward to hearing from you.

Kind regards



#### Appendix 2.1 - 'Follow Up' Email

#### Contract For Services - 'Follow up' Email

Once a GP has expressed an interest in self-employed work, please send them the following email.

The following documents need to be attached; S:\Workforce - Non Employee\Master forms\GP Fitness to Practice Declaration.docx S:\Workforce - Non Employee\Master forms\IGMP Terms of Engagement (Feb 2021).pdf S:\Workforce - Non Employee\Master forms\Independent GP Confidentiality Statement August 2019.doc

\*\* If GP is looking to work remotely, please also attach the following document as ask them to confirm they comply with our remote working declaration

S Drive\Service Delivery Team\Remote Workers\Remote Worker PC or Laptop checklist

#### Dear Dr

#### **Contract For Services**

Thank you for expressing an interest in working for our Integrated Urgent Care (IUC) service (formerly known as Out of Hours). Since 2019 our IUC service has operated in partnership with Practice Plus Group (formerly CareUK) under the brand 'Severnside'. Our IUC service operates from seven bases across the three counties 24/7, the service comprises the clinical assessment service (CAS) which forms the telephone aspect of work, and the patient facing services which run out of hours.

BrisDoc also operates a breadth of services including GP practices, Weekday Professional Line and a Homeless Health Service.

If you wish to work as an independent GP in our IUC service, you will be given access to our booking website RotaMaster once your compliance checks are complete. On RotaMaster, you choose the sessions you would like to work. The value of the session we offer will be clearly identified on the website prior to you booking the session, but please be aware that all IUC rates include any employers and employee element of the NHS pension scheme. Please note there is no obligation on you to work any sessions, nor for BrisDoc to offer you any specific sessions; BrisDoc will offer sessions to all GP's who may be interested in working.

Once your compliance checks are completed one of our training support co-ordinators will contact you to share a welcome video from the clinical leads and to discuss dates for our live induction and your first working shifts. Our live induction takes place at Osprey Court (If you are working remotely, this can be done via Microsoft Teams) and consists of a systems induction followed by clinical consulting with both clinical and operational support on hand. The live induction is 4 hours and due to its practical nature we would suggest that you book it close to the date that you would like to start regularly working with us.

To comply with HMRC regulations <u>only the clinical consulting part of the live induction will be paid</u>, which is typically a minimum of 2 hours. If you have recently worked within IUC within the past 2 years, please let us know, as we may already have copies of some of the necessary paperwork for you within our archived files, and you may not be required to attend another induction session.



Please see attached our Terms of Engagement for our Independent/Self-employed GPs, our confidentiality statement and our GP fitness to practice form. Please can you review the information and sign the Confidentiality statement/ GP fitness to practice form and email these forms back to us.

\*\* Only if GP has request remote work \*\* As you have expressed an interest in working remotely, please confirm you comply with our Remote Working document (attached)

Please may we kindly request that you provide the following documentary evidence:

- Curriculum Vitae including the names and email addresses of <u>two Clinical Referees</u>. Ideally both
  referees should be clinician line managers/employers/leads. Where this is not possible, one referee can
  be a non-clinician line manager/employer/lead and one referee can also be a clinician colleague.
- A copy of your Medical Indemnity- work in IUC is covered by the state backed indemnity scheme, however we strongly recommend all independent GP's ensure they seek the higher level "professional protection" through your indemnifier, to cover your costs if called to GMC hearing/ coroners courts etc.
- Right to Work documentation (e.g Passport).

(without this we cannot provide you with the logins for rotamaster and adastra)

- Copy of your last DBS disclosure certificate and your DBS update service number.
   Please note we may facilitate a new check if your certificate is more than 6 months old.
- Evidence of MMR/ Hepatitis B and Covid-19 immunity (recommended but not essential)
- A photo/scan of your NHS Smart Card with the number clearly legible. If you do not have a smart card, please inform us and one will be set up prior to induction (for this process, 3 pieces of ID will be needed, as with DBS check).
- Head and shoulders photo for an ID card to be created

Please also complete and return the attached form "New starter payroll info form".

#### Please provide evidence of the following training:

- Basic Life Support/ Resuscitation training certificate (dated within last 12 months)
- Please complete & return the 'safeguarding evidence log' form please review the information carefully
- Awareness of Mental Capacity Act Training Certificate (dated within last 3 years) (This can be access via <u>HEE elfh Hub (e-lfh.org.uk) – you only need to complete the module</u> 'Mental Capacity Act and Adult Safeguarding')

Please note; If you are a newly qualified trainee GP, you may be able to evidence some of the above from your GP training. If you are unsure please contact us to discuss further.

Please note we need to complete compliance checks before any work can be booked and timing for this will depend on the availability of information. If you have any queries regarding the above or if you are not sure that you have the documentary evidence required, please do not hesitate to get in touch to discuss matters further. Please let me know when you want to start shifts with BrisDoc, this will help us complete the onboarding process in a timely manner.



#### Appendix 3 – DBS Check Flow Chart

If a GP has signed up to the DBS Update Service, this will overrule any of the below as long as;

- 1. The DBS is Clean
- 2. We are able to see the original DBS (Certificate numbers must match)
- 3. We check the status of the current DBS & ensure there are no changes registered.

All GPs must;

- Sign a Fitness to Practice form
- Be on the performers list





Appendix	3.1	-	Immuni	isati	on	Chart
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Hep B (HBV       3 doses       Has immunity         Or Antibody test       Detected       Has immunity         (If any doubt, or < 100       Present       Has immunity         please highlight to DMD)       Positive       Has immunity         Protected       Has immunity       Has immunity         Not detected       Not Immune       Not Immune         Not present       Not Immune       Not Immune	Immunisation	Doses	OR via Test	Terminology	Outcome
Or Antibody test       Detected       Has immunity         (If any doubt, or < 100	Hep B (HBV	3 doses			Has immunity
Or Antibody test       Detected       Has immunity         (If any doubt, or < 100					
(If any doubt, or < 100			Or Antibody test	Detected	Has immunity
please highlight to DMD)       Positive       Has immunity         Protected       Has immunity         >100       Has immunity         Not detected       Not Immune         Negative       Not Immune         Not present       Not Immune			(If any doubt, or < 100	Present	Has immunity
Protected Has immunity >100 Has immunity Not detected Not Immune Negative Not Immune Not present Not Immune			please highlight to DMD)	Positive	Has immunity
>100     Has immunity       Not detected     Not Immune       Negative     Not Immune       Not present     Not Immune				Protected	Has immunity
Not detected Not Immune Negative Not Immune Not present Not Immune				>100	Has immunity
Not detected Not Immune Negative Not Immune Not present Not Immune					
Negative Not Immune Not present Not Immune				Not detected	Not Immune
Not present Not Immune				Negative	Not Immune
				Not present	Not Immune
Not protected Not Immune				Not protected	Not Immune
MMR (Combined) 2 doses Has immunity	MMR (Combined)	2 doses			Has immunity
Or Antibody test (IgG) Detected Has immunity			Or Antibody test (IgG)	Detected	Has immunity
Present Has immunity				Present	Has immunity
Positive Has immunity				Positive	Has immunity
Protected Has immunity				Protected	Has immunity
Not detected Not Immune				Not detected	Not Immune
Negative Not Immune				Negative	Not Immune
Not present Not Immune				Not present	Not Immune
Not protected Not Immune				Not protected	Not Immune
Measles 2 doses Has immunity	Measles	2 doses			Has immunity
*If GP doesn't have MMR *	*If GP doesn't have MMR *				
Or Antibody test (IgG) Detected Has immunity			Or Antibody test (IgG)	Detected	Has immunity
Present Has immunity				Present	Has immunity
Positive Has immunity				Positive	Has immunity
Protected Has immunity				Protected	Has immunity
Not detected Not Immune				Not detected	Not Immune
Negative Not Immune				Negative	Not Immune
Not present Not Immune				Not present	Not Immune
Not protected Not Immune				Not protected	Not Immune

The main vaccinations we need to know if a GP has had are; HepB, MMR & Measles. This is because HepB and Measles are notifiable diseases.

These vaccines are recommended but not essential to work with us.

However, if a GP is not vaccinated against HepB or measles this should be highlighted to the DMD.



#### Appendix 3.2 - CEST Check Guide

#### CEST - (No login required)

The below should guide you on completing a CEST check.

This check should be completed after approval from DMD & prior to handing over to the Training Support team Use the following link; <a href="https://www.gov.uk/guidance/check-employment-status-for-tax">https://www.gov.uk/guidance/check-employment-status-for-tax</a>

Answers highlighted green will always be the same. Answers highlighted red could change, depending on the GP

<ol> <li>About you and the work</li> </ol>	
What do you want to find out?	If some work is classed as employment or self-employment for tax purposes
Who are you?	Hirer
Does the worker provide their services through a limited company, partnership or unincorporated association?	No (some GPs are a limited company)
Has the worker already started working for your organisation?	No

#### 2. Worker's duties

Will the worker be an 'Office Holder'?		No
3.	Substitutes and helpers	

Do you have the right to reject a substitute?	No
Would the worker have to pay their substitute?	Yes

#### 4. Working arrangements

Does your organisation have the right to move the worker from the task they originally agreed to do?	No, they would have to agree
Does your organisation have the right to decide how the work is done	Not relevant, it is highly skilled work
Does your organisation have the right to decide the worker's working hours?	No, your organisation and the worker agree
Does your organisation have the right to decide where the worker does the work?	No, some work has to be done in an agreed location and some can be the worker's choice

#### 5. Worker's financial risk

Will the worker have to buy equipment before your organisation pays them?	No
Will the worker have to fund any vehicle costs before your organisation pays them?	No
Will the worker have to buy materials before your organisation pays them?	No
Will the worker have to fund any other costs before your organisation pays them?	Yes
How will the worker be paid for this work?	An hourly, daily or weekly rate
If your organisation was not happy with the work, would the worker have to put it right?	Yes, unpaid but their only cost would be losing the opportunity to do other work

#### 6. Worker's involvement

Will you provide the worker with paid-for corporate benefits?	No
Will the worker have any management responsibilities for your organisation?	No
How would the worker introduce themselves to your consumers or suppliers?	This would not happen

#### 7. Worker's contracts

Does your organisation know who will be doing this work?	Yes
Does this contract stop the worker from doing similar work for other organisations?	No
Is the worker required to ask permission to work for other organisations?	No
Are there any ownership rights relating to this contract?	No
Has the worker had a previous contract with your organisation?	No
Is the current contract the first in a series of contracts agreed with your organisation?	Yes
Will this work take up the majority of the worker's available working time?	No
Has the worker done any self-employed work of a similar nature for other clients in the last 12 months?	No

Additional details to be added;

Name of person carrying out check / Name of GP, BrisDoc Healthcare Services, Independent GP Save copy to GP folder & CEST File. Send a copy to the GP & ask them to check the answers







#### **Related Documents**

Remote Worker PC or Laptop checklist - S Drive\Service Delivery Team\Remote Workers

IDTA Form master template - S Drive\Service Delivery Team\Remote Workers

Overseas Countries lists - S Drive\Service Delivery Team\Remote Worker



#### Appendix 4 - Email Template initial contact by TSC

Dear (Clinician Name)

Welcome to SevernSide IUC

My name is (NAME) & I am one of two training support co-ordinators that work within SevernSide IUC.

My role is to ensure you are booked to induction, have your first shifts allocated and ensure that you have any operational systems or clinical support that you may require.

It would be great to give you a call to discuss availability and arrange this with you over the next few days if you could share some availability with me?

I look forward to hearing from you.

(NAME)

Induction Link to be forwarded after confirmation of first shifts: https://www.clinicaltoolkit.co.uk/clinical-induction-sevenside-iuc/?highlight=+induction



# Change Table

Date	Version	Author	Changes Made
27/09/19	V2	CD	
31/10/19	V3	CD	
06/12/19	V4	МВ	Smart Card to requested docs, checking financials as part of Rotamaster set up, IT set up, Section 6 - Agency
13/01/21	V5	JG	Introductory email, induction process, RotaMaster set up
21/04/21	V6	CD	Introductory email tweaked, and IGMP terms updated
16/11/21	V7	JG	Updates to Re-Starters and NQGPs
02/02/22	V8	JG SE	General update on SEGP onboarding process, IT set ups and induction process
10/05/22	V9	JG	Compliance checks and processes review and update
17/05/22	V10	CS	Update Appendix 1 to include option 5 – System CAS
03/07/22	V11	CS	Review of process & SOP, particularly; Performers List, GMC, DBS, CEST Checks, Remote working and Returning GPs. Supporting documents added as appendices
09/12/22	V12	NL	Digital timeframes added for GP setup & additional info for overseas remote workers added
19/01/2023	V13	NL	Safeguarding training wording on email template changed, Remote Workers log added to overseas remote working flowchart, sending RotaMaster login details added to section 4.1
03/02/23	V14	NL	Maternity leave added, payroll info form added to 'contract for services email' & Appendix 1 of process overview
31/05/23	V15	NL	Various updates in the following sections: references, MMR, training and indemnity. 'Contract for services' email updated reference & safeguarding training sentence