



Suspended Doctors – Payments and the Effects on a Practice

Department Title

Payments to Doctors, Suspension from the Performers List and Effects on a Practice

In the payments system for a GMS/PMS practice the income is based on patient numbers. Under GMS and PMS a practice is free to employ any suitably qualified person to provide the services to patients. Thus a 20,000 patient practice receives a fixed income and the service can be delivered by 20 doctors and no nurses or one doctor and twenty nurses. It follows that if a doctor leaves or is unavailable for work the practice income will not change.

Internal arrangements for paying partners and staff are irrelevant, but if a partner ceases work in a situation where the partnership agreement precludes that partner from receiving remuneration, then that portion of the partnership profit is available for other purposes including the employment of locums etc. This would apply where a doctor is suspended from the Performers List

If the practice is not be receiving “locum payments” under the SFE there appears to be no constraint on whom a practice employs as locums to provide services to patients. It might want to employ another nurse instead or a combination of doctor and nurse. There also would be no constraint on paying a part-time partner to perform additional sessions. The latter may produce accountancy problems in that the part-timer who has taken on the additional work appears to have drawn a greater share and this can upset capital accounts etc. The practice accountant can usually sort this out.

At the same time the partner who is suspended from the Performers List will receive payment from NHS England Area Team under the Suspended Doctors Directions which will, in general terms, amount to 90% of the previous year’s earning and should include all sources of NHS income. NHS income would generally be defined as pensionable income within the NHS. Effectively the doctor is paid by the Area Team while suspended and the partnership has that doctor’s share of the profits to expend on locums. The partnership may not make a profit at another partner’s expense.

The doctor who is suspended from the Performers List is still a partner and does have a number of rights. There is no inherent reason why he should not meet the practice manager or partners but depending on the nature of the problems should not have access to NHS prescription forms nor take part in any decision making in respect of NHS patients nor have access to their notes. The doctor should not give any advice about NHS patients. There will be other non-medical practice business which he/she would have a right to know about and perhaps take decisions on. For example, if you were about to purchase a carpet for the staff room the doctor may have an interest because he may have capital in the practice.

Some practices also consider “suspension” from the partnership but unless the partnership agreement provides for this such an action would be open to challenge.

It is most important to stick to the provisions of the partnership agreements. Discussion, understanding and support is always the best approach and it keeps the air clear and allows for a happier comeback when that time occurs. The Area Team should offer support and mentorship.

Suspension is a fluid situation and no doubt you will need to review arrangements as events unfold.



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