

## **Primary Care Services**

### **GP Indemnity Costs Policy Version 1.0**

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Ratified By	Directorate Management Team Meeting
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#### Version Control Summary

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1.0	April 2023	Dr Vaishali Ashar & Irfaan Ibne	Based on: NHS England- <a href="https://www.england.nhs.uk/gp/investment/indemnity/">https://www.england.nhs.uk/gp/investment/indemnity/</a>  The British Medical Association- <a href="https://www.bma.org.uk/advice-and-support/medical-indemnity/medical-indemnity/state-backed-gp-indemnity-scheme">https://www.bma.org.uk/advice-and-support/medical-indemnity/medical-indemnity/state-backed-gp-indemnity-scheme</a>

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### 1. Executive Summary

This document is intended to set out arrangements for the reimbursement of indemnity fees to GP's working within the primary care directorate at East London Foundation Trust (ELFT).

The Government's state-backed clinical negligence scheme for general practice (CNSGP) came into operation on April 1, 2019. It covers clinical negligence liabilities arising from NHS patient care that takes place on or after that date.

Information about the scheme can be found on the [NHS Resolution website](#), which provides more detail on CNSGP and what it covers.

### **Cover for areas falling outside CNSGP**

It is also important to note staff may need to take action in relation to areas that fall outside of the scheme. For example, membership of a medical defence organisation or other indemnity providers will be needed for activities and services not covered by CNSGP. This includes **non-NHS** or private work, inquests, regulatory and disciplinary proceedings, employment and contractual disputes, and non-clinical liabilities.

This arrangement is comparable to the position of clinicians in secondary care who have cover with an MDO or other provider for services not included in the clinical negligence scheme for trusts.

### **Run-off cover**

Medical negligence is a “long tail business”, which means claims can arise many years after the incident. Many GPs will have had occurrence based cover, which means any incidents of clinical negligence that have an incident date during that indemnity.

Some GPs, however, have claims made or claims paid cover, which means the product only covers incidents either reported (made) or reported and concluded (paid) during a specific period.

It is important staff ensure they have the correct cover. Anyone unsure should contact their existing indemnity provider.

GPs and practice staff are urged to assure themselves of arrangements for all aspects of clinical practice and take time to understand the new scheme.

For further information please visit the [NHS Resolution website](#).

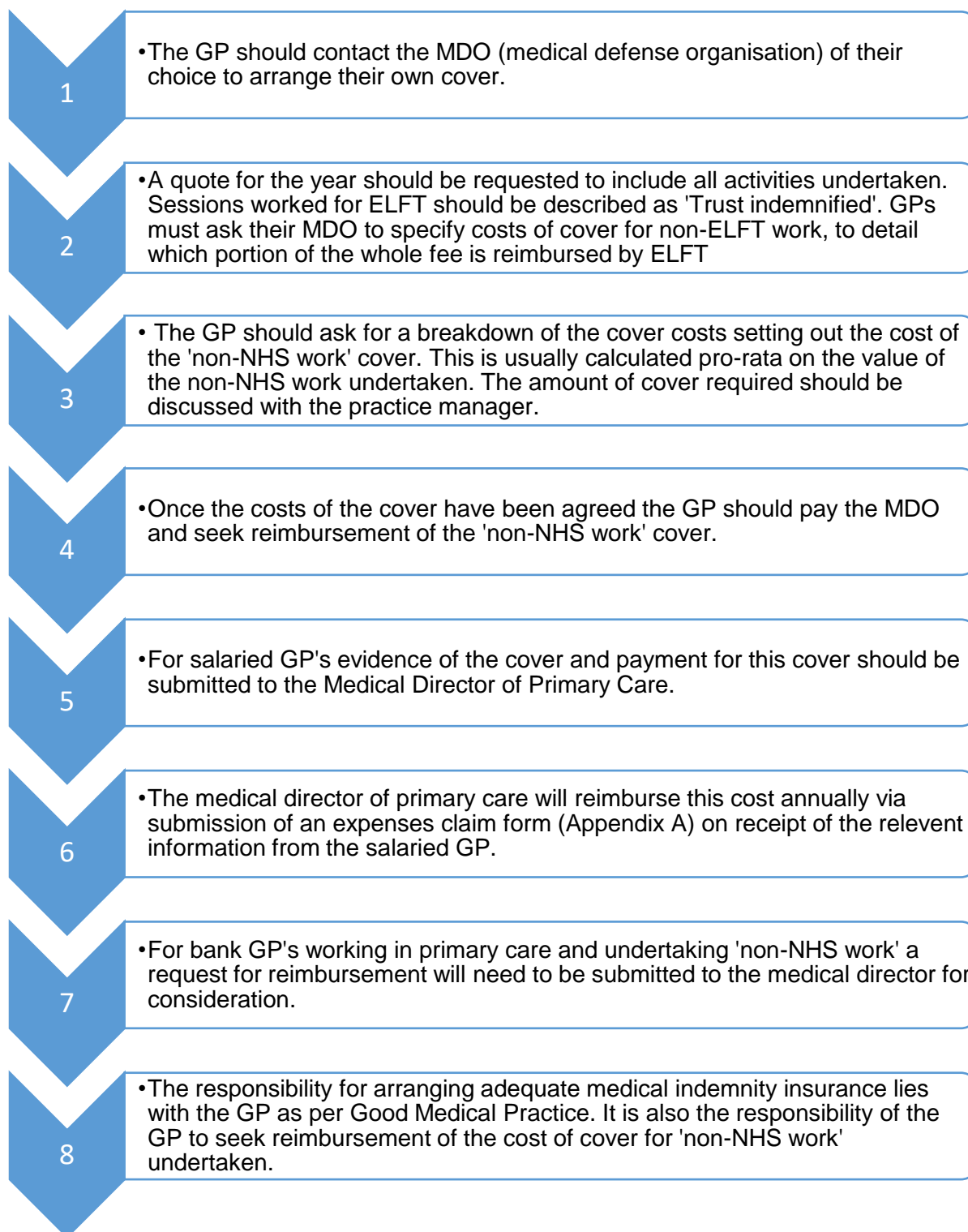
## **2. GP’s working for ELFT in the primary care directorate**

GPs working within ELFT primary care services will reasonably be expected to undertake **non-NHS work**; this work is part of day to day practice and will include activity such as writing insurance reports, performing HGV and adoption medicals etc. ELFT should reimburse the cost of this cover. The Trust indemnity scheme will cover any claims relating to clinical negligence for any work undertaken at the Trust. GP’s should maintain their own indemnity insurance for run off cover, medicolegal advice and any work undertaken outside the Trust.

## **3. GP’s working for other organisations (non-ELFT)**

Work done by GPs for other organisations such as agencies, other practices, out-of-hours, voluntary work etc. will not be reimbursed by ELFT and should therefore be included in the MDO breakdown of cover to detail which portion of the whole fee is reimbursed by ELFT.

#### 4. Covering Indemnity Costs for GP's- Process Map for Primary Care Services





CERTIFICATION OF EMPLOYEE	CERTIFICATION OF AUTHORISING OFFICER
<p>I certify that the total expenses shown overleaf were disbursed wholly, exclusively and necessarily by me in pursuance of my duties on behalf of my employer. No other claim has been, or will be made by any public body or me for expenses or allowances in connection with the business stated. Business use of my private vehicle is covered by valid insurance, which extends to business use and I am fit to drive, have a valid driving licence and MOT certificate, and I agree to inform my employer if there is any change in my status. I understand that falsification of this claim may result in summary dismissal in accordance with my employer's disciplinary policy.</p> <p>I confirm agreement to details of my claim (where appropriate) being submitted to Transport for London (TfL) for reimbursement purposes, and that should my employer's claim for reimbursement be rejected by TfL, then after further investigation by my employer my wage/salary may be adjusted and the sum recovered accordingly in a following pay period.</p>	<p>I approve the claim as detailed and authorise reimbursement of the amounts claimed. I confirm that this employee is authorised to use the car detailed overleaf on NHS business and approve the claim for mileage as detailed. I understand that the expenses claimed will be charged to my budget.</p> <p>I confirm the coded journeys E1 to E6 claimed overleaf are reimbursable from TfL in accordance with the congestion charges scheme regulations on rechargeable categories for vehicles used during the course of NHS duties.</p>
<b>SIGNATURE (Employee)</b>	<b>SIGNATURE (Manager)</b>
<b>DATE</b>	<b>PRINT NAME</b>
	<b>JOB TITLE</b>
	<b>DATE</b>

- GENERAL GUIDANCE NOTES**
- a) This form can only be authorised by the claimant's manager or a more senior officer.
  - b) Full details of journeys undertaken should be provided overleaf e.g. dates of travel, destinations, nature of business, type of travel, passenger miles and congestion charge codes.
  - c) For journeys directly from or to home, mileage can only be claimed for the shorter of office to place visited, or home to place visited.
  - d) Tick the reserved rate (RR) box if provision of a lease car by employer has been declined, or the claim relates to (excludes medical and dental staff):
    - i) employee returning to work or working overtime and incurring additional travel to work expenses on that day, or
    - ii) excess mileage in situations where there is a compulsory and temporary/permanent change of base resulting in extra daily travelling expenses, or
    - iii) employee uses own vehicle when suitable public transport is available and appropriate in circumstances subject to a maximum of the public transport cost which would have been incurred.
  - e) Passenger miles are for employees/members of NHS organisations conveyed in the same vehicle on NHS business and whose fares would otherwise be payable by the employer. Details of passenger names/miles claimed should be kept at directorate level as these may be periodically subject to scrutiny for audit purposes.
  - f) Tick the heavy, bulky equipment (HBE) box if equipment is safely carried that exceeds a weight which could reasonably be carried by hand or the equipment cannot be carried in the boot of the vehicle and is so bulky as to reduce the seating capacity of the vehicle.
  - g) Insert transport type overleaf as either CAR, MOTORCYCLE, PEDAL CYCLE, TUBE, BUS, RAIL or AIR.
  - h) All home to work mileage is taxable including emergency call-outs.
  - i) All receipts/tickets should be attached in support of the claim; credit/debit card payment statements/slips are not permitted.
  - j) Claims for fares using Oyster cards must be supported by TfL usage statements with business journeys and costs highlighted.
  - k) In the case of meals a full list of attendees must be provided.
  - l) Claims should be submitted on a monthly basis one month in arrears and payment will be made in the following pay period.
  - m) This form must not be used to claim reimbursement of purchase of goods and/or services; the employer's procedures on ordering goods and services must be followed.

- CONGESTION CHARGE SCHEME GUIDANCE NOTES**
- a) The congestion charge is applicable on Mondays to Fridays 7.00am to 6.00pm (not weekends or Bank Holidays). The zone boundary is Pentonville Road, City Road, Old Street, Commercial Street, Mansell Street, Tower Bridge Road, New Kent Road, Elephant & Castle, Kennington Lane, Vauxhall Bridge Road, Park Lane, Edgware Road, Marylebone Road, Euston Road.
  - b) The charge is £10 per day irrespective of number of journeys into zone, payable on the day; the vehicle registration is required when paying. The Trust will not be liable for any penalty charges incurred for non-compliance.
  - c) Maximum of one claim per day may be claimed.
  - d) To claim reimbursement of the congestion charge you must complete the 'congestion code(s)' column overleaf indicating one of the following journey reason codes:  
 Code E1 - staff who are carrying bulk, heavy, fragile equipment or supplies, Code E2 – patient notes or other clinically confidential material, Code E3 – controlled drugs, Code E4 - clinical waste, radioactive material or waste medicinal products, Code E5 – clinical specimens, body fluids, tissues or organs, Code E6 - staff on-call, providing services required in consequence of an emergency or other extraordinary circumstances, Code NR - none of the above. Failure to insert a code in this column will result in the claim being rejected.
  - e) Original receipts are required, and the receipt number must be inserted under the subsistence (time spent/amount claimed) columns overleaf. Date of travel must be shown (not the date the congestion charge was paid).
  - f) The employer will claim a reimbursement from TfL for categories E1 to E6. Any claims rejected by TfL (i.e. due to incorrect receipt number, duplicate claim, out of date claims) may, after further investigation by my employer, be adjusted via the employee's salary/wage.
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- If you have any queries regarding your expenses claim please contact the Expenses Team at University Hospital's Birmingham –**
- [ELFTdata@uhb.nhs.uk](mailto:ELFTdata@uhb.nhs.uk)  
**Or call - 0121-371-7477**