

BMA annual representative meeting

## Revalidation proposals will waste time

Linda Beecham *BMJ*

While continuing to support the principle of revalidation, the BMA has resolved that the current proposals from the General Medical Council would waste time and clinical skills, which would be better spent on direct patient care.

Although all the BMA sections support the idea that doctors need to show, at regular intervals, that they are competent to continue in practice, the chairman of the Junior Doctors Committee, Dr Trevor Pickersgill, told the meeting that he was concerned about the burgeoning parallel appraisal and assessment mechanisms. These would never have caught doctors like the serial killer Harold Shipman, system failures, or human error.

The BMA's consultants committee believes that five satisfactory annual appraisals should be sufficient for consultants to be revalidated every five years. Its chairman, Dr Peter Hawker, said that revalidation would be valuable, but it should be "workable, valid, and reliable."

Dr Brian Keighley, a GMC member, who supported the GMC proposals, told the meeting that he had taken part in a pilot and submitted a revalidation folder—it was not rocket science and was within all doctors' capabilities. But if revalidation was to be used to reassure the public that doctors were fit to practise it could not be free of some effort and input by doctors.

The motion was also opposed by Dr Fay Wilson, a GP in Birmingham and a GMC member. She could not understand all the "whining." Collecting information about practices and activities into a folder should not be beyond the capabilities of people with three good A levels and a degree. □

### Resolutions from the annual representative meeting

- Anthony Grabham should be elected president of the BMA for 2002-3
- The NHS Plan in England will never be delivered in its entirety without an increase in funding and staffing (including support staff)
- Relentless NHS reorganisations detracted from improving patient care and demotivated staff
- A non-governmental, politically independent body should be set up to administer health policy and delivery of care
- Universities should not accept funding from unethical organisations
- The medical ethics committee should report on the issues surrounding the circumcision of male children for whom there is no valid medical indication

## BMA supports GPs' quest for new contract

Linda Beecham *BMJ*

The BMA's annual meeting has given UK GPs unanimous support in their attempt to negotiate a new contract.

Last month over 86% of GP principals who responded to a ballot said that they would consider resigning from their contracts if a satisfactory new one was not negotiated by April 2002 (9 June, p 1381).

The General Practitioners Committee has now been instructed to develop a model that would enable GPs to deliver primary care services if mass resignation became inevitable. The committee will consult the profession on alternative contractual frameworks and will not be bound by existing policy.

The GPC's chairman, Dr John Chisholm, told the annual meeting that he hoped that resignation would not be necessary and that negotiations would be successful. The new health minister John Hutton felt the same and has already offered to meet the negotiators.

The meeting also resolved that any new contract should deliver a service based on providing quality care to a smaller list of patients and adequate baseline pay. A new contract should also incorporate a formula for negotiating pay increases to reflect increases in workload; protected time for personal development; and greater flexibility to use funds to employ primary care professionals with the appropriate skill mix to meet patients' needs.

In his speech to the annual meeting Dr Chisholm said: "GPs have had enough. They can take no more. They are at breaking point." The issue that had caused the explosion was workload.

The GPs' campaign slogan is "time for general practice," and that, Dr Chisholm said, included time for longer consultations. In a separate motion the annual meeting agreed that the time allowed for GP consultations should be increased from seven to 15 minutes. □

More reports of the annual meeting in News Extra at [bmj.com](http://bmj.com)

## BMA president warns doctors not to take public esteem for granted

Richard Smith *BMJ*

Doctors should not take their public esteem for granted and should be careful about exaggerating the difficulties faced by the NHS. These were two of the main messages delivered by David Carter, the former chief medical officer of Scotland and now president of the BMA, at his inauguration at the BMA's annual meeting at Bournemouth.

"We have not been fleet of foot," said Professor Carter, "in keeping up with public expectations." Doctors should recognise that the world has changed dramatically. Professor Carter described attending a meeting with parents immediately before the publication of the Alder Hey report on the retention of organs from children who had died.

"I was shocked by the raw emotion at that meeting. Pathologists seemed to be in the dock, but it was the whole medical profession that should have been there. The parents were furious that nobody had told them what was happening and that many of the organs taken for research



David Carter urged doctors not to look to the government to solve the problems of the NHS

had never been used."

He said that doctors must not simply look to the government to sort out the problems of the health service: "The BMA should take the high ground and make constructive proposals on developing the health service."

"I've always loved being a doctor, and I'd hate to see us promoting such a negative image that young people will cease to want to be doctors. We should be encouraging our

children to go into medicine, not discouraging them."

"I can sign up enthusiastically," said Professor Carter, "to the BMA's Agenda for Change. It calls for even higher professional standards, better regulation of the profession, and more openness with patients."

"The government is increasing substantially its investment in the health service, but it will never be enough. The BMA is right to call for more resources, but we need to work with the government to spend the extra resources wisely. New doctors cannot be created overnight, and we should avoid draining doctors from countries like South Africa which have far greater problems to face than us in Britain."

Professor Carter also made a call for inequalities in health to be high on the agenda. "In Scotland we have gross inequalities. A man from Shettleston in Glasgow has a life expectancy of only 68 [10 years below that in some other parts of Britain]. Over 80% of the very poorest children in Scotland live in Glasgow, compared with 4% in Edinburgh. Yet Edinburgh has twice as many doctors and nurses per head delivering services for these children." □