

# GMS Doctor's Contract - Leave Arrangements

**Title: GMS Doctor's Contract - Leave Arrangements**

**Date: April 1989**

**Document Type: Circular 4/89**

**Link: Circular 2/89**

**From: Department of Health, Ireland**

**To: Chief Executive Officer, Each Health Board**

**Re: GMS Doctor's Contract - Leave Arrangements**

A Chara,

I am directed by the Minister for Health to inform you that pursuant to the Minister's decision to specify new terms and conditions for medical practitioners participating in the GMS, he is issuing under this Circular the terms and conditions under which leave entitlements shall be granted and the basis on which a general practitioner may apply for the payment of a subsidy in respect of cover and/or the employment of a locum during such leave periods, as provided for under Appendix A, paragraph (ix) (x) (xi) and (xii) of the new agreement.

## 1. Annual Leave

In accordance with the provisions of Appendix A paragraph (ix) to the agreement, a medical practitioner shall be entitled to take a number of weeks annual leave each year based on the size of the patient panel, as outlined in sub paragraph (ix) of the agreement, the maximum entitlement being 5 weeks for those with a panel of 1,500 patients or more and minimum being 2 weeks for those with panels of 100 and up to 499 patients. In this context, a week shall cover seven days, Monday to Sunday inclusive, and shall form the basis for the calculation of the subsidy in respect of leave periods of less than one week.

The following provisions shall apply to the granting of leave:

- (a) in a full year during the whole of which a medical practitioner participates in the scheme, he shall be entitled to the number of days annual leave specified as appropriate to his panel size.
- (b) in a full year during part only of which a medical practitioner participates in the scheme, he shall be entitled to a proportionately reduced number of days annual leave,
- (c) a medical practitioner shall obtain the prior approval of the Chief Executive Officer as to timing before taking annual leave. Special forms for this purpose will be available. Approval will be withheld only where the CEO is not satisfied that adequate arrangements have been made to provide services for patients on the panel. Forms should normally be submitted, at least, two weeks prior to commencement of leave. In special circumstances, leave may be approved at shorter notice.
- (d) leave other than annual, sick or maternity leave may be taken provided the prior approval of the chief executive officer is obtained, which will not be unreasonably withheld.
- (e) the commencement date for the establishment of leave entitlement shall be 1st March, 1989 or the operative date of the doctor's contract, if that is later.

(f) leave year runs from 1 April - 31 March.

Health Boards shall pay a subsidy of £400 pw to the participating doctor as a supplement towards the cost of employing a locum during periods of approved annual leave. Where a locum is employed for a period of less than one week a payment of £58 per day shall be made.

Former District Medical officers will continue to benefit from the annual leave entitlement guaranteed with the commencement of the GMS scheme, in 1972. However, their leave entitlement under the new terms and conditions will be calculated by reference to their panel size and such leave period shall attract the subsidy of £400 pw and where the leave period is less than one week duration a payment of £58 per day shall be made. Any balance of leave, resulting from a former DMO's guaranteed leave entitlement shall be paid at the current rate of £28 per day, as adjusted from time to time in the normal way.

Medical Practitioners in receipt of a Rural Practice Allowance shall attract the full annual leave entitlement applicable to a doctor with a full size panel.

In situations where a health board signs a temporary contract with a medical practitioner, the period of such a temporary contract being greater than one month, annual leave entitlement shall be given on a pro-rata basis and related to the size of the panel being looked after.

In the case of partnerships or group practices annual leave entitlement shall be based on the individual doctor's contract.

A Medical practitioner's annual leave entitlement should be taken in the appropriate leave year and only in exceptional circumstances will a carry-forward of leave be approved. Where such approval is given the leave carried-forward would normally be required to be taken early in the new leave year.

Should a medical practitioner be unable to obtain the services of a locum for periods of annual leave, the health board, on request, will arrange locum cover where possible. Such a request should normally be submitted to the board at least four weeks prior to commencement of the leave period.

## 2. Sick Leave

A medical practitioner's entitlement to benefits under the sick leave arrangements is outlined under Appendix A, paragraph (x) of Circular 2/89.

Payment of a subsidy in respect of the cost of locum cover during a period of sick leave is on the basis of the following provisions, which are analogous to those which apply to officers of health boards under Circular 10/71

(a) no subsidy will be paid when the sick leave period exceeds in the aggregate 365 days during any continuous period of four years,

(b) medical practitioners shall be expected to cover for each other during the first seven days of any episode of sickness,

(c) subject to the limitations mentioned at 2(a) a subsidy shall be paid at the appropriate rate in respect of any day's sick leave, unless, by reason of such payment, the period of sick leave during which the medical practitioner has been paid the appropriate rate would exceed one hundred and eighty-three days during the twelve months ending on such day,

(d) subject to the limitation mentioned at 2(a) payment shall be paid at half the appropriate rate after payment has ceased, by reason of the provision in sub-paragraph 2(c), to be paid at the full rate,

(e) for the purposes of these provisions every day occurring within a continuous period of sick leave shall be reckoned as part of such period.

Having regard to the foregoing provisions, payment of a subsidy towards the cost of arranging cover and/or employing a locum during periods of sick leave shall be made on the following basis:

- during the first seven days of an episode of sick leave, when medical practitioners are expected to cover for each other, a subsidy of £60 per day (Monday to Friday inclusive) shall be paid to the medical practitioner in respect of the cost of cover, up to a maximum of £300 except in the case of a doctor with a panel of 100 - 700 where the payment will be the equivalent of their weekly capitation earnings.

- after the first week of an episode of sick leave a medical practitioner, with 700 patients or more on his panel, shall be paid a subsidy of £400 per week for the next 25 weeks and £200 per week for the following 26 weeks in respect of the cost of employing a locum. Those with panels between 700 and 100 patients shall receive a subsidy equivalent to their capitation earnings during the second and subsequent consecutive 25 weeks of sick leave (not exceeding £400 pw) and half that amount for the second period of 26 weeks.

Payment of the sick leave subsidy shall be subject to the receipt of a properly completed claim form, including evidence of payment to the covering practitioner or locum and independent medical certification of sickness.

Sick leave entitlement shall not apply to medical practitioners with panels of less than 100 patients.

The level of payment applicable will be determined by reference to the monthly cumulative average number of patients on the doctor's panel in the relevant leave year.

When it is clear that the incapacity will last for more than one week and for rural practitioners in all cases the locum shall be put in place as soon as possible. If the medical practitioner is unable to obtain a locum the Health Board shall assume responsibility for providing services to patient.

A medical practitioner in receipt of the Rural Practitioner Allowance shall be entitled to the full sick leave benefits as in the case of a doctor with a full panel of 1500 patients.

In the case of extended sickness, where the chief executive has reason to believe that the medical practitioner is not likely to resume his practice, the chief executive officer may have regard to paragraph 37 of the agreement, where he considers such action appropriate.

### Maternity Leave

Appendix A paragraph (xi) to the agreement makes provision for the granting of maternity leave benefits on grounds analogous to those in the Maternity Protection of Employees Act, 1981.

In this regard, a medical practitioner with a panel of 500 or more patients shall be entitled to 14 consecutive weeks leave. At the end of maternity leave the medical practitioner shall, on application to the CEO, be allowed up to 4 weeks special leave, however, this period of leave will not rank for the payment of a locum subsidy.

A subsidy in the amount of £400 per week shall be paid in respect of the cost of locum cover after the submission of a completed claim form and certification of pregnancy. Where a medical practitioner wishes the health board to recruit a locum, application should be made as soon as reasonably practicable, but not later than 4 weeks prior to the commencement of the maternity leave.

### Study Leave

The agreement makes provision for study leave entitlement under Appendix A, paragraph (xii). A medical practitioner will be entitled to one weeks study leave each year and the health board shall pay a subsidy of £400 towards the cost of employing a locum for the week or, where requested, provide a locum where possible. Leave may be taken on a single day basis, Monday to Sunday, and payment will be at a rate of £58 per day. Claims in respect of the subsidy should be made on the appropriate form.

A further circular will issue when details are agreed with the profession regarding the operation of this provision, including arrangements for determining the purposes for which such leave may be approved.

The contents of this circular shall be considered as forming part of the agreement with registered medical practitioners for the provision of services under Section 58 of the Health Act, 1970.

Mise, le meas,

April, 1989