



## Our Newsletter to LMCs – Autumn 2017



On 10 August Stephen Linton and David Harris met with RCGP Chair, Prof Helen Stokes-Lampard, President Terry Kemple, and Honorary Treasurer Steve Mowle.

### Dr Stephen Linton's term of office comes to an end

*"It has been a privilege to chair the Council for the last three years. As well as continuing our main task of supporting our beneficiaries, our relationship with the RCGP has become closer, a process started by my predecessor, Roger Chapman. We have also developed close relationships with the other medical charities, often working together to give financial advice and assistance.*

*A big issue for some of our beneficiaries has been the unwillingness of the three mutual Medical Defence Organisations to offer them medical indemnity insurance, but at last there seems to be some signs of progress both for them and for all GPs. So in handing over to Gary Calver, I know that the Fund is in good hands, and I send him my best wishes.*

*Finally I want to thank David, our CEO, and Mary, our Cases and Promotion Officer, for their dedicated and exceptional work supporting our beneficiaries, and our twenty trustees, who give of their time and wisdom so willingly. And too, to thank you our members and supporters, whose donations are so valuable.*

*"Please continue to pass on the good news that the Cameron Fund is there to support colleagues and their dependents in need."* – Dr Stephen Linton

### Positive change announced at the RCGP Conference last month

The Fund were encouraged to hear that on the 12 October the government revealed that a state-backed Medical Indemnity Scheme could be introduced by Spring 2019. Indemnity costs for GPs have risen by more than 50% since 2010, and has now reached an average of £8,000, with the level of cover required now up from £1million to £10 million. Over the last year or so the Fund has done its best to highlight its concerns: that many of our GP beneficiaries struggle to return to General Practice because they cannot find suitable indemnity cover.

After long-term absence – when a GP is required to join the I & R Scheme – cover is required to return to the Performer's List and begin a supervised placement. Most GPs in this position are being turned away by the 'mutuals' and been offered inadequate indemnity insurance cover from independent brokers costing in excess of £20,000pa. Unfortunately, some of the GPs we have supported have had to accept that there was no way back into General Practice and have sought work in hospital, palliative care and prisons, as this work currently has government-backed indemnity cover.

Introducing a government-backed indemnity scheme is a positive development, but GPs returning from a period out of work, and a long period without a salary, need all the support they can get if they are going to boost GP numbers.



### **The new Executive Committee**

It was announced at the Fund's Council of Management meeting on 2 November that Dr Gary Calver (left) had been elected as the Fund's new Chairman for a term of three years. He writes: *"I'd like to thank Stephen for his work for the Fund over the last 3 years and, although a difficult act to follow, I will do my best to help maintain and develop the Fund."*

Dr Ian Winterton has succeeded Dr David Wrigley as Treasurer, Dr Richard Brown has been elected Vice-Chair and Dr Simon Lockett, Deputy Treasurer.

### **Retraining and Career Coaching**

The Fund tries its best to support GPs and their dependents back to work and back to earning a sustainable income. Such help may include costs relating to a return to General Practice, or grants to pay for training courses, or exams and sessions with a career coach.

Mrs K, ex-wife of a GP, and her sons have received the Fund's support for the last four years. She had some work in a local hospital, however her wages were not sufficient to cover all her essential monthly expenditure and the Fund helped with a monthly grant to top up her income. In 2015 she decided to train as a driving instructor and the Fund paid for her training and exams. She passed these in 2016 and now has sufficient work to cover the family's outgoings and no longer needs support. She wrote:

*"If it wasn't for the Cameron Fund I wouldn't have ever had courage to re-train for a completely different career, which I hope will be a successful move!"*

### **Helping GPs in Scotland**

Throughout the years the Fund has been able to offer support to many GPs in the Scottish area and at present we help several GPs and their dependents in the region. Two Scottish GPs sit on the Fund's Council of Management and many beneficiaries have been visited by one of these two 'local' Trustees.

This year, in order to promote our Fund's work, the Cameron Fund was registered as a Scottish Charity. We continue to support any GPs who are struggling financially in Scotland and thank the LMCs in the region for their support.

### **Our Marathon Men**

This summer two GPs volunteered to raise money on behalf of the Fund and we are very grateful for their sterling efforts. Dr Iain Morrison, from Lothian LMC, raised £859.97 and Dr Gwyn Roberts raised £751.73 (and intends to do the same next April). If you would like to raise funds; be it a marathon, cycle or a special event with your colleagues, please contact [mary.barton@cameronfund.org.uk](mailto:mary.barton@cameronfund.org.uk)

### **Raising Awareness in the profession**

Throughout the year the Fund has had a presence at GP conferences and exhibitions, including the last LMC Conference, held in Edinburgh back in March.

A collection at the Conference Dinner raised £6,650.63 (including Gift aid) – which is normally our single-biggest fundraising event held in the year. As roughly half of our annual income comes from LMCs (and individual GPs), we hope the regional committees will continue to support the Fund in the coming year.