Locum agencies
Prescribed connections for locum agencies

This briefing for locum agencies explains:
- which agencies are ‘designated bodies’ and what this means
- which doctors an agency is responsible for
- what locum agencies should be doing now.

Revalidation

All doctors working in the UK require a GMC licence to practise. Revalidation is the process by which the doctor’s licence to practise is renewed and is based on local organisational systems of appraisal and clinical governance. All doctors have a professional responsibility to show that they are up to date and fit to practise in the work they undertake. Through evidence provided at annual appraisal, all doctors will demonstrate that they comply with the professional standards set out in the GMC’s guidance Good Medical Practice. The same principles apply to all doctors irrespective of their role or specialty.

Under The Medical Profession (Responsible Officers) Regulations 2010 most licensed doctors have a formal link (known as a ‘prescribed connection’) with a single organisation (or ‘designated body’) which will provide them with annual appraisal and support them with revalidation. A senior doctor (the ‘responsible officer’) in each designated body will make a recommendation about the doctor’s fitness to practise to the GMC.

Designated bodies

Locum agencies on the national Government Procurement Service (Buying Solutions) framework are identified as designated bodies under the responsible officer regulations. These agencies will need to appoint a responsible officer and comply with the statutory obligations and provisions of the regulations.

Prescribed connections

It is important that every doctor identify their designated body and their responsible officer and inform the GMC through GMC online. The GMC website provides a useful tool for confirming the prescribed connection.

It is also important that every designated body maintain an up to date list of all the doctors for whom they have statutory responsibilities under the regulations. To do this the designated body or responsible officer will need to help doctors identify their prescribed connection. The prescribed connection arrangements for locum doctors can be summarised as follows.
For GP locums
All GPs are on a medical performers list and have a prescribed connection with the PCT where the medical performers list is held. In future this connection will be with one of the local area teams of the NHS Commissioning Board.

For secondary care locums
- If the locum doctor is also a trainee then the prescribed connection is with the deanery.
- If the locum doctor is also employed in a substantive post then the prescribed connection is with their employer.
- If the locum doctor is directly employed by an organisation on a temporary or fixed term contract then the prescribed connection is with the employer.
- Where the locum doctor is contracted through a locum agency:
  - the prescribed connection is with their locum agency if that agency is on the national Government Procurement Service (Buying Solutions) framework
  - if their locum agency is not on the national framework then the prescribed connection is with the PCT nearest to the doctors GMC registered address
  - if the doctor is registered with more than one agency on the national framework then the prescribed connection is with the agency where the locum did most of their work in the previous calendar year.

Actions to take
The first actions every designated body should take are to:
- appoint a responsible officer
- identify all doctors with a prescribed connection to the designated body. For locum agencies this will mean contacting all doctors on the agency’s list and asking them:
  - what their other roles and medical posts are (as these may determine their prescribed connection)
  - or for which locum agency on the Government Procurement Service (Buying Solutions) framework they performed most of their clinical work in the last calendar year
- ensure that the organisation’s appraisal system has sufficient capacity and complies with quality standards
- ensure that the organisation’s appraisal system delivers a doctor’s appraisal in accordance with the GMC’s Good Medical Practice
- ensure that information is available so that doctors’ fitness to practise is monitored (exit reports from the doctor’s locum appointments may be helpful)
- ensure concerns about fitness to practise are effectively investigated and managed.

Useful links
- Good Medical Practice appraisal framework and supporting information guidance
- GMC case study – DRC Locums
- GMC case study – Medacs Healthcare