

Lancashire & Cumbria LMCs

Tuesday 1st June 2021

Unsustainable, unsafe and unfair: General Practice in crisis

<u>Attached</u> is a full statement by Dr Richard Vautrey, Chair of BMA GPC. This was circulated last Friday in his update to LMCs.

Urgent meeting held with ministers to seek action to address pressures in General Practice

Last week Dr Richard Vautrey, Dr Chaand Nagpaul (BMA council chair) and Ben Molyneux (Sessional GPs committee chair), met with the Secretary of State for Health, Matt Hancock, and Parliamentary Under-Secretary of State for Primary Care, Jo Churchill to highlight the huge concern of the profession about the current pressures facing General Practice. This followed the motion passed by GPC England, calling for an urgent meeting with the Secretary of State.

Dr Vautrey reported that they stressed the urgent need to support surgeries to reduce workload pressures and to deliver care and appointment arrangements in the way they knew their patients would benefit from. They called for an urgent end to national directives and criticism, and more help and understanding for practices trying to care for those patients who are now part of a huge NHS backlog, caused by the pandemic.

Read the full statement here.

COVID-19 vaccination programme

Those aged <u>30 or over</u> are now eligible for the COVID-19 vaccines and will be receiving texts inviting them to book a vaccination via the national booking service, at an NHS vaccination centre, pharmacy or GP vaccination site.

15-minute observation period (Pfizer)

BMA GPC continue to question the necessity for the 15-minute observation period following a Pfizer vaccine, particularly for second or subsequent doses. MHRA have informed that the evidence related to this is regularly reviewed by their Expert Working Group, but as yet no change has been made.

Locum doctors in the NHS: understanding and improving the quality and safety of care

Manchester University, funded by the Institute for Health Policy and Organisation, is conducting a research project which is examining how temporary or locum doctors work in the NHS, what they do, how their work is organised, and what effects that might have on the quality and safety of healthcare for patients. Their aim is to help find ways to improve the working arrangements for locum doctors and the quality and safety of patient care they provide. For more information, including how to take part, see <u>here</u>.



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New PCSE GP Pay and Pensions portal

The new PCSE GP Pay and Pensions portal is live as of this week. PCSE has advised that via this new portal, practices and GPs working in General Practice will be able to access a range of new services to help manage their payments and pensions administration online.

PCSE has written to all practices to ensure they have the correct details on file for the correct contact who will control the access within their practice to the new system. Many GPs will have received four emails over the weekend allocating a role for the new PCSE online portal for pay and pension. You will be allocated 4 roles. This covers partners, salaried, locum and solo work. This is because at some time you may switch from one role to another so PCSE have allocated all 4 roles. It is not because they do not know your status. This was in preparation for the launch of the GP portal today (1st June 21).

BMA GPC reports that they have been assured that this work is complete but if a Practice believes that they have not had this correspondence or they are unsure who their assigned contact is they should email <u>pcse.user-registration@nhs.net</u> Once the service is live, these 'User Admins' will then be able to log in to the portal and assign the roles to their practice staff. A suite of guidance for using the new system can be found on the PCSE website <u>here</u>.

The payments element of the new system should allow practices to submit payment claims, such as for premises or Locum cover, online. Monthly practice statements will also move to the portal from 1 June. These will only be available via this route.

Practices should find it easier to submit pension information such as an Estimate of GP and Non GP Provider NHS Pensionable Profits with the new system. Practices should also be able to provide updates on salary changes in real-time to ensure the correct pensions contributions are being deducted. Approving Locum A forms and other pensions administration work should also be easier.

Any GP who is a member of the NHS Pensions Scheme as a GP partner, salaried GP or locum GP will be able to access an improved service from PCSE to administer their pension account and access their pension records from 2014/15 onwards. Members will be able to do the following via PCSE online with the new service: Type 1 Annual Certificate of Pensionable Profit and Type 2 self-assessment forms; Estimates of Pensionable Profit/Pay form; Retirement, 24 hour retirement and death in service; GP Locum contributions; GP Solo contributions; opting members in or out of the NHS pension scheme; amending member's Additional Voluntary Contribution (AVC). Further information can be found <u>on the PCSE website</u>

Members of the scheme are encouraged to log onto the new portal from today (1st June 2021). To access this functionality, you will need to have a verified PCSE Online account. If you don't have an account, or have yet to verify your existing account, please contact the PCSE User Registration team at <u>pcse.user-registration@nhs.net</u>. If you already have an account but have forgotten your log in details you can set up a new password on the <u>PCSE login page</u>



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£120m COVID expansion fund – fair shares allocation per STP

NHSE/I has now published a <u>fair shares allocation per STP for the £120 COVID expansion fund</u> for 2021/22. The funding will be allocated to systems, ringfenced exclusively for General Practice, to support the expansion of capacity. Monthly allocations will be £30m in May, £20m in June and July and reach £10m in August and September.

GP data planning and research

NHS Digital has published a <u>Data Provision Notice</u> (DPN) in order to begin extracting data as part of the <u>GP Data for Planning and Research (GPDPR)</u> programme, which is the successor to the GP Extract Service (GPES). Your IT supplier will be in touch separately with instructions on how to comply, as these vary by system. As this is a legal direction, responsibility for communicating these changes to the general public sits with NHS Digital and the Department of Health and Social Care. Should you wish to communicate it to your patients you may do so, but it is not an obligation.

The LMC has written to the DPOs in Lancashire and Cumbria requesting that they contact practices with any supporting documentation that they feel is appropriate.

NHSE/I review of urgent and emergency care standards

Based on the responses to their consultation, NHS England and NHS Improvement (NHSE/I) have announced on 26th May their intention to replace the four-hour A&E target by a bundle of new standards and an overall new approach to measuring performance in Urgent and Emergency Care (UEC) services. Any final proposals will however require government sign-off, which has not yet been given.

They are proposing to introduce 10 new standards which they say would provide system-wide information rather than focusing on one-part of the system. They argue that the current four-hour target focuses on only one part of a now much more complex range of urgent services for patients, including ambulance care, UTCs and NHS 111.

A summary of the proposed new metrics is attached.

Health inequalities toolkit - call for examples

The BMA is producing a toolkit for frontline clinicians, including those in general practice, who feel frustrated by the health inequalities they see in their work, and who wish to do something about it.

The initiative is part of a project by BMA president Sir Harry Burns, who is making inequalities the focus of his one-year term in office. The BMA also <u>published a paper</u> in March recommending actions UK governments could take to mitigate the effect of the pandemic on health inequalities and the social determinants of health.



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The BMA would like to hear from those who have seen or participated in schemes to address health inequalities in their local area, and hope the final published toolkit will support clinicians to tackle health inequalities, either through direct action on behalf of their patients, through joint working with other local organisations, or indirectly through lobbying local, regional or national government.

Please send any examples of projects or initiatives you have seen in your local area to reduce health inequalities, by filling in this <u>webform</u>.

School absence – Reminder

It has been brought to our attention that an increasing number of practices are being asked to issue sick notes for children who should be in school. It is our understanding that all young people should now be back in school unless there are significant health concerns. The LMC sent the **<u>attached</u>** letter in February addressing this issue and we thought it would help to share it with Practices across Lancashire and Cumbria.

Information from the North West Controlled Drugs team

Some useful information and webinars we have recently been sent that could be useful:

• Dealing with drug seeking behaviour webinar

https://vimeo.com/187991515/b6374f1254

• How to avoid inappropriate prescribing of controlled drugs

https://www.prescqipp.info/our-resources/clinical-webinars/how-to-avoid-inappropriate-prescribing-of-controlled-drugs-webinar/

