



## Note from Your Chief Executive

#### Access to General Practice

As I write this note I am receiving bits of information about the much heralded "GP Recovery Plan", although I think it's now been rebadged as the "Delivery Plan for recovering access to primary care."

Last night, on the national news, we heard of significant extra cash going into general practice and a major initiative to divert patients to community pharmacy for a range of prescriptions and blood pressure checks. We have had limited success in the immediate past with community pharmacy schemes and, as I understand it, many community pharmacies are also on their knees with severe staff shortages. It just feels like the government is moving the deck chairs round on the Titanic / NHS.

This morning we got sight of the full plan and I have just started scan reading it. The positive news is that the government accepts there is a problem with GP Access that needs addressing. The negative news is that what they are suggesting is fiddling around at the edges, being seen to do "something" and throwing some money at some aspects, but not directly at general practice. It turns out that the money for general practice is to help with telephony systems. All the rest of the money is a rebadge of existing funding streams.

At the end of the day the only thing that will really resolve this crisis is more GPs, and this seems as far away as ever.

We will be sending you more information and advice about this delivery plan as we absorb the detail and consider its implications. We will also be discussing it at each of our LMCs, so if you have any particular issues, please get in touch with your <u>Lead Executive</u> or <u>local LMC representative</u> so that we can have a fully informed debate at our LMC meetings.

#### **Contract Imposition**

The above delivery plan was promised at the same time as the 23/24 contract was imposed on us in March. So, for two months we have all been in the dark about what was required of us and what help was available to meet the contract requirements. I don't think this delivery plan offers any immediate help to meet the new contract requirements!

Our national negotiators have been considering how the profession should respond to the contract imposition. They are keen to gauge the opinion of the profession before suggesting anything on a national basis. As part of this process our national negotiators have been visiting LMCs across the land, and we had a presentation from David Wrigley last Thursday night. It was well attended with over 40 GPs and practice managers from across the patch. David gave a comprehensive background to the negotiations, explaining how they gathered evidence and presented it to NHSE. However, it appeared that the NHSE team were not interested and rejected almost all the proposals to make life for GPs easier.

Our national negotiators have met with the full General Practice Committee (GPC) who have endorsed looking at forms of action to get the attention of NHSE. As ever, the broad family of general practice has many views. Some are militant and want action now, where others are not comfortable at all with action, particularly any that can be perceived as interfering with patient care. We discussed a numb er of options when we met on Thursday and David will be taking these back to his national discussions.





One of the key issues is whether to respond now to this year's imposition or focus our actions on putting ourselves in a strong position for next year's negotiations when the current 5 year deal is over.

It is the UK LMC Annual Conference next week and there will no doubt be discussion there on this topic. We will keep you informed as options for action start to be formed. What is important is that whatever is proposed nationally has the support of our GPs in Lancs & Cumbria.

## Appointment of New LMC Chief Executive

You will all know by now that I am retiring at the end of this month but, with annual leave outstanding I have 4 working days left! That's scary! I am doing my best to get around and say goodbye to everyone.

However, I am really pleased to announce that we have now appointed a new part time GP to lead our Consortium. We appointed Adam Janjua last week and he will be working as LMC Chief Executive for 4 sessions a week, principally Tuesdays and Thursdays. Adam is an experienced and respected GP from Fleetwood and has held the CCG Chair role for Fylde & Wyre CCG and been the Clinical Lead for Cancer and End of Life together with leading on specific projects.

This is a new way of working for us in the Consortium, but the LMC Chairs and I were keen to increase our clinical leadership presence. As Adam will be doing 4 sessions a week, we have created a Chief Operating Officer post to support Adam in the overall coordination and management of LMC business. Faye Tomlinson is stepping into this role. Between them I have every confidence that Adam and Faye will make a very strong team. We will, of course, be adjusting Faye's Lead Executive role in Fylde Coast so that she can step up into this new role, but for those of you on the Fylde Coast, I can reassure you that you won't be losing Faye completely.

Faye will be starting her new role on 1st June and Adam is hoping to join us on 1st July.





# Update from the Consortium of Lancashire & Cumbria LMCs

### Visa sponsorship guidance and support

<u>Guidance materials to support practices with obtaining a visa sponsorship license, including a step-by-step guide,</u> can be found on the GP Workforce Scheme Delivery Hub on FutureNHS.

Becoming a UK visa sponsoring practice has many advantages and could form an important part of a practice's workforce planning with many requiring visa sponsorships to continue as a GP in England after qualification. Obtaining a visa license now will allow practices to recruit from the full pool of GPs qualifying this summer.

GMS registration and GP2GP transfers available for adult male prison estate and young offender institution residents

GMS registration within the detained estate (DE) healthcare team prompts a GP2GP transfer to take place, electronically transferring the patient's record from their community GP into their DE healthcare team, and then back to community when the patient registers following release. Given the reliance on coordinated care for this group, teams are reminded of the importance of accepting patients from the DE when GMS registering back in the community on or just prior to release. For more information email england.handj@nhs.net.

## **Vacancies**

Please see our <u>website</u> for Practice vacancies across Lancashire and Cumbria. There are also opportunities for other positions such as Medical Examiner roles.

You can advertise your vacancies for free on our website.

#### **GP Clinical Teaching Fellows**

To support the continuing expansion of Lancaster Medical School, they are in the next round of recruiting additional GP Clinical Teaching Fellows to teach higher student numbers due to enter Year 4 and 5 in the next academic year September 23-24. If you're interested in teaching undergraduate medical students whilst complementing GP clinical work, please see the following link. Mix of 0.2-0.4FTE roles available.

## **Support & Development Service**

The LMC offers free, confidential, and independent peer/ pastoral support services for all GPs and Practice Staff across Lancashire and Cumbria. This service is provided by GPs and Practice Managers.

Please visit our website for more information.

## **Twitter**

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