

## Update from the Consortium of

### Lancashire & Cumbria LMCs

Tuesday 13<sup>th</sup> August

#### Help us grow our audience - LMC Distribution list

We would like to grow our LMC audience. If you know any GPs or PMs in your practice that don't receive this Brieflet and/or is not on our distribution list, please ask them to get in touch with us!

#### **General Practice Alert State (GPAS)**

You can see the latest SitRep results below. Results can also be found on our website.

You can see the national GPAS SITREP here.

The data we receive from you helps us gather a true picture of the pressures practices are under in Lancashire and Cumbria and provides us with evidence when liaising with system partners.

When completing the GPAS form please ensure that you are inputting the correct numbers to avoid incorrect data and please do continue to keep us updated on a weekly basis.

We really appreciate you taking to the time to help us to help you.

Please let us know if you are a Practice Manager and do not receive the GPAS input emails.

#### LMC Celebratory Ball

Dear hard working colleagues,

Do you agree that it's about time General Practice was celebrated? The LMC does! So we are having a ball! We would love our General Practice colleagues to get dressed up and receive some awards, whilst having a great evening!

Tickets are priced at £50 per person which includes live music, saxophonist, a full three course meal and an awards ceremony! The ball will be taking place on Saturday 5th October at Ribby Hall, Wrea Green from 6:30pm!

The award nomination categories are:

- Outstanding Patient Interaction Non Clinical team
- Outstanding Contribution
- Compassionate Care
- Rising Star
- Rising Star GP Trainee
- Demonstration of Great Leadership

If you would like to celebrate with us please contact enquires@nwlmcs.org, but hurry, only 8 weeks to go!



#### **Collective Action – LMC Support to Practices**

Our LMC is working hard to help Practices and GPs take back control of workload and reducing bureaucracy. This coincides with the BMA/GPC call for GP Collective Action. This week we will be focusing on Action point 4 of the BMA GP practice survival toolkit (Stop rationing referrals, investigations, and admissions). More specifically we will shine the spotlight on the administrative burden of certain forms.

In recent years there has been a steady proliferation of forms that have 'pre-forms'!

This creates an additional workload and unnecessary bureaucracy for GPs and their Practice Teams, when a relevant, factual referral form is already completed and attached. Often the information requested is not relevant to the decision to refer or the patient's medical condition but is instead an extensive list of additional "background" information that serves to alleviate the administrative burden at the provider end. This represents, multiplied by each such referral, a significant and inappropriate transfer of work to local GP practices.

The use of referral forms is not a core contractual requirement.

'Given the clinical urgency of fast-track referrals for suspected cancer, GPC England recommends GPs should take a pragmatic approach and continue to use such referral forms so as not to risk any form of delay in the transfer of care.'

Please keep using and fully complete the actual Fast-Track form, but any Fast-Track referral forms that have several "extra" questions attached as a pre-questionnaire before the actual form are not clinically necessary. On EMIS GP Systems it is possible to click the 'cancel' button at the pre-form stage and you will still be able to proceed to the actual Fast-Track form itself.

This has the potential to free up to 5 minutes of Clinician time without affecting the 'safe transfer of care'.

To assist Secondary Care colleagues who may be placed under pressure to reject referrals from trust management when referrals not accompanied by a completed pre-questionnaire or proforma, GPC England recommends the following appendix added as standard text beneath each referral letter:

NB: The completion of the Fast-Track pre-questionnaire or pre-proforma is neither a contractual nor a professional obligation. A completed Fast-Track referral form is attached. This provides the necessary and relevant information for an appropriate request for a secondary care service and is in line with the NHS Standard Contract 2023/24 Service Conditions: Acceptance and Rejection of Referrals 6.8 Subject to SC6.3 and to SC7 (Withholding and/or Discontinuation of Service), the Provider must:

6.8.1 accept any Referral of a Service User made in accordance with the Referral processes and clinical thresholds set out or referred to in this Contract and/or as otherwise agreed between the Parties and/or as specified in any Prior Approval Scheme, and in any event where necessary for a Service User to exercise their legal right to choice as set out in the NHS Choice Framework"

#### https://www.england.nhs.uk/nhs-standard-contract/24-25/

In relation to Essential Services provided under a Primary Medical Services Contract, General Practitioners will note:

8.1.2. The Contractor must provide:

(a) services required for the management of the Contractor's registered patients and temporary residents who are, or believe themselves to be:

(i) ill with conditions from which recovery is generally expected;

(ii) terminally ill; or

(iii) suffering from chronic disease, which are delivered in the manner determined by the Contractor's practice in discussion with the patient;

(b) appropriate ongoing treatment and care to all of the Contractor's registered patients and temporary residents taking account of their specific needs including:

(i) advice in connection with the patient's health and relevant health promotion advice;

(ii) the referral of a patient for other services under the 2006 Act

Please find attached letter here which will also be sent to Trust colleagues.

#### GP Local Action Tracker Survey - 12 - 18 August 2024

As mentioned in last weeks brieflet, the survey asks what ICB and LMC the respondent is part of, whether their practice is undertaking each action and provides a space for further comment. This is the same set of survey questions as circulated last week, but the BMA are asking practices to complete each week, so that they can observe how participate rates develop over time.

These surveys will enable the BMA to identify areas of high and low participation with the action, which can enable us to identify best practice in areas of high participation and obstacles to participation in areas of low participation, along with what support is needed to enable participation by those who wish to participate.

Surveys will be sent weekly on Monday, with a deadline of 5pm on Sunday for practices to complete. This process will repeat each week. These surveys should be completed by only one member of staff per practice.

The local action tracker survey for Monday, 12th to Sunday, 18th August can be found here: https://www.surveymonkey.com/r/BMA\_GP\_Action\_Tracking\_12-18Aug

The data collected will then be used to monitor the participation with the different types of action across the country, and as a lobbying tool to demonstrate the level of participation in collective action.

Please be assured, that no identifiable data will be created as a result of this survey.

DDRB Report 2024/25: Implications for General Practice

Please find attached letter here from BMA GPC England Deputy Chair.

This outcome has not been accepted by GPCE/BMA and we are not advised of any changes to the current Collective Action being pursued.

# GP Impact of Medical Examiner Introduction on 9 September 2024 - Lancashire, Blackburn & Darwen only

Please find attached letter here from Dr James Adeley, HM Senior Coroner.

#### Continued Monitoring of Chronic Lymphocytic Leukaemia (CLL)

You will recall from previous communications that the LMC wrote to Hospital Trusts across Lancashire and Cumbria to highlight that it was not the role of General Practice to take on Continued Monitoring of Chronic Lymphocytic Leukaemia (CLL) post-discharge from Haematology. As such we are now highlighting to practices that they can choose to not undertake this work and will be supported by the LMC in refusing it. If this is requested of you by Haematology, please kindly advise that this is not something that General Practice is responsible for.

#### Crowdstrike outage

Following the events of Friday 19 July that saw critical digital services, including in General Practice, across the country impacted by the outage. GPC sought and received assurances from the ICO and NHS England that GPs would not be required to report the availability breach to the ICO created by the outage on an individual basis. Instead – NHSE is providing a bulk report to the ICO, allowing them to satisfy their obligations under Article 33 (1) UK GDPR. The ICO confirmed that for those practices that have already reported, they may consider the matter closed with no further action to follow. However, any breaches unrelated to the crowdstrike outage and its impact on EMIS will still need to be reported.

#### **ARRS funding scheme expansion**

Following the recent announcement from the DHSC and the secretary of state on the temporary inclusion of newly or recently qualified GPs in the ARR Scheme, GPC England provided a joint statement with the Sessional GPs Committee highlighting the potential impact of expanding funding to include GPs, and raising our concerns about the practical implementation of this:

'There are experienced and talented GPs, ready and able to work, but practices can't afford to hire them so expanding the funding scheme to include GPs shows the Government is keen to find solutions to stabilise General Practice. However, we have concerns around how this policy will work in practice, and it's fundamentally nowhere near enough to save General Practice. Because the funding won't be allocated at a practice level, but instead via Primary Care Networks, this means any GPs employed through this scheme could be forced to move across the country at short notice, uprooting their families in the process, and depriving their patients of continuity of care. This in itself could drive more GPs away from the NHS.'

'We've shared ideas with the Government for how to best get more unemployed GPs back into the workforce, because there are more flexible and effective ways that this funding could be used to ensure the maximum benefit for patients – for example reimbursing the practices themselves. In the long-term, however, we need to see the core GP contract funding increased so that practices have full control over who they recruit, without the need to go via bolt-on schemes. We will continue to share suggestions with the new government to potentially take forward in 2025/26.'

The BMA will continue to call on the new government to listen to the concerns of GPs and to act swiftly to restore and enhance the cornerstone of effective healthcare – our General Practitioners.

#### New GPCE guidance on Physician Associates (PAs) working in General Practice

The BMA have published guidance to help standardise practice and reduce variation in how physician associates work within a General Practice setting. It aims to provide a framework to support physician associates to work safely in General Practice, for patients, their employers, and GP supervisors. It has

been designed to complement the scope of practice and supervision guidance already published by the BMA and should also be read in conjunction with GPCE's Focus on MAPs in General Practice.

#### Are your pension records up to date?

The BMA's Pensions Committee have launched a campaign encouraging you to take action to make sure that your pension records are accurate and up to date, so you can make informed decisions about your pension savings, retirement plans and the McCloud remedy. The BMA are aware that thousands of GPs in England have "missing years" of pensions data due to PCSE's maladministration of pension records. The BMA have been consistently highlighting the failures of PCSE (run by Capita), and the significant importance of them fixing this issue as soon as possible. Unfortunately, there has not been sufficient progress to resolve this issue, so they are now encouraging you to take action to get your pension records in order.

To support you the Pensions Committee have created detailed guidance including template letters to help you get your records up to date, raise a complaint and escalate further where appropriate.

Guidance on getting your pension record up to date, for GPs in England - YouTube

#### Partnership Agreement Drafting Service

As you will be aware, the LMC has offered a partnership agreement drafting service for over 4 years now and we have worked with a specialist law firm to draft bespoke agreements for many practices across the patch, receiving really positive feedback regarding the service.

Abi Askew who leads on the partnership agreement drafting service will be going on maternity leave in November so we wanted to let practices know in advance that if you require an agreement to please get in touch as soon as possible as the service will be temporarily paused for the duration of Abi's maternity leave.

If you would like to know more information about what we can offer and our pricing then please contact Abi on Abigail.askew@nwlmcs.org

For those practices who are currently in the drafting process, all agreements will be finalised/signed off before Abi finishes.

#### LMC Soapboxes

The LMC hosts regular 1 hour drop-in sessions via Microsoft Teams for all Practice Managers and GPs across Lancashire & Cumbria.

The soapbox is an opportunity for you to raise anything with your LMC, meet your representatives, hear about the services we can provide but most importantly, we would like to hear from you and how we can support you!

You are welcome to dip in and out -There is no requirement to stay the full hour and you are welcome to just listen. You will receive posters via email with details of how to join the Soapbox for your area. Upcoming Soapbox's:

- Lancashire Coastal 14th August 12:30pm 1:30pm
- Cumbria Tuesday 17th September 12:30 1:30pm
- Pennine Lancashire 3rd September 1pm 2pm

- Central Lancashire 10th September 1pm 2pm
- Morecambe Bay 5th September 12:30pm 1:30pm

#### **LMC Vacancies**

3 out of our 5 Committees have seats available for GP representation:

- North Cumbria 3 seats available
- Central Lancashire 3 seats available
- Morecambe Bay 1 seat available

We are keen to hear from GPs, including GP Registrars/ Trainees, who may wish to get involved to represent your constituents. Please let us know if you are interested in being a LMC member or would like to find out more.