



Update from the Consortium of Lancashire & Cumbria LMCs

Tuesday 28th September 2021

We Need You - Media Campaign

In recent weeks, GPs and their practice teams have been subjected to a systematic and cruel campaign by sections of the media, which has directly resulted in rising incidences of abuse and aggression being experienced by general practice. This has left many in the profession feeling demoralised and under siege.

The LMC is working with the ICS to raise awareness to patients of the immense pressure GPs and their staff are under, highlighting how practices have changed their way of working and how abuse is not tolerated.

However, we need your help to strengthen our media campaign. Please could we have volunteers within Practices to create a short video of themselves talking about current pressures and patient abuse. We appreciate that not everyone in the practice will receive this Brieflet, so we are asking for your support in sharing it to your wider team of both clinical and non-clinical members of staff. The LMC will then collate these videos and distribute across Lancashire & Cumbria. Please get in touch with [Mariah](#) if you are interested in this and she can provide you with more information. Your help will be truly appreciated.

We would like to thank you all for your incredibly hard work to keep up with demand. No matter what the media is saying – you are making a difference for people. Every person you speak to or see is helped by you. Most people appreciate this, it's only a few that don't.

Tackling abuse and meeting with the Secretary of State for Health and Social Care

Following [a horrific act of aggression against a practice](#) in Manchester, the BMA GPC [wrote to Sajid Javid](#) last week demanding an urgent meeting and summit to discuss the unacceptable level of abuse being levelled against GPs and their staff. They have also called for a comprehensive national violence reduction strategy. As a result of BMA GPC pressure, Dr Richard Vautrey, Chair of the BMA GPC, met with Sajid Javid face to face.

Dr Richard Vautrey highlighted the serious damage to morale the current anti-GP rhetoric was having on the whole profession, the fear that many on the GP frontline had and that this must stop. He raised the need for urgent action to challenge abuse against GPs and their staff, and support for the whole general practice workforce and called for legislative change to better protect the workforce. He stressed the need for Government to explain to the public why healthcare workers are still working within the constraints of infection, protection and control measures, that large numbers of face-to-face consultations were taking place every day and that clinicians would always see their patients when it was necessary to do so. They also discussed the value of telephone consultations as part of a mix of access offers - something that is increasingly appreciated by many patients who now receive more timely appointments as a result but whose voices are not being heard in the toxicity of media reporting.





Update from the Consortium of Lancashire & Cumbria LMCs

Dr Richard Vautrey also raised the essential need for longer-term premises development so we have the space to offer access to the increasing multidisciplinary team that is developing in many practices, in addition to being a safer place for patients with the on-going pandemic. He focused on the need to address the unsustainable workload pressures, the impact of the care backlog and secondary care work transfer to general practice and urged him to trust practices to deliver services to patients with long-term conditions without the rigidity, bureaucracy, and burden of QOF or unnecessary CQC inspections. They also called for far more action to enable practices to expand their workforce and for government to deliver on their own commitment of 6000 more GPs. But most importantly he focussed on the need to acknowledge, thank, and value the GP workforce who have gone above and beyond over the course of the pandemic from being pivotal in delivering the COVID vaccination program to continuing to keep seeing patients throughout the course of the pandemic.

BMA GPC now demand that the Government take immediate action to tackle the abuse against GPs and their practice staff, which is having a serious impact on the wellbeing and morale of the profession and provides both immediate and long-term support to practices at this critical time.

Read the BMA GPC [statement](#) following the meeting. Read the BMA GPC [message to the profession](#), including resources for [practices how to remove violent patients from your practice list](#).

Conflict management

The LMC have delivered a series of conflict management training events to support practice staff in dealing with conflict from patients. We will keep you updated on future events.

Dealing with abuse of practice staff on social media from patients

The BMA GPC have developed guidance on [how to protect yourself from online abuse](#) and the steps GP practices can take against patients who leave abusive comments on social media or websites. It outlines what to do first, how to report content to the provider and what criminal and civil actions are possible.

On top of what the BMA has been doing, [other GPs](#) are making it clear the pressures they're under. NHS Confederation is also showing their support in their statement '[Standing with primary care](#)' where they 'stand unwaveringly in support of the vital contribution of primary care members'.

Media intrusion

There is national awareness that with the intense national media vilification of General Practice some journalists are approaching local practices directly for comment. We would like to highlight there is no obligation to respond to the media. There is also concern that some publications will send photographers to practices looking for photos designed to support their narrative of primary care being hard to access. The Editor's Code of Conduct which guides the practice of press organisations in the UK says that journalists should identify themselves when asked to do so and *that no journalists should operate on healthcare property without permission*, this applies to photographers as well. So, if practice staff see a possible photographer who is not welcome then the best advice is to ask them to identify themselves and then ask them to leave.





Update from the Consortium of Lancashire & Cumbria LMCs

Support for GPs

There has been some recognition from the [Deputy Prime Minister, Dominic Raab, who thanked GPs](#) in answer to a question by Robert Langan MP to get GPs to see patients face-to-face. Mr Langan said GPs have done a brilliant job and are working long hours in challenging circumstance, but many constituents have raised concerns about seeing their GP face-to-face. Mr Raab paid tribute to GPs by saying “I join him in thanking GPs for the heroic job they have done in seeing us through the pandemic” and said appointments have returned to pre pandemic levels.

COVID vaccinations

Phase 3 and booster vaccinations

The [roll out of the COVID booster vaccination](#) programme has started last week, for the eligible cohorts (aged 50 and over, health and social care workers, and those [clinically extremely vulnerable](#) aged 16 and over). Those who have had their second vaccine at least six months ago are eligible, and in line with JCVI advice, people should receive either one dose of the Pfizer vaccine or half a dose of the Moderna vaccine, which means for some people their booster dose may be different from the vaccines they had for their first and second dose. People could also be offered a booster dose of the Oxford/AstraZeneca vaccine if they cannot have the Pfizer/BioNTech or Moderna vaccine.

Updated [Patient Group Directions and national protocols](#) for use for Pfizer BioNTech Covid-19 Vaccine BNT162b2 and Comirnaty have been published.

Overprescribing report

The [national overprescribing report](#) was published yesterday by the Department of Health and Social Care. The key recommendations from the review are:

- the introduction of a new National Clinical Director for Prescribing.
- system-wide changes to improve patient records, improve handovers between primary and secondary care, develop a national toolkit and deliver training to help general practices improve the consistency of repeat prescribing processes.
- improving the evidence base for safely withdrawing inappropriate medication
- cultural changes to reduce a reliance on medicines and support shared decision-making between clinicians and patients, including increasing the use of social prescribing
- providing clear information on the NHS website for patients about their medication
- the development of interventions to reduce waste and help deliver NHS’s net zero carbon emissions.

Although the BMA GPC agree with the overall aim and recommendations and are pleased to see the growing number of practices that now have pharmacists working in them and increasingly making a difference both in terms of quality care and workload reduction - something the BMA GPC lobbied hard for - this report omits to understand that the cost of achieving change is enormous, with a service so overstretched with targets demands and a dwindling tired workforce in all health service sectors.





Update from the Consortium of Lancashire & Cumbria LMCs

It also fails to highlight how difficult it can be to access alternative services, with long waiting times and limited interventions, leaving GPs with lack of support for their patients with acute and often complex needs. It is also regrettable that international comparators and any lessons learned from overseas haven't been incorporated into the report.

The good work that general practice does do in managing multiple co-morbidities and complexity, having to make complex decisions in partnership with patients within a very resource poor environment, should be acknowledged.

Pension deductions by PCSE

There is national awareness that around 2,000 practices did not have pension deductions taken for one or more GPs from June through August. PCSE stated the majority will have the deductions in total taken from payments to practices during this month's payment runs. The deductions will be taken from the first payment processed by PCSE during the month, be that global sum or any other payment. Where the deduction total is greater than this payment the balance will be taken from the next payment during this month.

PCSE has stated that they have communicated this to affected practices. They have advised that practices will also receive a separate statement with details of the pension's deductions being taken and that it will be important that practices compare both statements to ensure they have the full view of payments in vs the deductions.

READY Paramedics – A Realist Review of Paramedics

Working in General Practice | 13 October 2021 | 9am -11.30am

Due to differences in the way that paramedics are employed within general practice, it is difficult to compare practices that employ paramedics with those that do not to find out which patients get a better service and how much it costs. Ready paramedics are therefore using an established method called 'Realist Evaluation' to look at what works best, for whom, in different circumstances.

The next stage, the Consensus Exercise, is to test and refine these theories with a group of people who have knowledge and experience about how paramedics work in general practice. The information shared during the Consensus Exercise will help prepare for the next stage of evaluation, in-depth case studies with general practices.

If you would like more information about the Consensus Exercise, please contact the study co-leads:

- Dr Sarah Voss: 0117 328 8906 or e-mail sarah.voss@uwe.ac.uk
- Dr Matthew Booker: e-mail: matthew.booker@bristol.ac.uk

If you would like to attend, please register for free [here](#).

Wellbeing

Check out the [wellbeing section of our website](#) which offers a variety of sources with the aim of supporting GPs and Practice staff, in Lancashire and Cumbria, to find ways of improving mental health and wellbeing.





Update from the Consortium of Lancashire & Cumbria LMCs

Primary Care Workforce Wellbeing Project – Lancashire & South Cumbria Primary Care Cell (PCC)

Overview of the project

The last 18 months have been the most challenging in our careers. Chronic excessive workload is beginning to be recognised as an issue within the NHS, and it is vital we understand it if we are to progress to a more positive work experience.

The Lancashire and South Cumbria PCC have commissioned a local consultancy that specialises in health and wellbeing– [HWBInspiration](#) to gain your thoughts and views around:

- Wellbeing in Primary Care and measures of wellbeing
- National and local wellbeing support and accessibility

What they need from you – participants for interviews and focus groups to talk to us about your awareness of health and wellbeing support (between October – November)

Time commitment:

- 1 hour for interview
- 2 hours for focus group
- You attend an interview or a focus group

Who they are looking to involve:

- GPs (partners or salaried)
- Clinical Directors
- Practice managers
- Practice nurses
- Admin and clerical – including receptionist and other ‘assistant’ type roles

They will use what they hear in very practical ways locally and influence nationally.

Please contact lou@growthandchange.co.uk to take part in the project so they can arrange suitable times for the interviews and focus groups to take place.

