



Update from the Consortium of Lancashire & Cumbria LMCs

Tuesday 30th May

Safe working and preparing for balloting on industrial action

Current working conditions are not safe, for patients or GPs, and the contractual changes imposed by NHSE in April do not recognise the immense [pressures that GPs](#) are under. Practices are strongly encouraged to continue to use the BMA [safe working guidance](#) to help prioritise safe patient care, within the present bounds of the GMS contract.

The BMA GPC has voted to prepare to ballot GPs on industrial action if the Government does not agree to improve the contract drastically in forthcoming negotiations. The BMA will be communicating directly with GPs and LMCs over the coming weeks and months.

As we mentioned on last week's Brieflet, the [LMC UK Conference](#) representatives passed a motion calling for the GMC, who has already confirmed they will not act against junior doctors taking industrial action, to extend this pledge to GPs, should they also invoke their legal right to take industrial action.

By law, only BMA members can participate in a ballot on industrial action, and the more BMA members working collectively sends a powerful message to government. If you are a member, please ensure your details are up to date to ensure your vote counts. You can update your member details on [the BMA website](#) or [join as a member](#) today.

EMIS reverses panic button decision

Further to feedback from many LMCs including those from our Consortium, BMA GPC has lobbied to retain the EMIS panic button. EMIS have now confirmed that the panic button will continue to be available for practices who wish to keep it. More information will follow from EMIS on this.

Access to GP records

The BMA have published further guidance on the access to records programme [here](#).

The BMA are taking further legal steps in challenging the way this is being rolled out and we will keep you updated.

Annual flu letter

UKHSA and NHSE have published the [annual flu letter for the 2023/24 flu vaccination programme](#). Practices should be aware that there are no changes to the reimbursable vaccines from the 2022/23 programme. Further details will be available once the specification has been agreed and published.

Labour Party's NHS plan - Building an NHS fit for the future

Earlier last week Sir Keir Starmer [announced the Labour Party's NHS plan Building an NHS fit for the future](#) and in his speech he declared that Labour will modernise appointment systems and get salaried GPs to serve all communities. The BMA will be writing to Sir Kier to ask how they are planning to do this, highlight the huge benefits of the independent contractor model, and offer to help shape their finer detail. Read the [statement in response](#) to the plan by Phil Banfield, Chair of BMA Council.





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Workforce data

The latest [workforce data](#) shows that the number of fully qualified GPs has significantly declined since September 2015. In April 2023, NHSE had the equivalent of 27,231 fully qualified GPs, which is 2,133 fewer than in September 2015.

Over the past year the NHS has lost the equivalent of 512 fully qualified full-time GPs, 428 GP partners and 149 salaried, locum and retainer GPs – creating a net loss of 577 individual GPs from the NHS since April 2022 – more than 1 GP per day.

This coincides with a rise in patients: as of April 2023, there was a record-high of over 62.43 million patients registered with practices in England. As a result, the average number of patients each full-time equivalent GP is responsible for continues to rise and is now 2,292. This is an increase of 355 patients per GP, or 18.3%, since 2015, demonstrating the ever-mounting workload in general practice.

Read more about the pressures in general practice [here](#)

BMA briefing on the GP delivery plan

In May 2023, NHSE and DHSC jointly published their [Delivery plan for recovering access to primary care](#), setting out how they intend to tackle the '8am rush' and make it easier and quicker for patients to access primary care services.

Whilst some BMA recommendations have been incorporated into the plan, it falls short and fails to address the severe inflationary cost pressures all practices currently face. The BMA are also concerned that the continuing cuts to public health funding and the lack of adequate investment in practices and community pharmacies will negate the commitments set out in the plan.

Alongside the BMA initial [press statement](#) responding to the plan's publication, they have also [produced this member briefing on the report](#).

We will share resources to support implementation of the primary secondary care interface elements of this plan when it becomes available.

Oliver McGowan Mandatory Training on Learning Disability and Autism

All GP practices in England must ensure their staff receive training in learning disability and autism, including how to interact appropriately with people with a learning disability and autistic people. This requirement was introduced by the Health and Care Act 2022 in July last year.

The government's preferred training programme is the [Oliver McGowan Mandatory Training on Learning Disability and Autism](#). However, the Act does not specify a training package or course for staff. The CQC [cannot tell practices](#) specifically how to meet their legal requirements in relation to training, and while NHSE and ICBs may share the government's training programme preference and encourage uptake, it is ultimately for practices to determine how their staff are trained to meet their legal requirements. Further information is available [here](#).





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OpenSAFELY

In recent months the BMA GPC's Digital Transformation Policy Group, along with the Joint GP IT Committee, have been providing scrutiny to the forthcoming Data Provision Notice (to be sent under the COVID-19 Directions from the Secretary of State for Health and Social Care) that will allow [OpenSAFELY](#) to continue to operate as a Trusted Research Environment (TRE) once its [COPI permission expires on 1 July 2023](#). It has been a complex process regarding information governance.

The proposal speech to Motion 12 at the conference of England LMC representatives last November referenced the OpenSAFELY TRE as one that has the support of the profession. This remains the case. Practices will not need to do anything and formal communication from NHSE explaining the evolving legal basis for operation will be coming soon.

Transfer of Primary Care Complaints function to ICBs

From 1 July 2023 the way members of the public make a complaint about primary care services to the commissioner is changing. Rather than contacting NHSE, they will contact their ICB.

Members of the public will still be able to make a complaint to the provider - This is not changing.

For practices requiring any advice or support with complaints, please do not hesitate to [get in touch](#).

Recording and reporting the method/mode of appointments in General Practice

New functionality is now available on GP systems to allow users to accurately record the methods (sometimes referred to as mode) of an appointment. This will help improve how appointment data is recorded in general practice.

System users will now need to select one of the standardised method options for every appointment:

- Face to face (home visit)
- Face to face (surgery)
- Telephone/audio
- Video with audio
- Written (including online)
- Not an appointment.

These options will be displayed when users create a new slot type or amend an existing slot type. Practices should refer to the individual guidance provided by their supplier for further details.

LMC pages and guidance for practices

See your LMC GP representatives [here](#)

See upcoming LMC and non LMC training events: [Training & Events](#)

Follow us on Twitter: [@nwlmc](#)s

Contact us for advice and guidance on all things General Practice: enquiries@nwlmc.org

