



# Update from the Consortium of Lancashire & Cumbria LMCs

Monday 2<sup>nd</sup> November 2020

## New LMC Website

Our new website is now live! Check it out [here](#).

## GP appointments data

The latest [GP appointments data](#) was published last week, which shows that there were 6.5 million more appointments in September than in August and almost a million more appointments than in September 2019. The data also shows that there were:

- 4.7 million more face-to-face appointment in September than in August
- 56% of appointments in September 2020 were face-to-face and 38% of appointments were via telephone, compared to 81% and 13%, respectively, in September 2019.
- 1.8 million more same day appointments in September than in August, with 1.5 million more same day appointments than in September 2019.
- Over 2 million more same or next day appointments in September this year compared to August 2020 and September 2019.

This data shows that despite the pandemic and what has been portrayed in the media, General Practice remains open and is delivering more appointments than this time last year. The BMA [tracker survey](#) (see Q30) also shows that remote consultations actually take longer than face-to-face ones, leaving GPs more tired and with longer working days as a result - so simple appointment numbers only tells half the story of the change taking place. Read the BMA statement in response [here](#).

The BMA sent the [attached letter](#) to NHSEI yesterday to highlight concerns over the increasing pressures in General Practice and the immediate need for NHSE/I support. We are reinforcing these national messages through our briefings to the local media.

Secretary of State for Health and Social Care, Matt Hancock, has [recorded a video message](#), thanking all NHS staff for their work during COVID-19 and going into the winter. Nikki Kanani, Medical Director of Primary Care for NHSE/I has also sent a [message of thanks to Primary Care](#).

## Tracker survey results

The BMA's [latest tracker survey](#) was published last week which shows that more than 74% of GPs responding are quite or extremely anxious about work in the coming months and 47% say their levels of stress, anxiety and emotional distress had got worse since the pandemic began.

64% of GPs reported higher than normal level of fatigue or exhaustion from working during the pandemic and 62% reported that they or a clinical colleague in their practice had been forced to self-isolate within the past two weeks - with 39% of all respondents reporting a 'moderate' or significant' impact on patient care. View the [GP specific results](#) and the [BMA statement here](#).





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## COVID-19 vaccination

Recent media reports have highlighted the possibility of a COVID-19 vaccination being available by December. Government have been planning for this, but it depends on a number of fundamental issues such as the effectiveness of the early vaccines once trials have completed, the quantity that can be produced, supply logistics and the licencing arrangements.

As previously informed, JCVI have published their [interim recommendations](#) outlining the priority for vaccination.

The BMA are now in negotiations with NHSEI to agree the role that General Practice will play in the vaccination programme. The BMA have successfully made the case to government that practices are experts in mass vaccination, as is clearly demonstrated by the current massive flu campaign, and patients, particularly those who normally receive a flu vaccination, would expect to receive their COVID-19 vaccination from their local practice team. We will keep you updated on this.

## General practice workforce initiatives

The BMA have published a guide about the range of [workforce initiatives and schemes](#). The guide includes helpful information about what is on offer in each of the scheme and how to apply for them.

The BMA have also published a new guide to applying for the [GP partnership scheme](#), which will help navigate what can be a complicated application process. The scheme was launched on 1 July and supports clinicians who are interested in becoming a practice partner. You can read more in this [blog](#) by Krishna Kasaraneni, member of GPC England's Executive team and workforce lead.

## No change to CQC fees

The CQC fees scheme will not change in 2021/22. This means, for most providers, their fees will remain the same as in 2019/20 and 2020/21, providing registration or size does not change. The fees for General Practice remain fully reimbursable. [See here for the fees scheme, guidance and calculator.](#)

## Coronavirus regulations 2020

The temporary changes that were made to adoption medicals and the consent for electronic repeat dispensing (eRD), as part of the Coronavirus Act 2020, have now been reviewed. It has been agreed that they will remain in place until 31st March 2021, when they will be reviewed again. For more information on eRD please see [here](#). For information on adoption and children medicals see [here](#).





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## RCGP Cumbria event

Tuesday 10th November 17.20-21.00hrs. Free to college members, £5 non-members

The Cumbria RCGP faculty has partnered with North East England faculty in their annual lecture and have arranged an online event featuring both the RCGP President Amanda Howe and RCGP Chair Martin Marshall. This is a fantastic opportunity to hear the views of national leaders in General Practice on key aspects of the profession at this challenging time. For more information and to register for them event please see [here](#).

## Impact of COVID-19 in the workplace - Blog from Peter Labbett, LMC HR consultant

Reflecting on the various impacts of COVID-19 on our daily engagements, it strikes me that one of the emerging trends we are seeing from our contacts at the LMC is how the pandemic might be affecting relationships in the workplace. This is as a result of the extra stresses and anxieties that the pandemic brings in terms of maintaining and delivering the levels and quality of services in very trying times and to those working at the front line of those services. It seems, from experience, that these pressures almost certainly can become a source of day to day tensions in the workplace between colleagues at work and with others that they come into contact during the working day.

These are my own observations formed from experiences over the last few months, and, it seems that there may be grounds, where such tensions do arise, that they may be better managed in the present circumstances by relying less on a procedural approach to dealing with conflict management in the workplace through use of local policies and procedures.

Instead, I wonder whether it be more beneficial to adopt a more supportive, sympathetic, and empathetic approach through engagement to understand anxieties and concerns better, and to try to work through them jointly. A “softer” approach could be more productive by focussing on the mental and psychological welfare of staff when abnormal behaviours at work may be indicative of individuals simply struggling to cope in the circumstances.

The LMC HR team will be happy and ready to offer support and advice as appropriate to reflect specific circumstances that might apply in individual cases.

