



Update from the Consortium of Lancashire & Cumbria LMCs

Tuesday 29th March 2022

Rebuild general practice campaign launch

GPs and their teams faced an extremely challenging time during the COVID-19 pandemic. At the same time, general practice in England continues to face a worsening workforce crisis.

In response to this, the BMA and GPDF have launched the [Rebuild General Practice](#) campaign which all LMCs have been involved with. To launch the campaign, Dr Kieran Sharrock, GPC England Deputy Chair, gave a [keynote speech](#) at the King's Fund, where he was joined by Jeremy Hunt MP, to outline the impact on patients that the workforce crisis is having.

You can read more about the launch event on the [BMA website](#).

It is vital that we all build as much support for the campaign as possible. You can find more information on the [campaign website](#). You can also follow and share content, news, and updates on the campaign [Twitter account](#).

The LMC will be liaising with the media and will be writing to MPs to raise awareness of the campaign.

For more information on how to get involved and to access campaign materials, please get in touch with [Mariah](#).

Future of general practice - Health Select Committee evidence

Dr Kieran Sharrock gave oral evidence on the [future of general practice to the Health and Social Care Committee](#), where he told of the ongoing criticism and general negativity about GPs and general practice must end if the NHS wants to retain the doctors we have and recruit more.

Read the [BMA press statement](#) and get a snapshot of the session on the [BMA's GP twitter account](#)

New policy for applications to the Performers Lists

NHSEI has published a [new policy for applications to the Medical Performers List](#) (MPL), which introduces a number of changes including the removal of duplicated checks, introduction of more nuanced support tailored to the specific needs of the performer, and confirmation that performers are able to increase or decrease their scope of work whilst on the MPL.

It is hoped by NHSEI and the BMA that the new policy will bring positive changes for GPs in England. It is anticipated that it will allow a quicker application process due to the reduced documentary evidence required, and that most applicants will be able to be included on the list with an education and/or clinical support plan and a probationary flag. These applicants will not require consideration by a Performers List Decision Panel. Read more [here](#).

If you have any questions or feedback on implementation of the new policy, please contact info.ret@bma.org.uk

GP contract changes guidance

Following the [announcement of the GP contract changes](#) for 2022/23, which will come into effect from 1 April, BMA GPC have now published an [explainer video](#) explaining what this will mean for practices.





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Financial pressures of the 22/23 GMS contract

The imposition of the 4th Year of the 5-year GMS deal saw no new money coming into core general practice.

- Global sum will increase by 3%, from £96.78 to £99.70 per weighted patient
- The value of a QOF point will increase by 3.2% from £201.16 to £207.56 due to an increase in the average number of patients per practice.
- The inflation uplift provides for a 2.1% pay uplift for all GPs, practice staff and practice expenses.

Against this background:

- Activity and associated costs continue to significantly rise year on year.
- Inflation on non-staff costs is likely to be significantly higher than 2.1%, not least in energy/fuel bills and its knock-on effects on other goods and services
- The increase in NI contributions has not been recognised or funded.
- The increase in the living wage of 6.6% will have a significant impact on pay differentials in practices.
- DDRB is due to recommend pay increases to salaried doctors which may not be contained within the 2.1% envelope
- Costs of locums continues to rise as demand outstrips supply.

Practices are now having to rise to the challenge of providing more and more services and activity within a diminishing financial envelope. What help would practices find useful in addressing these financial challenges?

- Individual practice financial planning support
- Individual practice workforce / skill mix review
- Increasing non-core income
- Workshops / training sessions
- A ready reckoner for practices to assess the impact of these changes.

BMA guidance to the financial implications of the contract can be found [here](#).

MCCD and death certification

There has been queries raised around seeing a body, and about having 'seen' or 'attended' a body for the issuance of an MCCD.

Please note, to complete an MCCD there is no legal requirement to have 'seen' a deceased patient in the 28 days before or after death, however, if a deceased patient has not been seen in the 28 days before or after death, the registrar will automatically refer this to the coroner.

We will be sending further guidance out tomorrow.





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Infection Prevention Control in healthcare settings

Although the COVID restrictions have been lifted, the [Infection Prevention Control](#) (IPC) guidance for healthcare workers remain in place and still advises that face masks should continue be worn by staff and patients in health care settings.

Read also the BMA's briefing in response to the Government's '[Living with COVID-19](#)' strategy which sets out the plans for managing COVID-19 going forward. Download the BMA's updated [poster about using face coverings in practices](#).

Friends and Family Test

The requirement to submit Friends and Family Test (FFT) data was temporarily suspended in March 2020 to allow resources to be freed up for prioritisation during the pandemic.

The requirement that practices report to commissioners about the FFT returns will now be reintroduced into the GP Contract from 1 April 2022. To allow practices time to get fully up to speed, practices will only be required to submit data from Q2 in 22/23 onwards and commissioners will be made aware of this.

Practices will need to implement the new [FFT guidance](#), and the key requirements for practices are:

- make the FFT available for people who want to use it to give feedback
- use the standard FFT question (Overall, how was your experience of our service?)
- include at least one free text question, decided by the practices
- submit monthly data to NHSE using CQRS.

Emergency GMC registration to end in September

The UK government [has announced](#) that the temporary emergency GMC registration they introduced to support the pandemic response, will close on 30 September 2022. The GMC will shortly be in contact with doctors who still hold this type of registration to outline their options and to thank them for holding this type of registration during such a challenging period. The options are likely to include retaining temporary emergency registration until the 30th September deadline, asking the GMC to remove it, or applying to restore their routine registration and licence to practise.

Read more about temporary registration on the [GMC website](#)

Flu orders

Following the recent publication of the [guidance for the 2022/23 flu programme](#), some practices may have based their orders on last year's expanded cohorts and be experiencing difficulties in amending them.

BMA GPC raised this with NHSE who have assured that they have received commitments from manufacturers to being flexible if the reimbursement letter impacted existing orders. If manufacturers are refusing to be provide this flexibility, practices should contact the NHSE flu inbox (phco.fluops@nhs.net) with the specifics and they will assist.





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Fit Notes

In July 2021, the Government outlined plans to deliver fit note improvements including:

- removing the requirement to sign fit notes in ink (from April 2022) and allowing a wider range of eligible professionals to sign fit notes in (planned for summer 2022).
- embedding electronic fit notes in hospital systems are planned from spring 2022 and encouraging hospital doctors to issue fit notes to patients in their care will also further reduce the burden on GPs.

Further detail of these changes from the DWP are expected over the coming weeks to enable awareness of and preparation for them. We will update members accordingly.

Re-registering suspended patient records

Practices will soon be able to allow suspended patient health records to be electronically transferred on re-registration following an upgrade to the GP2GP system. Suspended patient records are those which belong to patients not currently registered with a GP in the UK, for example, if they've moved abroad.

The change is expected in May, and it will mean suspended patient records will arrive via GP2GP rather than in paper format. You will still need to print and handle suspended records as usual until NHS England and NHS Improvement can receive and hold records electronically via the GP2GP system later this year.

[Find out more information about the upgrade on FutureNHS](#). You will need to register if you don't have an account.

LMC Member Vacancies

We still have GP vacancies available on the following committees:

- Lancashire Coastal LMC – Far North
- Morecambe Bay LMC – Barrow and Furness & South Lakeland
- Cumbria LMC – Eden & Allerdale

If you work in the above areas and are interested in representing your constituents as a committee member, or would like to find out more, please get in touch [Mikaela](#).

To see a list of your current LMC representatives, please visit our [website](#).

Members of the LMC office can be found [here](#).

