Worcestershire Local Medical Committee Ltd

NEWSLETTER

18th July 2022

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Rising Covid cases and pressures on health services.

The BMA is concerned about the <u>rise in COVID-19 cases</u> and hospitalisations in recent weeks, and the reports that the UK has now recorded 200,000 Covid-related deaths since the start of the pandemic, particularly in the context of the significant and rising pressures on NHS staff. GPCE support calls by the all-party parliamentary group for coronavirus for a compensation scheme for frontline workers.

The BMA has also <u>called publicly</u> for the UK government to do more to protect the NHS by bringing back mandatory mask-wearing for patients when they are in healthcare settings, ensuring regular testing for staff, and making sure that there is reliable access to appropriate PPE throughout the health service.

GPCE have recently updated their guidance on risk assessments for GP practices emphasising that

employers must continue to conduct risk assessments for those who come into contact with COVID-19 and take steps to mitigate risks identified.

The BMA will continue to monitor the COVID-19 data and pressures on health and care services, to ensure we are in a good position to respond to the changing situation.

Alongside the COVID-19 specific activities, GPCE continues to press for appropriate resourcing and staffing of the NHS to support staff and ensure the NHS is able to respond to the increasing pressures – please see the most recent press release here.

The BMA is also undertaking a <u>COVID-19 review</u> to ensure that lessons are learned and members' voices heard, and the first three reports from this review have now been published.

Rise in GP appointments

Recent ONS data show that <u>UK services output grew in May 2022</u> with human health and social work activities growing by 2.1%, mainly because of a large rise in GP appointments, with 24 million in April 2022 jumping to 27.6 million in May.

These figures are yet another example of how hard GPs and their teams are working, but also why we desperately need more resources to close the workforce gap in primary care. This is not a sustainable way of working, and GPs desperately need more support if they're going to be able to carry on providing this level of care. We don't have enough GPs, and when taking on more work, they open themselves up to more stress, burn out, and exhaustion - potentially having to reduce their hours or leave the profession altogether, creating a vicious cycle of even fewer GPs, and ultimately threatens safe patient care.

Our new Health Secretary has the opportunity to right the wrongs done to general practice, and the wider NHS, by giving it the appropriate funding and resources it so desperately needs to close the growing workforce gap and safely meet patient demand. All doctors want to do is give the best care they can, but without proper support, this is becoming increasingly hard to do. Read the full statement by Dr Farah Jameel, chair of GPC England, here

Firearms marker in England

There will be a temporary pause on the digital firearms marker for practices using the EMIS system, effective from the evening of 14 July 2022 (today). The digital marker system on EMIS should be back up and running after a few weeks, and after it has been cleared through the JGPITC (Joint General Practitioners Information Technology Committee). This temporary pause is to address some issues that have been communicated by GPs and practices including our own LMC and to enable testing of the accuracy and completeness of the flags that are currently popping up. We hope to be in a position to provide an update on the digital marker soon.

Certifying fit notes

There is guidance and training available to support the new rules about who can certify fit notes. Employers and healthcare professionals should read <u>the guidance</u> that provides a summary of the knowledge, skills, and experience that healthcare professionals eligible to sign fit notes are expected to have **before** undertaking this task. Healthcare professionals eligible to certify fit notes should also complete the e-learning training programme which is freely accessible <u>here</u>.

Introduction of ICS's

As of 1 July, the 42 ICSs (Integrated Care Systems) across England have 'gone live' as statutory bodies, taking formal control over the planning, commissioning, and funding of NHS services across their footprints. <u>Visit the BMA's dedicated webpage</u> to learn more about ICSs and what they mean for GPs and the NHS.

The move to statutory ICSs follows the enactment of the <u>Health and Care Act (2022)</u> and also marks the end of CCGs (Clinical Commissioning groups) which have been dissolved, with their powers, funding, and many of their staff transferring over to local ICSs.

GPC and the BMA continue to lobby ICSs on our core priorities, particularly on the need to enhance representation within ICSs for GPs, including positions on ICS boards for LMCs.

PCN DES opt out window

In light of the expressed will of LMC conference and GPCE motions, after having made clear to practices how they may withdraw from the PCN (primary care network) DES (directed enhanced service) in the last opt out window, a further opt out window was requested. This would have occurred prior to October 2022, the time at which EA (enhanced access) arrangements come into force, and would have allowed practices unable or unwilling to provide these additional hours to withdraw from the DES without endangering their core contracts.

NHSE (NHS England) considered and then declined GPCE's request, so there will be no additional opt out until April 2023, which is the standard annual window. The DES will therefore continue as published in the year. NHSE have recently emphasised their commitment to ensuring everything is done to support PCNs and commissioners to overcome resourcing hurdles. That said, GPCE is encouraging all practices to carefully consider the implications for continuing with the provisions of the PCN DES past April 2023 and GPC will be developing a framework to support practices in their modeling and decision making in advance of this deadline.

Inclisiran

As you may be aware the LMCs, BMA and RCGP have long standing concerns regarding the roll out of Inclisiran within primary care. Following on from the publication of the joint position statement in December 2021, GPC have continued discussions with NHSE/I regarding the roll out of inclisiran, an injectable lipid lowering therapy, within primary care. They have now sent a further joint letter to NHSE/I on the topic, laying out our position and re-establishing our core concerns which were highlighted by colleagues. These concerns include the lack of long-term efficacy and effect on cardiovascular outcomes, lack of long-term safety data and the workload implications of managing and prescribing the drug in primary care. The updated position statement can be found on the RCGP website.

Pensions Committee - MP roundtable event and debate

On Wednesday 6 July the BMA Pensions Committee Officers held a MP roundtable event focusing on the impacts of pension taxation on the workforce and proposed solutions were discussed. The session was chaired by Dan Poulter MP, who is also an NHS psychiatrist, and attended by 12 MPs and 4 MP representatives.

The aim of the session was to highlight to MPs that pension taxation is a significant driver for doctors to take early retirement and reduce working, and that there is even more of a major cause for concern this year as a result of rapidly rising inflation. This relates to a discrepancy in the way pensions are revalued/dynamised and a disconnect between different measures of inflation used in the calculations. This affects career average revalued earnings pensions schemes and therefore as GPs have effectively always been in such a scheme, it is a much bigger issue for GP pensions than it is for hospital doctors. The Pensions Committee has developed a tool that you can use to model the impact of this "CPI disconnect" for your own personal circumstances. This outlines the issue in more detail and discusses the solutions that we are calling for.

National Standards of Healthcare Cleanliness 2021

GPC have recently been asked if the National Standards of Healthcare Cleanliness 2021 guidance is mandatory for general practice. They sought clarification on this from CQC last year and it was made clear that it will continue to regulate based on the actual regulations and the official code of practice. Its <u>infection control mythbuster website page</u> addresses this directly.

They also clarified the contractual position at that time, receiving confirmation that it was not a mandatory requirement. There has been no contractual change since then.

GPC England committee pages and guidance for practices

Read more about the work of the GP_Committee

Read practical guidance for GP practices

See the latest update on Twitter: <u>@TheBMA / Twitter</u>, <u>@BMA_GP / Twitter</u> <u>@DrFJameel / Twitter</u>

Read about BMA in the media: BMA media centre | British Medical Association

WORCESTERSHIRE LMC LIMITED

All topical issues relating to local general practice are discussed at the monthly LMC meetings and those minutes can be read on the LMC Website.

Should you require further information on any issues raised at the LMC meetings please do not hesitate to contact the LMC representative for your area or practice.

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