

YORLMC News

For practices in North Yorkshire & York and Bradford & Airedale

COVID-19 vaccination programme guidance

The BMA has published [guidance](#) about the CVP which is being regularly updated. This includes clarification that the latest information on the vaccines suggests that patients do not need to be observed following administration of the vaccine, but patients must not drive for 15 minutes after.

A new section has been added about how practices can utilise the resources and contractual flexibilities provided, including the use of PCN staff, extended access services and using QOF and local enhanced services income protection to enable workload prioritisation, and considering what is needed to practically deliver the vaccine and workforce issues.

GPC Chair Dr Richard Vautrey has also written a blog about GPs taking a lead role in defeating the virus which you can read [here](#)

Workload prioritisation during COVID-19 pandemic

In response to the COVID-19 pandemic, and rising workload pressures the BMA has prepared [joint guidance](#) with the Royal College of GPs to help practices prioritise the clinical and non-clinical workload in general practice.

GPs and their teams must be supported and enabled to provide care that best serves the needs of their patients, in a way that adds most clinical value and keeps patients, clinicians and staff safe from the risk of contracting COVID-19.

Whatever steps are taken to manage workload, we must not undermine the message that general practice remains open and that patients will be seen face to face where it is clinically appropriate.

RCGP campaign - General practice is open

The Royal College of GPs has launched a [campaign to make it clear to patients that general practice is open](#) and that general practice services are available, albeit being delivered differently than usual in many cases. The RCGP is urging patients, if sick, to continue accessing general practice - and other NHS - care throughout the second national lockdown.

They have produced downloadable resources for GP practices across the UK to support GPs to get the message out to patients about general practice being open, and how they can expect care to be delivered. These can be shared on practice websites, social media or any other channels.

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Messages of thanks to general practice

Following a tumultuous time and lack of appreciation of general practice, both by Government and the media, general practices have now received some welcome messages of thanks.

In a recent [press briefing by the Prime Minister](#), Sir Simon Stevens, Chief Executive of NHS England, said “we are doing very well thanks to the brilliant work of GPs in expanding the flu vaccination uptake this winter which is so important given that if you have flu and coronavirus at the same time you’re twice as likely to die from coronavirus than you otherwise would, that’s why it’s so great that 2.5 million more people have had their flu jab this time this year compared to the same time last year”.

In addition, Jo Churchill, health minister in England with responsibility for primary care, has written a letter of thanks to GPs and practice staff for their work throughout the pandemic. She expressed appreciation about the unprecedented pace at which general practice has adapted in response to COVID-19 and how primary care services have been transformed by introducing total triage, delivering remote consultations alongside face-to-face appointments in order to serve as many patients as possible, while protecting staff and the public from risk of infection. She also highlighted the high workload in the health service and how grateful she is for the efforts GPs and all practice staff continue to make to support patients. Read the full letter [here](#)

Secretary of State praises GPs’ pandemic response

Matt Hancock, Secretary of State for Health and Social Care in England, led a recent No 10 briefing and in response to a question from the media he said:

“What I’d say to every GP is how grateful I am for the work that you’re doing, and your whole practice, everybody in primary care, both on the flu vaccine right now, which is being rolled out in record numbers – we’ve had a record uptake, we’ve had a 10 percentage point increase in the normal uptake of flu vaccines and that’s really good news – and of course on the normal pressures of primary care. I’m really glad that a much bigger proportion of appointments in primary care are now done either over the phone or by video because that makes life easier for GPs and patients and there’s been a really positive response to that. But that doesn’t of course lift the whole burden, even though it makes access easier. I want to thank in advance GPs for all the work that I know that they’re doing now and that there’ll be even more of this winter to keep people safe.”



Guidance for doctors who are isolating and those in vulnerable groups

With national restrictions in place, the Government is [advising](#) people who are clinically extremely vulnerable to work from home. The link also includes a link to guidance that will come in on 2 December. BMA [guidance](#) is also available.

Patients who are on the shielding list have received a letter directly from government about what they should do, and a copy of the letter is sufficient to give to an employer as evidence for Statutory Sick Pay purposes – and patients should therefore not need a fit note issuing by the practice.

Read more in the BMA guidance for practices on [protecting clinically extremely vulnerable patients](#)

Temporary approval to suspend the need for signatures on prescriptions

The Secretary of State for Health and Social Care has approved [a temporary measure in England to help limit the transmission of coronavirus by suspending the need for patients to sign prescriptions](#) until 31 March 2021, to avoid cross contamination and help minimise the handling of paperwork when collecting medicines.

Patients are still required to either pay the relevant charge or prove their eligibility for an exemption from charges. Where patients are exempt from charges, the dispensing contractor will mark the form on the patient’s behalf to confirm the patient’s entitlement to exemption and, where applicable, to confirm that the patient’s evidence of eligibility has not been seen. Read more [here](#)

Update from Dr Brian McGregor

YORLMC Medical Secretary



Dear Colleagues

Cameron Fund Associate membership

The [Cameron Fund](#) is the medical benevolent charity that provides support solely to GPs in the UK. This includes GP Trainees, working GPs, retired GPs, as well as dependants of GPs.

The Fund helps GPs and their families who are suffering financial hardship, whether through physical or mental ill-health, disability, bereavement or loss of employment. There is more detail on the [YORLMC website](#).

Following a decision taken by Cameron Fund members at their AGM, the Cameron Fund now offers Associate Membership. Colleagues working in the GP profession who are not GPs, for example Practice Managers, can now support the Fund's work by becoming Associate Members. There's more information in the letter at [Appendix 1](#) and an application form at [Appendix 2](#).

GPC England meeting

GPC England has held its first meeting of the session and spent significant time considering the important work being undertaken in general practice in response to COVID 19. There was also an important discussion on the preparations for the delivery of the COVID vaccination in primary care. We also received update reports from the sessional GPs committee, GP trainees committee and GPC policy leads. These focused on a number of recent developments including pay and contracts, well-being, and education and training issues.

Other items on the agenda included, an update on issues relating to Digital First, considering the BMA council decision about submitting evidence to the DDRB, and an update on the DHSC/NHSEI bureaucracy review of general practice.

With best wishes,
Brian



DWP Work Capability Assessments

The Department of Work and Pensions has issued a plea for GP practices to return requests for further evidence for [Capability for Work Assessments](#) as quickly as they can. People who have made these applications are often suffering financial hardship, hence their concern.

The following is the DWP statement: "DWP are currently prioritising Work Capability Assessments for new claims to Universal Credit / Employment and Support Allowance and continuing to process all Personal Independence Payment claims. Ensuring individuals can access financial support in a timely manner is essential and we would therefore ask GPs to treat requests for further evidence as a priority."

GP workforce figures

The latest [GP workforce figures](#) showed an overall increase in number of GPs including trainees which is good news. Recruiting new GPs is a crucial factor in turning around our workload pressures. However there is still a continued and worrying decline in the number of FTE GPs and GP partners specifically over the last year.

Recent schemes aimed at improving recruitment and retention, such as the partnership premium, the GP fellowship scheme, and the expansion of GP training places may help in the longer term, but the Government must do much more to turn these figures around, to show that GPs are valued and make general practice a genuinely attractive place to work again.

The importance of ensuring a representative PPG

Covid has highlighted significant health inequalities in our population. One of these is the impact and increased risk it has on our BAME community. We need to consider how we as a profession are engaging to address these inequalities and demonstrating our awareness and our involvement in managing this risk and dealing with it head on.

A first step for many practices could be to ensure they are engaging with their BAME community, and can clearly identify how that communication takes place, the obvious first point of contact would be your PPG. We would encourage practices to ensure they are engaging with their communities and to have a two-way discussion about how best we as a profession and in collaboration with our communities can act together to ensure that information is shared, that people are aware of pathways and where to access help, what additional support is available, and how best to manage signs and symptoms, alongside reinforcing the public health messages so vital to reducing spread and risk.

Since 2015 it has been a contractual requirement for all GP practices to have a Patient Participation Group, the main purpose being for practices to obtain the views and feedback of patients about the services delivered by the practice.

There are a number of requirements around establishing and maintaining PPGs, one of which is that practices must make reasonable efforts to review the membership of their PPG to ensure the group remains representative of the practice's registered patients. As part of this requirement practices should demonstrate that they have made reasonable efforts to engage with any under-represented groups, including patients with mental health conditions or protected characteristics as identified in the Equality Act 2010. To do this practices need to have an understanding of their Practice profile, and this should go further than considering age and sex i.e. this could include factors such as levels of unemployment in the area, number of carers, BAME groups, LGBT community.

It is also worth highlighting that as part of inspections, CQC reviews the following aspects of engagement and involvement:

- *Are the people who use services, the public, staff and external partners engaged and involved to support high-quality sustainable services?*
- *Are people's views and experiences gathered and acted on to shape and improve the services and culture? Does this include people in a range of equality groups?*
- *Are people who use services, those close to them and their representatives actively engaged and involved in decision-making to shape services and culture? Does this include people in a range of equality groups?*
- *Are staff actively engaged so that their views are reflected in the planning and delivery of services and in shaping the culture? Does this include those with a protected equality characteristic?*
- *Are there positive and collaborative relationships with external partners to build a shared understanding of challenges within the system and the needs of the relevant population, and to deliver services to meet those needs?*

Both HCV and WY ICSs are currently undertaking BAME engagement reviews. YORLMC recommends that practices also consider reviewing this important aspect of engagement and particularly in regards to the contractual requirements around PPGs as highlighted above.



Flu vaccines

Flu vaccination programme

The Department of Health in England have announced that all those over-50 can be included in the influenza programme from 1 December. Practices can order additional vaccines from the national store.

Following the impressive work of practices in recent weeks, flu vaccine uptake is higher in all vulnerable groups except pregnant women compared to this time last year. Provisional data published by PHE suggests 72.9% of those aged 65 and over, 45.0% of 2 year olds and 46.8% of 3 year olds have had their vaccine.

Updated DES Specification for flu

Following the announcement and the recent publication of guidance, an updated [DES Specification for the seasonal flu and pneumococcal vaccination programme 2020/21](#) has been published to reflect practices now being able to access central flu vaccines supplies.

Influenza immunisation call and recall error

The BMA is aware of some practices being approached by concerned patients after mistakenly having been sent letters from NHSE/I telling them they should book a flu vaccination. The BMA raised this with NHSE/I, and have now been informed that this was in response to an error made by NHS Digital.

In developing a cohort of people at greater risk from influenza for NHSE/I, NHSD mistakenly included those who had a diagnosis of glandular fever at some point in the past. Although current glandular fever causes people to be immunosuppressed, past glandular fever does not.

As a result, a number of people incorrectly added to that cohort received letters from NHSE/I encouraging them to have a flu vaccination. When the mistake was discovered, the process of sending letters was stopped, and the misidentified people removed from the cohort.

Practice managers & the “New to Partnership scheme”

It is regrettable that practice managers are currently excluded from the New to Partnership scheme.

Currently a sudden rise in income for someone on a final salary scheme in the 5 yrs prior to retirement has significant tax implications for the practice. YORLMC is aware nationally of 3 practices who, having made their PM a partner who then subsequently retired within 5 years, receiving tax bills of more than £250,000 each. The practices are liable, even though it is the PM that receive the enhanced pension.

There is a willingness to include this vital workforce group but this can only happen once a solution to this issue is found.

Performance Tracker 2020: How public services have coped with coronavirus

The Institute for Government and Chartered Institute of Public Finance and Accountancy have published [Performance Tracker 2020: How public services have coped with coronavirus](#).

The report highlighted that the disruption in general practice caused by coronavirus led to years of change in a matter of weeks and that the best of these reforms – improved collaboration – must be kept and expanded. It is suggested that the government should promote increased data sharing, combined with greater transparency about how patient data is shared and used. The government should also assess the impact of increased use of technology, particularly remote consultations, on care quality, service efficiency, patient satisfaction and staff wellbeing.

It concluded that the government should invest more in IT equipment and training for staff to maximise the potential benefits.

Highest ever GP trainee acceptances figures

Health Education England (HEE) has published figures which show the highest ever number of GPs entering training in England with 3,793 posts accepted, exceeding their target of 3,250.

GP trainee acceptances have increased year on year for the last 7 years and these figures represent a 40% increase on the figure of 2,700 recruits when HEE started its recruitment drive back in 2014.

This is welcome news, and a sign that the changes that we have made is leading to more and more young doctors are being attracted to a career in general practice. Read more [here](#)

Letter to Secretary of State for Health on the need for CQC support for general practice

The BMA has received a response from the CQC (Care Quality Commissioning) to our letter which urged the CQC to halt all non-essential inspections and practice monitoring to allow GPs and their teams, currently under immense pressure, to focus on the job at hand during the pandemic. Disappointingly, the CQC are not prepared to change their transitional regulatory approach, although it has confirmed that it will only inspect based on risk – i.e. where there are serious concerns around safety and quality of care.

GPC Chair Dr Richard Vautrey has now written to Matt Hancock (see [Appendix 3](#)) to raise concerns about this calling again for an immediate suspension of all CQC inspections and reviews of general practice, other than those required for serious safety issues. This should be for the duration of the pandemic and to enable practices to focus on other priorities, not least the COVID-19 vaccination programme.

PCNs - evaluation study

The University of Birmingham has published a new research report: [Early evidence of the development of primary care networks in England: a qualitative rapid evaluation study](#).

Their findings show that PCNs were swift in successfully establishing organisational structures, recruiting to new roles, and providing services as required by the national specification. Effective management and leadership were critical to enabling early progress of PCNs, particularly with respect to having a committed clinical director, and constructive relationships between primary care networks and clinical commissioning groups. However, in rural areas, there was some perceived lack of fit of the PCN policy with aspects of the national network service specification.

Read more [here](#)

Avoidable harm in Primary Care

BMJ Quality has published a [national study on avoidable significant harm in primary care in England](#), which showed that the frequency of incidents of significant avoidable harm in primary care, and also important new details.

According to the research the main causes are diagnostic error (more than 60%), medication incidents (more than 25%) and delayed referrals (nearly 11%).

GP trainee mileage update

Issues around the GP trainee mileage clause over the last year have now been resolved. [Guidance](#) which has been published by NHS Employers and is applicable to both back dated and future claims.

DS1500 research

DWP is researching how services supporting the journey of accessing and completing a DS1500 for special rules claims affects practitioners, patients and other individuals involved in this process.

They are currently looking to conduct research with GPs/ Consultants/Specialist nurses/ MacMillan nurses/others involved with the process to understand more about your role and experience with the DS1500 so that they can improve the whole journey for all involved.

They are looking to talk to GPs on an individual basis to understand your experiences, these sessions will last approximately 1 hour. If you would like to take part in this research or have questions around the project please contact Hannah Knowles (User researcher) Hannah.knowles@engineering.digital.dwp.gov.uk

New to Partnership programmes

Details of Haxby Group Training Ltd's New to Partnership programme are available at [Appendix 4](#) and there's information about the Qualitas Pathway to Partnership: New Partner Development Programme [here](#).

Bone health card to help patients stay on osteoporosis medication

Each year a large number of people suffer from fragility fractures, and over three quarters of people who are prescribed osteoporosis medication are not on treatment a year on from their fracture.

The Royal College of Physicians' Fragility Fractures Audit Programme (FFFAP) has, in collaboration with the BMA's GP committee and the Royal College of GPs, developed [the bone health card](#) to help patients with fragility fractures to discuss their medication and any issues with their primary healthcare team to ensure key information is discussed when reviewing medication and where to get further information and support.

Mental health and wellbeing

The BMA continues to offer [wellbeing services](#) and confidential 24/7 counselling and peer support for all doctors and medical students, as well as their partners and dependents, on 0330 123 1245. For hard copies of the Wellbeing [poster](#), please email wellbeingsupport@bma.org.uk. Access the [BMA's COVID-19 wellbeing pages here](#). There's more information about YORLMC's wellbeing services [here](#).

YORLMC services

Buying Group

Members of the LMC Buying Group can access discounts with any of the suppliers on the attached list at [Appendix 5](#). To access these discounts, you can either login to the Buying Group website and request a quote or if you contact the supplier directly, you need to make sure you mention your practice is a member of the LMC Buying Group or state the discount code from the suppliers page of the Buying Group website.

If you were using an approved supplier before you became a Buying Group member or have been using a supplier for a long time and aren't sure if you are receiving the correct rates, you can email to check: info@lmcbuyinggroups.co.uk. For further information on LMC Buying Group member benefits or to speak to a member of the team, you can live chat via their website: <https://www.lmcbuyinggroups.co.uk/> or give them a call on: 0115 979 6910.

Jobs page

YORLMC has a job page on our website at <https://www.yorlmcld.co.uk/jobs>. Please visit this page to view current vacancies and details of GPs seeking work. NHS Practices in the YORLMC area seeking to fill GP and staff vacancies and GPs seeking work in the YORLMC area can place adverts on the job page free of charge. To place an advert please email info@yorlmcld.co.uk



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