YORLMC News

For practices in North Yorkshire & York and Bradford & Airedale



The new GPM plus website has been launched with information about the range of mentoring and wellbeing services available to practices. These services are delivered via LMC Services Yorkshire CIC. The CIC operates under the trading name GPMplus and was set up by YORLMC Ltd in late 2020 to deliver wellbeing support to practices, and are available to access free of charge thanks to grant funding from NHSE/I. Services available include:

Free peer-mentoring

Up to 8 hours of 1-1 mentoring with a trained mentor experienced at working in General Practice.

NEW - We now have Practice Manager Mentors available to provide support

NEW - The Healthy Practice

The Healthy Practice model provides a range of tools for practices to utilise (coming soon) as well as a suite of wellbeing education courses covering:

- Personal resilience courses suitable for the whole practice team
- Teams resilience courses suitable for practice management, team leaders, partners
- Practice systems resilience courses suitable for senior management and partners

A range of courses are already available to book immediately and more courses will be added regularly.

Wellbeing resources

Bringing together a series of websites, tools and services to support you in your day -to-day work.

Visit our new website at www.gpmplus.co.uk for more information and to access

Please do consider and discuss the GPMplus offer within your practice team meetings.

25 July 2022

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Message from Dr Brian McGregor

Dear colleagues

Conference motions

The England Conference of LMCs will take place on Thursday 24 November. All LMCs in England are invited to suggest motions for debate at the conference and those motions passed will become policy for GPC England. YORLMC is inviting all GPs and Practice Managers to give their ideas for possible motions for debate at the conference.

You can also send your thoughts direct to us at info@yorlmcltd.co.uk. Have a think about what causes you the biggest problems and what wrongs you would like to see made right. Motions that propose solutions or action are more likely to be prioritised by the national conference agenda committee than a motion reflecting sentiment. Guidance on writing motions is available on the BMA website Please send us your thoughts by 22 August.

Freedom to speak up guardian

As I mention in my most recent update, YORLMC is not the FTSUG for primary care. Following careful consideration by the Board of YORLMC Ltd there was agreement that taking on this role would be inappropriate as the LMC would be automatically conflicted if a member of staff e.g. a salaried GP came to us with concerns and the LMC was left to deal with the conflict between GP Partners and Staff. Guidance is available, and the recommendations are either to partner up with another practice or negotiate accessing an acute Trust FTSUG or NHSE management FTSUGs. Please do not name YORLMC as your Guardian in this respect.

Brian

Dr Brian McGregor, YORLMC Medical Secretary





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</u> <u>quidance</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 here.

Letter from GP for travel with medication

It has been brought to the BMA's attention that some <u>airlines</u> are advising travellers bringing medication in their hand luggage, should bring a letter from their medical practitioner confirming the type of medication and what it is for.

The BMA will raise this issue with the relevant airlines, but in the meantime, they would remind practices that patients can print off their medical record from the NHS app, or alternatively, practices are able to charge for travel-related requests for information.

Message from Angela Foulston

We are in a period of significant change for our healthcare system. The next 18 months will be critical to the future of General Practice as ICSs develop and they settle and develop into their roles and responsibilities.

Brian mentioned in his recent update that he felt the timing was now right for him to consider stepping up to a national role. I am delighted therefore to share the news with you that he has been elected to the position of Speaker, GPC England. In this role he will "Chair" GPC England meetings, much as the Speaker in the House of Commons does. Anyone who has attended any of Brian's regular Q&A sessions will know how well qualified he is to carry out this key role.

A number of changes have taken place recently within <u>YORLMC's Corporate Affairs</u> <u>Team</u>.

I am delighted to share the news that Kate Mackenzie has taken on the newly created role of Communications Officer. Kate has been a CAT member for 8 years supporting North Yorkshire & York and more recently Bradford & Airedale and has a background in campaigns and communications.

Natasha Ori-Orison has also recently joined the CAT as an Executive Officer.

Natasha will support Bradford & Airedale Branch Officers to plan agendas, produce meeting papers and undertake meeting follow up for the AWC and Bradford Localities. She will also act as the first point of contact for queries relating to Bradford, Airedale, Wharfedale & Craven GPs and practice teams.

As general practice evolves, so must our offer to practices and in recent years, as well as making more use of virtual platforms for meetings and events we have hugely increased our wellbeing services, now delivered via GPMplus. Stacey Fielding has had a key role in the development of the wellbeing workstream and is, as Director of GPMplus, the operational lead for all GPMplus services.

I will share further updates as the CAT continues to evolve. In the meantime it is very important to us that we are providing the services that you need to support you in your working life. Very soon we will launch a consultation to gather your thoughts on the services currently delivered by the LMC as well as your view on the future direction of the LMC and the methods by which you would like to receive information from us. This will help us to ensure our offer matches what you need to help make your life easier and support your practices.

When the consultation is launched in early September, we hope you will share your feedback with us. That feedback will be important in shaping the future direction of YORLMC's work and ensure the LMC continues to deliver services and support that are appropriate for your needs.



Angela Foulston, YORLMC Chief Executive



BMA committee elections

Nominations to the following BMA committees are open:

Private Practice Committee (PPC)

Professional Fees Committee (PFC)

<u>Civil and Public Services Committee</u> (CPSC)

Armed Forces Committee (AFC)

The deadline for nominations is **12pm Friday 29 July**.

To submit your nomination, please login to the BMA's <u>election system</u>.

To participate in the election, you must be a BMA member and hold the relevant position for the specified seat.

For more information about the committees and the positions available please visit the committee webpages linked above or visit the elections system to access the elections guide.

If you have any queries regarding the election process, please contact <u>elections@bma.org.uk</u>.

Meet the team

Dr Sally Tyrer & Dr Cath Chapman

The <u>BMA's Annual Representative Meeting</u> took place on 27-29 June, setting policy for the BMA. YORLMC Medical Secretary Dr Brian McGregor attended alongside North Yorkshire Branch Chair Dr Sally Tyrer and Scarborough & Ryedale Locality Officer Dr Cath Chapman. There's more information below about Sally, Cath and their YORLMC roles.



Dr Sally Tyrer

As Chair of the North Yorkshire & York Branch of YORLMC, Dr Sally Tyrer provides leadership of General Practitioners within the North Yorkshire and York area. She leads negotiation and liaison with stakeholders on behalf of the Branch and is also a Director of the YORLMC Ltd Board.

Sally qualified as a GP in 2010 and has been a partner at the Lambert Medical Centre in Thirsk for 9 years. Prior to this she also experienced being a salaried GP and a locum. She has been an LMC member since 2014, and was elected as Chair in 2019. She is also Clinical Director for Hambleton South PCN.



Dr Cath Chapman

As YORLMC Scarborough and Ryedale Locality Officer, Dr Cath Chapman provides leadership of General Practitioners within the S&R locality and is a member of YORLMC's Executive Committee. She chairs the Scarborough and Ryedale locality meetings. Cath is a Partner at the Filey Surgery and is Clinical Director for Filey & Scarborough Healthier Communities Network.

For more information about attending YORLMC locality meetings, including meetings dates, please see the YORLMC website for North Yorkshire & York and Bradford & Airedale information.



Firearms marker

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.

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, and to enable testing of the accuracy and completeness of the flags that are currently popping up. The TPP system will continue to run during this time.

The BMA hopes to be in a position to provide an update on the digital marker in the next few days.

Introduction of ICSs

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. Visit the BMA's dedicated webpage 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, the BMA requested a further opt-out window for the PCN DES. 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 the 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 year. The BMA would encourage all practices to carefully consider the implications for continuing with the provisions of the PCN DES past April 2023 and will be developing a framework to support practices in their modelling and decision making in advance of this deadline.

YORLMC continues to represent the local position that the PCN DES works well for many of our practices, we acknowledge and see the strain seen by our CD colleagues and the increasing demand, and also are aware that some PCNs feel the current IIF is not worth pursuing as the return will not justify the investment.

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 averaged 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 have 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.

As a next step, Dan Poulter MP tabled a debate on Wednesday 13 July which will focus on the effect of the Finance Act 2004 on NHS pensions and the recruitment and retention of staff.

National Standards of Healthcare Cleanliness 2021

The BMA has recently been asked if the National Standards of Healthcare Cleanliness 2021 guidance is mandatory for general practice. the BMA 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. The BMA 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.

Fees calculator

A reminder about the BMA's Fees calculator, which helps doctors decide how much to charge for their services based on their own circumstances. The Fees calculator uses your overheads to calculate a fee range for the time it takes to complete a piece of work. The calculations are specific to you, and you can see what rates you would need to charge to make sure your costs are covered. You can find out more about how the tool can help you save money and save time.

Inclisiran

As you may be aware the BMA and RCGP have longstanding concerns regarding the roll out of Inclisiran within primary care. Following on from the publication of the BMA and RCGP joint position statement in December 2021, discussions have continued with NHSE/I regarding the roll out of inclisiran, an injectable lipid lowering therapy, within primary care. The BMA and RCGP 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 to us by their members. 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.

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Rising covid cases and pressure 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 and services and the removal of special COVID leave for NHS staff. The BMA has called on the government to reverse this deeply damaging decision (see the Guardian article <u>here</u>) and will continue to press for improved financial and wider support for everyone unable to work due to long Covid. The BMA also support calls by the All Party Parliamentary Group for Coronavirus for a compensation scheme for frontline workers.

The BMA has also called publicly 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.

In the absence of clear government guidance, the BMA has <u>written to NHS Trusts</u> reminding them of their legal duty under Health and Safety laws to undertake appropriate risk assessments and setting out the protective measures that individual Trusts can take to mitigate risks to healthcare staff and patients in healthcare settings.

The BMA has also recently updated its guidance on <u>risk assessments for GP</u> <u>practices</u> 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.

Alongside the BMA's COVID-19 specific activities, it continue 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.

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Rise in GP appointments

Recent ONS data show that <u>UK</u>
services output grew in May
2022 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 resource 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 viscous cycle of even fewer GPs, and ultimately threatens safe patient care.

The new Health Secretary has the opportunity to put 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



YORLMC services

Buying Group

Members of the LMC Buying Group can access discounts with any of the suppliers on the attached list at Appendix 1. 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.yorlmcltd.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@yorlmcltd.co.uk

YORLMC Corporate Affairs Team vacancy

As a result of expanding workload YOR Local Medical Committee Ltd (YORLMC) has a vacancy for a Business Support Officer and invites applications to join its friendly, highly motivated professional team. The successful candidate will work in an attractive environment with excellent opportunity for personal and professional development.

Full details can be found on the <u>YORLMC website</u>. The closing date for applications is **Monday 1 August.**

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