

YORLMC News



Message from Dr Doug Moederle-Lumb, Chief Executive, YORLMC Ltd

Dear colleagues

I am a Trustee of the Cameron Fund which is the medical benevolent charity that provides support solely to GPs in the UK. It provides grants and loans to assist doctors and their families experiencing financial difficulties due to short or long-term illness, relationship breakdown or hardship following the actions of regulatory bodies or former partners.

Those colleagues who were able to join us at the recent YORLMC wellbeing seminars will have heard moving stories from representatives of the Cameron Fund about doctors who have been supported by the fund. These (anonymised) examples demonstrated the huge difference support from the Cameron Fund can make.

Anyone who knows of someone experiencing hardship is urged to draw attention to the Cameron Fund's existence - <http://www.cameronfund.org.uk/>. Please do also consider becoming a member of the Cameron Fund as increased membership will help raise the profile of this charity. There's no charge to join and GPs can apply to become a member using the form at <https://www.cameronfund.org.uk/media/1281/membership-application-form-2016.pdf>.

I wish you all a happy Christmas and a peaceful New Year.

*Best wishes
Doug*

For practices in North Yorkshire & York and Bradford & Airedale *November 2019*

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YORLMC update:

Wellbeing, support to PCNs & how to access YORLMC's network of training

YORLMC has a track record as a progressive and forward thinking LMC.

Having worked through the NHS Long Term plan and 19/20 Contract reform documents earlier in the year YORLMC recognised it was essential to make a number of key changes in order to maximise the opportunities for real transformational change that will improve the working lives of clinicians and patient outcomes.

YORLMC's training & development model was developed in 2015 and launched 2016. General Practice has however changed considerably since 2016. As a result, and in line with a number of LMCs, YORLMC is no longer facilitating training. Instead GPs and practices are now signposted to YORLMC's [network of training providers](#) developed over the last few years. If your training needs are not covered by the organisations listed or if you have a specific query please contact the Corporate Affairs Team for further advice: email: info@yorlmc.co.uk or phone: 01423 879922.

Throughout 2019 YORLMC has increased its investment in education and support to GPs and practice teams and we are pleased to advise that the benefit of early changes are already being seen.

YORLMC's developing [Wellbeing](#) framework, led by Dr John Bibby and supported by the Corporate Affairs Team is focusing on a number of areas including prevention and provision of 1:1 support where this is needed. During October YORLMC hosted its first Wellbeing conferences. The feedback received was excellent and will inform future conference programmes.

YORLMC is also providing a range of support to [PCNs and Clinical Directors](#). Having taken on the role of PCN & System Integration Lead, Dr John Crompton, supported by Stacey Fielding, YORLMC's Director of Liaison (Stacey.fielding@yorlmc.co.uk) is

- providing coordinated support and guidance to emerging PCNs and Clinical Directors including use of a locally based list-server to inform and interpret national guidance and share best practice
- bringing CDs together at place-based level to move forward the integration agenda, working with key stakeholders and local services and integrating with current YORLMC, CCG/NHSE liaison structures
- bringing together CDs views at system level to develop a coordinated and consistent voice within the emerging ICS's and support PCNs in implementing wider system change
- working hard to secure the funding and other resource needed to support the development needs of CDs, practice managers and the non-clinical colleagues they work alongside

A number of further workstreams are in development and details will be shared with GPs and practices very soon.

Patient access to records online guidance

GPC England and NHS England have published joint guidance on [patient access to records online: prospective record access](#).

This guidance aims to support practices in meeting the commitment to give new registering patients online access to prospective data, subject to existing safeguards for vulnerable groups and third party and system functionality.

Pensions tax payment for 2019/20

Simon Stevens, chief executive of NHS England and NHS Improvement, has announced plans for covering the costs of tax on the annual allowance for 2019/20. He has stated that the annual allowance tax charge for this financial year (for anyone that incurs it) will be covered via the scheme pays route and that when the individual retires and claims their pension, the NHS will pay to them the value of the tax charge for 2019/20 (including interest accrued), so covering the cost.

The BMA has responded to this proposal which can be found [here](#). The BMA is continuing to liaise on the details of how this will operate, as well as continuing to lobby for longer-term solutions, including proposals to get rid of the annual allowance altogether.

NHS England's letter and FAQs are available [here](#)



Registration of individuals leaving the secure residential estate

In June 2019, NHS England and NHS Improvement issued information reminding CCGs and GPs of a contractual change in the NHS England Standard General Medical Services (GMS) Contract 2017/18 (see page 64), which means that people can now register with a GP practice prior to their release from the secure residential estate (such as prisons, young offender institutions, immigration removal centres and secure training centres).

The aim of this is to help these individuals maintain continuity of care, avoid unplanned emergency admissions to hospital, and support their rehabilitation. Such individuals can also be initially reluctant to register with their GP practice post-release. Practices should be updating their procedures, as set out [here](#).

NHS England has been advised by healthcare providers working within the secure residential estate, that not all GP practices are aware of this, which has resulted in a number of issues with registering individuals with a community GP practice prior to their release. To help prevent this from happening, and support the registration of these patients, practices are encouraged to familiarise themselves with this process. If you have any queries, please email england.healthandjustice@nhs.net

Performers list to be moved to PCSE online

In December 2019 the management of the performers list will be switched to PCSE online. This will mean that rather than applying for changes to the performers list using paper forms, it will all be processed online. This is intended to provide better transparency of changes to the performers list and provide a more efficient service. Practices will already have received notification to the CQC registered manager to enable approved practice staff to administer practice-based changes to the performers list.

New bulletins from PCSE on the performers list and also on pensions are available at [Appendix 1](#) and [Appendix 2](#).



LMC England Conference

The webcast from the 22 November [Conference of England LMCs](#) is now available to view [here](#). You can also access the conference resolutions and GPC Chair Dr Richard Vautrey's full speech [here](#).

Workforce data

NHS Digital published the [workforce data](#) for this quarter, which showed a significant shortfall in GPs as well as doctor vacancies remaining high. According to the statistics, there were 9,319 medical vacancies in England in the second quarter of 2019/20, while there were more than 1,000 fewer full-time equivalent, fully-trained GPs in England than there were in September 2015 when the Government pledged to recruit 5,000 more. Read the BMA press release [here](#).

GPs as specialists in General Practice

The BMA has previously agreed a joint statement with the Royal College of GPs and the General Medical Council, which stated that GPs should be considered as expert medical generalists, and as such are specialists in general practice, and that therefore the GP and Specialist Registers should be merged. This week the BMA position has been supported by the Academy of Royal Colleges. Read their statement [here](#).

PCN organisational data service (ODS) codes published

NHS Digital has published [organisational data service codes](#) for Primary Care Networks, which will provide the PCN name, ODS code, affiliated practices, and 'lead' CCG for each PCN.

You can access the ODS codes for PCNs [here](#).

Social prescriber costs

Following calls from GPC England, LMCs, and PCNs, NHS England has agreed to extend the purpose of the ARRS (Additional Roles Reimbursement Scheme) funding for Social Prescribers.

The GPC is aware that nearly all organisations supplying a Social Prescriber Link Worker Service (SPLW) are passing on additional cost over and above the equivalent of the actual salary and the on costs, for example in administration fees.

The ARRS scheme will be updated so that, where a PCN engages an SPLW service through a supplier, a PCN will be able to claim an additional flat rate sum of £2400 per SPLW (on an annual WTE basis; to be pro-rated by the WTE and duration of the roles providing the service as appropriate) as a contribution toward those additional costs.

This must be affordable within the existing maximum annual reimbursable amount for social prescribing link workers. This will apply to any existing supply arrangements for SLPWs and any new supply arrangements for SPLWs agreed from this point forward.

Physician Associate information campaign

Health Education England (HEE) are encouraging physician associates to pursue careers in general practice.

The campaign which ran earlier this year was designed to encourage more physician associates to choose to work in general practice and to increase awareness of the benefits of employing physician associates among GPs and practice managers.

There is more information about the campaign, including materials which may be of use, at [Appendix 3](#).



Enhancing shared parental leave

The SPL (shared parental leave) scheme allows parents and adopters more flexibility in how they care for their child during the first year after birth/adoption. Currently the salaried GP contract only allows for enhanced maternity and paternity leave and statutory SPL. Maternity leave and pay in the salaried GP model contract is linked to the provisions of section six of the [GWC handbook](#), rather than the NHS terms and conditions handbook. As such, salaried GPs employed under the model contract are still only entitled to the statutory SPL provisions. The provision for GP contractors will be whatever is set out in their partnership agreements.

GPC England is looking at how enhanced SPL could be provided under the contract and wants to understand the financial impact it will have on practices, if any, in moving from statutory to enhanced SPL, as well as from enhanced maternity/paternity to enhanced SPL. Email info.gpc@bma.org.uk with examples of practices that have introduced enhanced SPL/pay and its impact. All information shared is confidential and will help GPC make the case for enhancement to NHS England. Read more in a [blog](#) by Sarah Westerbeek, of the Sessional GPs committee.

Prescribing costs for 2018-19 published

NHS Digital has published [Prescribing Costs in Hospitals and the Community: England 2018-19](#), which show the estimated costs at list price of medicines used in hospitals and prescribed in primary care. It includes the costs at list price, which is the basic cost of a drug excluding VAT.

It does not take account of any contract prices or discounts, dispensing costs, fees or prescription charges income.

Regulations around private services

GPs and practices are reminded of the change in regulations which mean that it is not permitted to offer (and advertise) private appointments to patients from NHS premises and during NHS time. An extract from the regulations is below:

Amendment of regulation 20 of the GMS Contracts Regulations

4. In regulation 20 of the GMS Contracts Regulations (services: general), after paragraph (5) insert—

“(6) A contract must specify that where the contractor proposes to provide private services in addition to primary medical services, to persons other than its patients the provision must take place—

(a) outside of the hours the contractor has agreed to provide primary medical services;

and

(b) on no part of any practice premises in respect of which the Board makes any payments pursuant to the National Health Service (General Medical Services - Premises Costs) Directions 2013(a) save where the private services are those specified in regulation 24(2B).”.

The definition of private services was also added as:

“private services” means the provision of any treatment which would amount to primary medical services if it were provided under or by virtue of a contract or agreement to which the provisions of Part 4 of the Act apply

Therefore,

- *GPs cannot provide private services which are the same as commissioned primary medical services, when they are contracted to work for the NHS*
- *GPs cannot provide private services which are the same as commissioned primary medical services, from premises that are paid for under the PCDs*

In addition, in combination with the existing regulations on charging patients, it:

- *allows charging non-registered patients for any services that are not commissioned as primary medical services*
- *precludes charging register patients, except for the specified items*



BMA health manifesto

With the forthcoming general election the BMA published [its manifesto for health](#) yesterday, where it set out its priorities for any incoming government:

- Reform the punitive pension tax system for doctors.
- Pay doctors fairly and address historic underpayments.
- Legislate for safe staffing.
- Increase spending on the NHS by over 4%.
- Give the public the final say on any Brexit deal.

NHS and GP pressures

To accompany the manifesto launch the BMA has also published updated analysis of the pressures likely to be faced by the health service this winter, available at www.bma.org.uk/NHSpresures

As we are all aware, GP surgeries across England are under significant strain with rising demand, practices struggling to recruit, and patients having to wait longer for an appointment.

Read more about the pressures practices are under [here](#).

Wessex model for workforce exchange

NHS England and NHS Improvement have published [guidance on how to run the Wessex Model for workforce exchanges](#).

This is a [high impact model for workforce exchanges](#) that is being scaled up after its continued success as an adaptable and enjoyable way of building relationships and trust between professionals working in integrated systems and across interfaces, to generate quality improvement and innovation in patient care.

NHS Leadership Academy – development opportunity

The Triumvirate Programme offers an innovative approach to enable multi-professional teams to learn and work together, delivering a positive impact for the individual, team, practice, and wider locality.

This funded programme is open to General Practice, Dental, Pharmacy and wider primary care teams who believe they will benefit from being part of the programme and who are ready to embrace organisational change.

For more information please see (the attached document) [Appendix 4](#) and visit <https://www.yhlacademy.nhs.uk/event/triumvirate-programme>

Remote prescribing high level principles

The GMC, and some other healthcare regulators and organisations, published their [Remote prescribing high level principles](#). The principles outline a set of expectations for UK healthcare professionals when prescribing remotely, whether online, over video-link or by phone. The principles encourage good practice in remote prescribing, and that health care professionals are expected to:

- Understand how to identify vulnerable patients and take appropriate steps to protect them
- Carry out clinical assessments and medical record checks to make sure medication is safe and appropriate
- Raise concerns when adequate patient safeguards aren't in place

Read the GMC press release [here](#).



Medicine shortages

A motion demanding urgent action with regard to medicine shortages was passed at the LMC England Conference on 22 November.

In response to this, Krishna Kasaraneni, GPC England executive team member, said: “Drug shortages can happen for lots of different reasons, but they are undoubtedly getting worse and becoming a daily frustration for both GPs and our patients. GPs often only know about shortages once a patient returns from the pharmacy needing an alternative prescription, which can not only add to our already crippling workload, but also, and most worryingly, delay patients’ treatment.

“Conference has therefore, acknowledged the benefits of giving pharmacists more control in prescribing safe and considered alternatives, and going forward, there must be systems in place to support pharmacists to ensure they have the necessary patient information to make informed decisions.”

This motion was reported on by the [Pharmaceutical Journal](#).

BMA launch new website

The [beta version of the new BMA website](#) is now live. It will run alongside the current BMA website until it has been developed to the point where it can replace it. Over 500 pages of redesigned content is available. Read more [here](#).

Access the GPC pages here: <https://beta.bma.org.uk/what-we-do/committees#general-practitioners-committee> The new [GPC UK page](#) has more information about the committee, such as the priorities, and also includes links to the GP bulletin, surveys and elections. BMA support services for GP practices are now here: <https://beta.bma.org.uk/advice-and-support/gp-practices#bma-support-services-for-gp-practices>

Legal action against NHS Property Services

The BMA is launching legal action against NHS Property Services (NHSPS) over “unjustifiable” rises in service charges faced by GP practices.

Practices leasing their buildings from NHSPS have seen their charges rise over the last three years, with no agreement, and sometimes being billed for services they are not receiving. Earlier this year the BMA wrote to NHSPS setting out why the BMA believes NHSPS is acting unlawfully, but received no acceptable response. Therefore, the BMA is now taking NHSPS to court.

At the LMC England Conference on 22 November, in response to this, Dr Richard Vautrey, GPC Chair, said: “It’s not acceptable that practices in NHS Property Services premises are left to pick up the cost of an unjustifiable hike in charges. As such, we will very shortly be lodging a legal test claim in court which, if successful, would provide a template for GP practices to defend unlawful claims for service charges by NHSPS. We must and we will stand up for GPs and take legal action when it’s necessary to defend our profession.”

Read the full statement [here](#).

BMA guidance is clear that practices should engage with NHSPS, identify areas where there is a dispute and pay undisputed amounts. Practices cannot be forced into any agreement which places the viability of the practice at risk and solutions must be sustainable.

Practices should be mindful that the BMA are proceeding with legal action to address historical charges and should ensure that in reaching any agreement independently of this they do not put themselves at risk of any future liability or compromise their future position.

Position statement on screening

The RCGP has published a [Position Statement on Screening](#) by organisations which have not been approved by the UK National Screening Committee, which the BMA fed in to and co-badged.



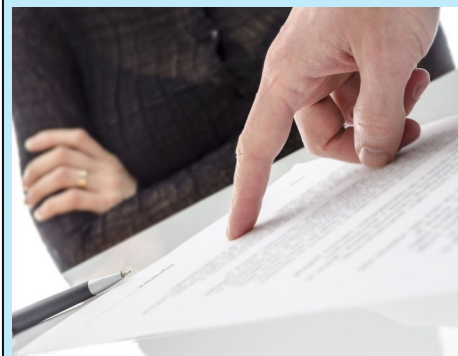
Case studies required to help the national GP recruitment campaign

HEE is having some success in recruiting more doctors to train as GPs – 3,538 were accepted onto GP training places for 2019-20, the highest ever number.

Applicant feedback indicates that accounts from GPs and GP trainees can inspire and influence the decisions of doctors as they choose specialty training. HEE needs more case studies for the [GP National Recruitment Office website](#). If you are willing to describe how you feel about treating your patients, what you’re able to achieve or something around the outcome or benefit(s), please email GP Recruitment gprecruitment@hee.nhs.uk.

This request for support does not negate the many difficulties our existing GP workforce currently faces. GPC is, however, keen to do everything it can to give the opportunity to and inspire this and future generations of newly qualified doctors to choose GP specialty training.

GPC has been working with HEE since 2013 to increase GP recruitment; its ultimate aim is to grow the qualified general practice workforce to levels that ensure workload reaches safe and manageable levels for *all* practice staff. GPC will continue to work with HEE, NHS England and NHS Improvement to do that and won’t rest until this collective objective is achieved.



Women in Academic Medicine survey

The Women in Academic Medicine group, which is part of the BMA's Medical Academic Staff Committee, has published a [short survey](#) to find out the reasoning behind a lack of diversity in academic careers. This is to understand the changes necessary to increase diversity and improve career progression as well as to determine the attractiveness of an academic career. They are particularly keen to hear from current and former medical academics, but there are questions for all doctors. Please pass this onto colleagues who may be interested.

YORLMC Buying Group & Member rates

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 whether you are receiving the correct rates, you can email the Buying Group 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.

YORLMC 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 contact the Corporate Affairs Team via info@yorlmcld.co.uk

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