

# LMC ViewPoint



*The newsletter of Leeds Local Medical Committee Limited*

*December 2019*

Merry Christmas Everyone from Leeds LMC

## **Annual allowance tax charge**

The BMA has now fully considered the proposals from NHS England and Improvement to provide emergency mitigation for clinicians that incur annual allowance tax charges in 2019/20. The GPC welcome their short-term plans to tackle the NHS pensions crisis, but have made it clear that further assurances must be made for GPs. NHSEI has committed to ensure that is the case and the BMA will work with it to ensure a solution is found to provide guarantees for GPs. Read the [BMA statement](#) and the NHSEI FAQs [here](#).

The story was covered in [GP Online](#), [Medscape](#), and [Practice Business](#)

## **Final pay control regulations for pensions (UK)**

The [final pay control regulations](#) were introduced from 1 April 2014 to protect the pension scheme from the costs that arise where an employer awards an exceptionally high pay rise to a member of the 1995 section of the NHS Pension Scheme, to achieve an inflated pension benefit. Under the 1995 Section of the NHS Pension Scheme, a scheme member's pension is calculated using their highest salary in their final three years of pensionable service. As a consequence, a member who has a significant pay increase in their final three years will receive a substantially larger pension than they would have received without the pay increase. Practice partnerships, as employers, can receive final pay control charges if they award a pay increase that exceeds the allowable amount.

Since the introduction of the regulations, a number of exemptions have been introduced to stop employers receiving a final pay control charge for awarding significant pay increases for genuine reasons. These recent exemptions include:

- pay increases that are necessary to comply with the national minimum wage and living wage
- nationally agreed annual pay awards for Agenda for Change employees

The BMA has been working with other trade unions, NHS Employers and Department of Health and Social Care to ease these regulations and allow for a far less strict interpretation of the regulations. As a result, we hope to see developments in the near future that will increase the allowable amount, add further exemptions to the final pay control regulations, allow more discretion in the regulations and restricting the payment of charges to being pursued above a certain minimum level. Practices should discuss this issue with their accountants.

## **Annual end of year pension administration**

NHS Pensions has confirmed that the following pension forms and associated guidance notes have now been published and are available to download from the NHS Pensions website [here](#).

The following pension forms and associated guidance notes have now been published:

- Type 1 GP and non-GP providers annual certificate of pensionable profits (partnership / single-hander) 2018/19
- Type 2 medical practitioner amnesty form - for use when forms not already submitted from years 2009/10 to 2016/17

Also available is:

- GP and non-GP providers annual certificate of pensionable profits (limited company) 2018/19

Available very soon:

- Estimate of NHS pensionable profits / pay form 2020/2021
- Type 2 medical practitioner self-assessment forms 2015/16, 2016/17, 2017/18 and 2018/2019

To help to accurately complete the Type 1 Certificate PCSE have provided a few [hints and tips](#). They have also worked with NHS England and the BMA to create a [guide](#) and [timeline](#) for End of Year pension administration. The guide includes information on submitting your pension forms via the PCSE [online form](#), information about adjusting your next contractual payment once PCSE has processed your end of year certificates and guidance on submitting forms without a hand-written signature via a secure email address.

As part of the requirements of the NHS Pension Scheme Regulations, scheme members need to return their Type 1 Annual Certificate of Pensionable Income or the Type 2 Medical Practitioner Self-Assessment form to PCSE by 28 February deadline. It is a legal requirement to complete and submit these documents each year.

### **New December Annual Benefit Statement (ABS) available**

NHS Pensions is issuing two GP Pension Annual Benefit Statements this year. The first phase was issued in August and the second will be on 18 December 2019. The December ABS will be available to view via [www.totalrewardstatements.nhs.uk](http://www.totalrewardstatements.nhs.uk).

When the December ABS is launched, scheme members should be able to see their latest statement if the following criteria have been met:

- All their historical certificates have been submitted correctly with accurate information by the 28 February 2019 deadline
- All their certificates have been processed by 11 October 2019 by PCSE
- They do not fall into an exception situation where the ABS will not show their details (see below)

When a member's certificate(s) have been processed the sender will receive a confirmation email from PCSE. Those who have received confirmation from PCSE by 11 October 2019 will see an updated December ABS (if all other criteria above are met). If confirmation was received after 11 October 2019 they will see their updated ABS in the August 2020 release.

Pension records can only be updated sequentially, if certificates from previous years are missing, the most recent years cannot be updated. For instance, if certificates have only been received and processed for the years 2010/11, 2011/12 and 2017/18 then the ABS will only reflect the pension figures up until 2012.

Once the missing certificates are submitted correctly and processed then this will update the system fully for the next ABS release. You can also request a pension's statement at any time directly from NHS Pensions. More information can be found on their website:

<https://www.nhsbsa.nhs.uk/member-hub/getting-estimate-your-pension>

### **PCSE online update**

The new [PCSE online service](#) for submitting Performer List (PL) applications and changes is now live and replaces the old paper forms. Every doctor on the PL will receive an email requesting that they set up their own PCSE online account and we expect all GPs to have received their invitation by Christmas 2019. This will enable GPs to check their details are correct and provide access to the new online system to make changes.

The email will be sent to the same email address used for professional communications with the GMC - any amendments to this email needs to be made via GMC online. However, the vast majority of GPs should receive an invitation from PCSE.

All GP practices will be sent a letter to their CQC manager, detailing how to register the practice for PCSE online. Only 20% of practices have so far registered; it is vital for the majority to register, as otherwise the system will not work efficiently. Historically there have been significant problems arising by such delays, particularly affecting appropriate pension deductions and prescribing numbers, so it is worth checking that your practice has registered.

Regulations require that a performer informs NHS England of change of status and details. Changes to contractual status also requires notification by the GP and confirmation from the practice and finally contract changes by NHS England, so both practices and individual doctors should sign up to PCSE online.

The new system will allow all GPs to check their details are correct, so it is worthwhile to log in to check the details, given the inaccuracies in the present list. There will inevitably be teething problems, but GPC is in regular contact with PCSE, so please do highlight any issues so we are aware and can work with PCSE to resolve problems by emailing [info.gpc@bma.org.uk](mailto:info.gpc@bma.org.uk)

### **Leeds LMC Wellbeing Seminar – Tuesday 31<sup>st</sup> March 2020 – Book your place today!**

Location: The Village North Hotel, Headingley Time: 12:00 – 5:00pm

Lunch is provided at this event.

In the face of unprecedented pressures, the landscape of the NHS is changing and the centre of gravity is moving rapidly towards primary care. As a result of the 2019 GP contract changes, including the development of primary care networks and the NHS Long Term plan, there is a move to address the challenges that GPs and practices are currently facing in terms of workload and workforce. At the same time the number of GPs and healthcare professionals suffering from burnout is increasing, with a recent BMA study finding that 40% of doctors are currently experiencing symptoms of depression, anxiety, burnout, stress, emotional distress or a mental health condition that is impacting on their work.

Leeds LMC is committed to providing its constituents with the support they require and has organised a Wellbeing Seminar on the 31st March for GPs, Practice Managers and other primary care staff, which aims to help colleagues to recognise the signs of burnout; understand the importance of their own wellbeing; and provide practical workshops sessions providing support/techniques on how to reduce the risk of burnout and stress in the workplace.

Speakers at the event include Prof Clare Gerada and Dr Rob Hendry, Medical Director at MPS. Please see the attached first draft agenda for more details.

Please book your place by emailing the LMC office [mail@leedslmc.org](mailto:mail@leedslmc.org)

### **Electronic Prescription Service update**

Phase 4 of the [Electronic Prescription Service](#) (EPS) is currently being rolled out on TPP SystemOne. Read more [here](#) and see the FAQs attached. The GPC IT policy group lead, Anu Rao, has also written a [blog](#) about EPS and the other work streams that the group are involved in.

Currently, dispensing practices are unable to use the EPS for medicines dispensed by the practice dispensary. Further information for dispensing practices has been produced by the DDA and found [here](#). The GPC continue to urge NHS England to enable the implementation of EPS for dispensing practices.

### **National General Practice Profiles: 2019 annual update**

Public Health England has published a data tool presenting a range of GP practice-level indicators using the latest available data in the [National General Practice Profiles](#). This tool is designed to support GPs, CCGs and local authorities to commission effective, appropriate healthcare services for their local populations. Users can search for and view data for individual GP practices and compare them with others in CCGs and across England.

## **Influenza Season 2019-2020**

As you are aware, a delay in the delivery of some influenza vaccines this year means that the flu vaccination programme started later than usual; further supply constraints then occurred with the children's nasal vaccine. Although these issues are now resolved, vaccine uptake rates nationally are around 5% lower than expected for this time of year for those in clinical risk groups under 65 years. Of particular concern is uptake for two and three year old children, which is around 8% lower than the same time point last year. The data suggests that practices are working hard to catch-up and we would like to thank all the GPs, practice nurses and other practice staff who support the programme. Unfortunately, however, we have already started to see early influenza activity in the community, particularly in the northern part of England. School children have been particularly affected and several paediatric deaths have already been reported, as well ICU admissions. The predominant strain causing cases this year appears to be well matched to this season's influenza vaccine, and so we hope that practices will be able to continue these efforts to ensure as many children and younger adults are protected as possible.

## **NHS Leeds CCG – Recruitment of Clinical Chair**

NHS Leeds CCG is recruiting a new Clinical Chair to lead the organisation following the retirement of the current Chair, Dr Gordon Sinclair on 30 April 2020. Further details are included in the attached letter, role description and application form. Applications are open to all practising clinicians within the CCG area, and the deadline is **5pm on Monday 13 January 2020**.

## **GMC State of Medical Education and Practice annual report**

The GMC has published its State of Medical Education and Practice [annual report](#). It notes that 45% of GPs reported working less than full time (61% female GPs compared with 26% male GPs), 36% have reduced their hours in the past year, and many are considering leaving the profession altogether (18% in the next year). Increasing workloads has resulted in two thirds of GPs working over their rostered daily hours with 19% taking stress related absence over the last year. 92% of GPs reported that they felt unable to provide sufficient levels of care at times while a quarter reported witnessing patient care being compromised. Despite this, the report also notes that around half of GPs are satisfied in their work, largely driven by a sense of fulfilment.

## **GP trainees' views on the future of General Practice – King's Fund report**

The King's Fund produced a [report](#) earlier this month based on a survey that received responses from 840 GP trainees in England. This repeated a survey they ran in 2016 and 2018. Key findings included:

- Only 27 per cent of trainees intend to work full time in general practice one year after qualifying and only 5 per cent after 10 years (down from 31 per cent and 10 per cent in 2016)
- The intensity of the working day remains the commonest reason for choosing part-time or portfolio work (69 per cent), although family commitments (66 per cent) and interest in other work like emergency medicine or palliative care (50 per cent) were also important factors. Other NHS clinical work or medical education continue as the commonest choices to combine with general practice as a portfolio career.
- Only 41 per cent of respondents are considering GP partnership at 10 years, down from 45 per cent in 2016; the most common reasons for this are the financial implications (58 per cent) and the lack of training in business matters (47 per cent).

It was also worth noting that in the 2016 survey, trainees reported they were considering portfolio working at a later stage in their career, but this year they saw an increase in the number of trainees considering it one and five years after qualifying (24 and 51 per cent, up from 18 and 44 per cent in 2016).

## **Updated BMA handbook for salaried GPs**

The sessional GP committee has just updated our salaried GP handbook which is written for salaried GPs and GP employers. It will also be of interest to those who are intending or about to become salaried GPs. It explains the legal entitlements of salaried GPs as employees and helps to ensure that salaried GPs are aware of their statutory and contractual rights. It also helps to prevent

GP employers contravening the law unwittingly. In addition, it explains the national and local representation of salaried GPs, how to become a salaried GP and the work involved.

One of the aims of this handbook is to help ensure that all salaried GP members receive appropriate employment terms and conditions. It does this by setting out the legal entitlements that salaried GPs receive as employees, as well as the additional contractual benefits that are, or may be, available. It provides a comprehensive overview of the employment contracts available to salaried GPs and the effect of the various provisions of the model salaried GP contract. The handbook also provides guidance on negotiating improvements to salary and other contractual provisions.

The handbook provides detailed guidance for salaried GPs. However, this cannot replace the expert and confidential advice on individual employment issues that salaried GPs should and can obtain. This is available as part of BMA membership by contacting the BMA.

Also, a specialised and invaluable benefit of BMA membership is the employment contract checking service that is offered. The BMA will review the employment offer letter and terms and conditions, and advise on any necessary improvements.

The handbook is a valuable tool for GP employers. It explains the statutory entitlements that a GP employer must provide to its salaried GPs in order not to fall foul of the law. It also highlights various contractual obligations, including those under the model salaried GP contract.

You can access the updated handbook [here](#).

### **Tier 2 Sponsorship for International GP Trainees qualifying in 2020**

NHS England and Improvement are aware that there are a number of non-EEA GP Trainees who qualify each year in February and August that are looking for practices who are able to provide them with Tier 2 sponsorship. However, the number of GP Practices who are currently Tier 2 Visa sponsors is limited and often non-EEA GP Trainees will be forced to leave the region or return to their home country if they are unable to find employment with a practice that can continue their sponsorship. Tier 2 sponsorship therefore is an opportunity for practices that are having difficulty recruiting to vacant GP posts, to employ migrant doctors who will generally have completed their training in the UK. It doesn't guarantee that the vacancy will be filled, but it opens up a new pool of doctors who are then able to apply for vacancies.

NHSEI will support non-EEA GP trainees by matching them with vacancies at practices that hold visa sponsorship licences in their preferred locations (Please note that standard recruitment processes then apply for the roles within these practices). They have now started to work with a number of GP Trainees qualifying in the February 2020 cohort.

If practices want to be in a position to recruit these doctors, they need to be starting a sponsor application as soon as possible. The funding is only available until the end of March 2020 so if you want to be ready to recruit in August it's advisable to become a sponsor now while there is funding available.

#### How to apply to become a sponsor

NHSEI has previously provided guidance and documentation which walks practices through the full forms and shows them all the information they will be asked for is available. Sponsor approval can take up to 8 weeks so it is advisable to apply sooner rather than later. Due to recent changes to immigration rules GPs are included on the Shortage Occupation List. This means that practices no longer have to complete a Resident Labour Market test before employing an international candidate.

#### Funding

NHSEI is offering a package of funding to support any practice who wants to become Tier 2 Visa sponsors. Funding available includes reimbursement of sponsor license fee (even if unsuccessful), Certificate of Sponsorship fee, first 2 years of Immigration Skills Charge, Visa fees for GP trainee and their family. Funding is only available until 31 March 2020.

If you are interested in becoming a Tier 2 Sponsor Organisation and would like further information, please contact the IGPR Programme Lead Lindsey Bell – [lindsey.bell@nhs.net](mailto:lindsey.bell@nhs.net) The IGPR Programme Team are happy to talk through the process with you either over the phone or in person.

---

## GENERAL INFORMATION DISTRIBUTED TO PRACTICES THIS MONTH

Listed below is the information the LMC has sent to Practices recently. If for any reason you would like another copy and/or further information, please contact us.

- Updated Tier 2 Visa information

---

## COMINGS AND GOINGS

### *Goodbye and good luck....*

Bernie Highfield - Practice Manager at Leeds City Medical Practice, Parkside Surgery and Crossland Surgery leaves on 31<sup>st</sup> December to take up a Practice Manager role closer to home in Sheffield. Bernie's replacement, Beverley McLean starts in post on 3<sup>rd</sup> February 2020.

Dr Haroon Rashid will retire from the Partnership at Allerton Medical Centre after Christmas. We are grateful to him for his service to our practice and patients over the last decade and wish him every success and happiness in his future.

## PRACTICE VACANCIES AT.....

### **GP - Pudsey, Leeds - Robin Lane Health & Wellbeing Centre**

[www.robinlanehealthandwellbeingcentre.com/recruitment](http://www.robinlanehealthandwellbeingcentre.com/recruitment)

An opportunity to recruit a Salaried GP/GP Partner to come and join our friendly & innovative GP practice in west Leeds.

Flexible work hours: we require 4-9 sessions per week. Recently fully refurbished and extended modern premises. Single Site. 13,500 registered patients and a CQC rating of an "Outstanding" organisation.

The practice runs a well-established onsite Community Ophthalmology Service, and we have an Independent-Sector Community Gastroenterology, Endoscopy, Dermatology and Ultrasound services.

We have an integrated patient-volunteer group supporting the Wellbeing Centre, which has already attracted 26 social groups to attend regularly.

"Pudsey Wellbeing Charity" and "Lux" community café is part of the Wellbeing Centre.

We are well organised, SystemOne user and high QOF achiever.

We have a multi-disciplinary team approach to care: we use proactive care via our well-established Elderly Care Team; Practice Pharmacist; Practice Matrons; Advanced Nurse Practitioner; Advanced Clinical Practitioner and excellent nursing team.

We are ultimately seeking an enthusiastic, forward-thinking and motivated individual to join the team.

GP Trainer status ideal, or someone interested in becoming a GP trainer is preferable, but non-essential.

Informal visits or contact welcome. Contact Dr Neil Bastow, GP Partner at [n.bastow@nhs.net](mailto:n.bastow@nhs.net) or on 07946 151751

Interested candidates should send their CV and covering letter to Farmida Ishaq, Head of Human Resources, Robin Lane Health & Wellbeing Centre, Robin Lane, Pudsey LS28 7DE or [ClinicareHR@clinicareservices.net](mailto:ClinicareHR@clinicareservices.net)

**Due to the promotion of 2 GPs to Partners and the expansion of our GP team – we are looking for a salaried GP covering 6-8 sessions**

The Job

Salaried GP wanted for 6 – 8 sessions

Practice mentorship scheme and annual in-house appraisal.

Regular in house clinical meetings

Development of special interests and involvement in GP training.

The Practice

Semi-rural, PMS, SystmOne, practice of 11,700 patients working from modern purpose built premises.

Training practice - 2 trainees, and wide multidisciplinary team including, Pharmacist and in-house pharmacy.

Progressive practice working closely within the Wetherby PCN.

The Practice holds two contracts for local prisons for GP services and all GPs participate in clinics on a pro rata basis

The Area

Attractive riverside market town in centre of the Golden Triangle of Leeds, Harrogate and York.

Excellent travel links - close to A1/M1/M62.

Great opportunities for leisure activities - near Yorkshire Dales and Moors

For an application pack please contact

Anita Hampson – Practice Manager

[Anita.hampson@nhs.net](mailto:Anita.hampson@nhs.net)

**Salaried GP with a view to Partnership position available at training practice in North East Leeds - 6-8 sessions - Portfolio GP welcome**

Does the brave new world of PCN's in Primary care excite you?

Do you like QIS and QoF?

If so, then this salaried post with a view to partnership may be what you're looking for at any stage in your career.

We are looking for an enthusiastic GP with excellent clinical skills, warmth, leadership qualities and a commitment to providing high quality patient centred care. We are passionate about developing further our teaching and training of medical students and doctors in training.

We are currently made up of one Partner and two salaried GPs. We have a list size of 5,650 in a mixed suburban area working from modern purpose-built premises. We have a close knit, valued practice team and are a high achieving training practice. We work closely with SELGP Federation Group and our newly formed Primary Care Network. We have recently been CQC inspected and rated as "Good".

We will offer additional study time for intending trainers and would support applicants who wish to develop their leadership and management experience.

A DBS check will be required for this post.

Applications to be made in writing, including an up to date CV to:

Michelle Little

Practice Manager

[michelle.milnes@nhs.net](mailto:michelle.milnes@nhs.net)

0113 295 4650

Address: Park Edge Practice, Asket Drive, Leeds, LS14 1HX.

**Manston Surgery - Crossgates, Leeds LS15 8BZ & Scholes branch surgery LS15 4DR  
Salaried GP / Advanced Clinical Practitioner vacancies**

4-8 SESSIONS NEGOTIABLE

Our patient list size is continuing to expand and we need to grow our workforce. We are a friendly, well organised PMS practice seeking enthusiastic and motivated GP's / ACP's to join our excellent multi-disciplinary team.

The clinical staff of 4 GP Partners, 1 Salaried GP, 1 Advanced Clinical Practitioner, 3 Practices Nurses and 2 Healthcare Assistants are well supported by a highly motivated, experienced administrative team.

We are based in fantastic new purpose built premises in a vibrant, leafy suburb of East Leeds with easy access to M1 and M62.

Start date – As soon as possible however we are willing to wait for the right candidate.

Competitive salary

Salaried BMA contract for sickness & maternity

6 weeks' annual leave, + 1 week study leave

To take part in the on call rota

List size of 8k+ patients

Fully computerised SystemOne practice

Informal enquiries and visits are welcome

Apply with a CV and covering letter to Julie Martin, Practice Manager

Telephone 0113 2645455 - Email: [julie.martin35@nhs.net](mailto:julie.martin35@nhs.net)

**An exciting opportunity has arisen for Salaried GP / Partner Or ANP(s) with GP experience to join our friendly and successful training practice in Pudsey, West Leeds.**

- 3 / 4 sessions per week
- Purpose built premises, no financial input needed
- Well organised, EMIS Web practice
- High QOF achiever
- CQC rating - Good
- 7,500 patients with high patient satisfaction
- Core hours 8am – 6.30pm Mon, Wed, Thurs & Fri 7am – 6.30pm on Tuesdays.
- No OOH/OOA cover.
- Home visit light
- Excellent nursing and admin team
- Part of the West Leeds Primary Care Network

We are seeking enthusiastic, motivated and forward thinking new members of the team.

Applications with CV and covering letter please to:

Mrs Pauline Shipsey, Practice Manager,  
Mulberry Street Medical Practice, Pudsey Health Centre,  
18 Mulberry Street, Leeds LS28 7XP

[paulineshipsey@nhs.net](mailto:paulineshipsey@nhs.net)

Informal visits welcome

[www.pudseyhealthcentre.co.uk](http://www.pudseyhealthcentre.co.uk)

\*\*\*\*\*

LMC ViewPoint is published by Leeds Local Medical Committee Limited

Registered Office: 2 Farrar Lane, Leeds, West Yorkshire. LS16 7AA

Tel: 0113 295 1460 email: [mail@leedslmc.org](mailto:mail@leedslmc.org) website: [www.leedslmc.org](http://www.leedslmc.org) Twitter: @Leedslmc