



8th November 2021

Dear Colleague

Please see below our latest updates for your information:

Summary of Emergency meeting regarding Industrial Action, 3/11/21

We have received feedback from colleagues who feel that the summary of the meeting which took place last week around Industrial Action was polarised towards being supportive of Industrial Action. This is not the intention of the LMC. A presentation from the GPC Executive explaining the reasons they are pursuing their action was given and the communications reflected the contents of this. There is a view that withdrawing from the PCN DES is not the correct path for the profession. We have tried to capture these in our previous communication and appreciate there are many other published opinions on the indicative ballot that you may want to review.

We encourage everyone to express their views in the indicative ballot as it will determine what action the GPC will ultimately propose.

General Practice Pay Transparency

We are aware that the deadline for submitting earnings is 12th November for GPs whose annual income for 2019-20 exceeds £150,000. We believe that GPs being singled out does not follow the principles of pay transparency under which the GMS contract clause was negotiated. We also strongly believe these imposed changes risk dedicated hard-working doctors being subjected to abuse and that they will worsen the current workforce crisis if GPs seek to reduce their working commitments. It could also make it harder to recruit doctors to fill out-of-hours sessions and thereby impact A&E pressures.

We advise GPs review the BMA guidance <https://www.bma.org.uk/pay-and-contracts/pay/other-doctors-pay/declaring-gp-earnings-over-150-000>. We wish to highlight that although NHSEI has defined a [specific process for submitting the declaration of earnings](#). This process is not defined in the regulations.

We would also draw your attention to https://www.bma.org.uk/media/4731/bma_gp_indicative_ballot_supporting_info_oct2021_v2.pdf the current BMA indicative ballot proposal for industrial action which includes 'Not complying, on a continuous basis, with the contractual requirement to ensure GPs earnings over the earnings threshold declare their income'.

CCG/LMC Finance Workshop 16th November 2021

The LMC will be hosting a finance workshop for Practice Managers and the CCG finance team at 10.30am on Tuesday 16th November 2021. The main areas of concern raised so far have been:

- Not being able to easily identify what payments relate to
- Not being able to easily contact individuals within the finance team
- Communicating what payments are due and when they have been paid

[Click here to join the meeting](#)

If you have anything you would particularly like covered during the workshop please let me know by emailing liz.mears@kentlmc.org

Free Premises Surgery

The LMC are hosting a **FREE Premises surgery** with Rosemary Jones from Invicta Chartered Surveyors and Bethan Dodd from LA-Law on Tuesday 23rd November 2021 from 9.30am. *Rosemary Jones is a Director of Invicta Chartered Surveyors, based in Kent and is a Chartered Surveyor with more than 30 years' experience. Her work is almost exclusively within the NHS and predominantly for GP Practices.*

Bethan Dodd is a real estate partner with Lester Aldridge LLP. Bethan has deep experience with real estate matters in the primary care sector, and advises GPs on surgery acquisitions and development, funding (including the Premises Costs Directions, NHS capital grant funding and bank lending), co-ownership arrangements and succession planning within partnerships and surgery leases (having acted for GPs both in the capacity as landlord and as tenant).

If you would like to book a 30 minute appointment for you and/or your GPs please e-mail info@kentlmc.org. These appointments can be either face to face at our office in Harrietsham or virtually via Microsoft Teams and will be allocated on a first come first served basis.

Health and Wellbeing support for staff

There is a local service for staff which can be accessed at:
<https://www.kentandmedwayccg.nhs.uk/staff-wellbeing-support>

In addition staff can access the Employee Assistance Programme. Further information is attached. In summary:

- It covers not just health and wellbeing, but also non-NHS counselling, financial, legal and bereavement support etc too for them and their families, if they need it.
- Accessible 24/7, via app (search 'My Healthy Advantage'; can set up a private account), online, phone or can arrange an in person consultation where required.
- While commissioned by the CCG to make it available to all colleagues in Primary Care, regardless of where they work or their employer, it is totally confidential and personal to them and not run or provided by the NHS, so there is no link back to the NHS. The only information the CCG gets is an aggregated usage report from the provider which contains no personal or practice or geographically identifiable data whatsoever.

Indicative ballot of practices on potential action

Further to the resolution passed in the recent [emergency GPC England meeting rejecting the Government and NHSE/I 'support plan'](#), the BMA have this week launched an [indicative ballot](#) of all practices in England asking what actions practices might be prepared to take.

As these questions relate to the practice contract this ballot requires a practice level decision. They therefore request each practice provides ONE response to the ballot on behalf of the practice.

While the liability of any decision rests with the partnership, the BMA strongly encourage practices to discuss the indicative ballot options with salaried and locum GP colleagues, practice managers and others working within the practice, since any future industrial action would affect all the workforce within the practice.

It is important that as many practices as possible submit their views in order to provide GPC England with the insight they need to make decisions on next steps. Each practice with a BMA member has a vote. The deadline to vote is 14 November. You can cast your vote [here](#).

The ballot asks whether practices are prepared to take action in five key areas which are to:

- participate in a coordinated and continuous withdrawal from the PCN DES at the next opt-out period
- disengage, on a continuous basis, from the PCN DES before the next opt-out period
- not comply, on a continuous basis, with the contractual requirement to ensure GPs earning over the earnings threshold declare their income
- not comply, on a continuous basis, with the contractual requirement to provide COVID vaccination exemption certificates
- participate in a coordinated and continuous change to your appointment book, so as to impact the quality of the nationally reported appointment dataset.

Despite all attempts to work on a solution focused package backed by the profession and to put in place a plan that really would improve access, quality of care, free up time by reducing bureaucratic workload and enable practices to properly care for their patients over this expected difficult winter, the Government's 'access and support plan' has failed to address these and instead could create further bureaucracy and further demoralise the whole workforce across England.

At this time we must support one another and stand together. The BMA will do all in its power to back GPs.

Read more and access the ballot [here](#).

Read the BMA [analysis](#) of what the Government and NHSE/I package means for practices.

Response from the Secretary of State on the Government 'access package'

Following the emergency GPC England meeting on 21 October [the BMA wrote to the Secretary of State](#) for Health & Social Care to highlight the BMA's concerns about the government's GP access package. They outlined why the existing package had been rejected and was insufficient to meet the needs of patients or adequately support GPs and practice staff. The BMA made it clear that the recent imposition of contract changes meant they consider that they are in dispute. They also stated that GPC England's resolutions in relation to the access package meant the BMA would now be carrying out an indicative ballot of GP members.

This week the BMA received a response from the Secretary of State who praised the work of general practice and outlined measures to address abuse of NHS workers. However he did not address the key concerns reading the lack of measures to reduce bureaucracy, resourcing premises and providing more support in an accessible way. They will continue to lobby the Secretary of State and Government to what is really needed for GPs and practices, as they progress with the indicative ballot.

From Dr Richard Vautrey - GPC England Chair stepping down

After being a member of the GPC negotiating/executive team for over 17 years, and chair for GPC England and GPC UK for 4 ½ years, I have decided it is time to step down when the committee meets for the first meeting of its delayed annual session on 18 November. With the need to begin planning for a new contract as we approach the fourth year of our current five-year agreement, it is now time for a new chair to take on this role and be given the opportunity to do this.

Being chair of the BMA's GP committee has been the greatest privilege and honour. To be able to work on behalf of this great profession for so long has given me the opportunity to work with many extremely gifted and dedicated people and I want to thank them all for their help, support, and encouragement. Together we have achieved a lot including significantly increasing the investment for general practice after a time of austerity, including £2.8bn as part of the five year contract package, turning around the decline in GP pay, removing the burden of indemnity, improving the quality of care for patients with long-term conditions, enabling the recruitment of a growing multidisciplinary team to work with and support GPs - including pharmacists in practices - funding to help young partners and most recently supporting GPs and practices through and

COVID-19 pandemic and enabling GPs to play a leading role in the hugely successful delivery of the COVID-19 vaccination programme. I'm proud of all we have accomplished.

I have been overwhelmed and humbled with the many messages I have received this week and I want to thank everyone for their kindness and thoughtfulness.

There is so much more to do, at such a critical time for the profession, and I wish my successor all the best in delivering that. Read my full statement [here](#).

Supporting general practice against abuse

The BMA continues to campaign against abuse of GPs and their staff with a number of resources available on [Support Your Surgery campaign](#) page, in order to get the changes that are so urgently needed to support general practice teams.

Please continue to show your support by signing the [Support Your Surgery petition](#) to put pressure on the Government to support general practice and use their resources to explain to patients why practices need to work in the way they are doing in order to protect patients from a rising incidence of COVID-19 and to make the best use of the available but limited workforce. You can also get involved in the [#SupportYourSurgery social media discussion](#) by sharing your support across social media.

Please do all you can to help defend and support general practice at this critical time. Use their [template letter](#) to write to your local MP to outline the current pressures being faced by GPs across the country.

Share their [template letter](#) amongst your local patient groups.

Their [GP campaign factsheet](#) can also be used to rebut the misinformation in the media and to proactively include in social media posts, letters to the local press or MPs.

BMA Virtual GP parliamentary drop in event

As part of their GP campaign, the BMA held a virtual parliamentary drop in event this week to address the scapegoating of general practice in the media and to provide MPs with the facts about how general practice is meeting the needs of its patients, and what more government must do to support GPs to meet the growing demands placed upon them.

The event which was attended by over 20 MPs and their staff from across the political parties included helpful discussions on overall access to general practice; what MPs could do to support practices in their local areas - including tackling abuse; what was missing from the access package; and how recent statistics showed that GPs are doing more than ever, despite receiving insufficient resource and support to meet this growing demand.

They will be following up with attending MPs in the coming days to ask them to further support the BMA campaign both within parliament and within their local constituencies.

Patient online access to records

As part of the accelerated access to records programme, practices will have seen communications about patient access to records held in TPP SystmOne is planned to go live in December, with EMIS and Vision to follow in 2022. GPC England has been engaged in discussions on this and have expressed significant concerns, including the timing of the launch during winter months, with anticipated unprecedented demand adding to patient safety risks that would result from a December rollout. They are seeking a pause to ensure the views of the profession are better represented and the programme delayed until there is appropriate time to work through the list of concerns.

New GP Workforce Data (England)

The latest [GP workforce data](#) in England for September show the continuing contraction of the General Practice workforce, which the Government's clearly failed to acknowledge in its 'rescue package'.

September's data shows only a total increase of 42 FTE GPs compared to the previous month – which is an increase of 99 fully qualified GPs set against a loss of 57 trainees. This increase is clearly insufficient to cope with the current workload, with the enormous jump in [GP appointments](#) in the last month alone (up by 4.7 million, from 23.9 million to 28.6 million). General practice is now the equivalent of 1,704 fewer fully qualified FTE GPs than 2015 levels. Over the last year (September 2020 to September 2021) general practice has lost 154 fully qualified GPs (a gain of 759 salaried and locum, set against a loss of 913 partners), and 282 fully qualified FTE GPs (430 FTE Partners set against a gain of 148 FTE Salaried).

Meanwhile, the number of patients continues to rise, which means the number of fully qualified GPs per 1,000 patients in England is likely to further fall soon (currently 0.45, compared to 0.52 in 2015)

Full analysis can be found on the BMA's [Pressures in General Practice](#) webpage.

NHS Confederation - an open letter to primary care

The chair of NHS Confederation, Lord Victor Adebowale, has written an [open letter](#) to everyone working in primary care. He says: 'I want to say thank you on behalf of this organisation to everyone who works in primary care. You don't need me to tell you how challenging the past 20 months have been. Primary care has met those challenges head-on, rapidly adapting to new ways of working and managing nearly 250 million appointments from January to August.

We know that primary care is a team sport. You have worked together across practices, primary care networks, primary care federations, at place level, and you are taking up the mantle as the drivers of system working too.' Read the full letter [here](#)

BMA Webinar - The Health and Care Bill

The BMA is holding a member [webinar on the Health and Care Bill: What it means for you and what you can do about it](#) – on Wednesday 17th November, 7-8pm.

The BMA believes that if this Bill is passed, it will usher in drastic changes to the NHS in England, impacting the working lives of doctors, and that urgent and significant changes must be made to it.

[Register now](#) to attend this event to learn more about the Bill and what you can do about it. If you have any questions about the event, please contact tbramwell@bma.org.uk.

For further information about the Bill and the BMA's work in this area, visit: www.bma.org.uk/hcb

Postvention training: Assisting those bereaved by suicide - 8th December 2021

Sent on behalf of Sara Moreland, Mental Health Prevention Specialist, Medway Council
On behalf of the Kent & Medway Suicide Prevention programme I am pleased to be able to offer colleagues fully subsidised PABBS training; primary care practitioners are one of my target areas for this training opportunity. The feedback on the training from our previous two cohort's was overwhelmingly positive and was attended by a range of professionals from across our health and social care system.

The next course will take place on the 8th Dec 9.30am -4.30pm at Hempstead House, Sittingbourne. The places are limited to 20 delegates and I would like to invite you to either attend, forward the invitation to relevant colleagues, or nominate a representative from your

organisation to participate as part of our targeted approach. Places will be offered as a priority to those who work in direct contact with individuals bereaved by a suicide.

Background information on PABBS for practitioners

- PABBS is developed by experts in suicide prevention and postvention and is the only evidence-based and evaluated suicide bereavement training internationally.
- Informed by a 3 year study at the UoM, funded by NIHR (research for patient benefit programme) and continues to be supported by NIHR to raise awareness of PABBS to help address the unmet needs within the NHS. A PABBS article is used as evidence in NICE guidelines.
- The study identified experiences of those bereaved by suicide, GP's, mental health professionals and ambulance staff to PABBS with 4 papers published which are directly associated with the PABBS training - <https://suicidebereavementuk.com/the-development-of-postvention-assisting-those-bereaved-by-suicide-pabbs-evidence-based-suicide-bereavement-training-for-health-professionals/>
 - GP's Experience - GP's experiences responding to and dealing with parents bereaved by suicide
 - Parents Experience - Parents bereaved by suicide experiences and perceived support from primary care
 - Evaluations - An evaluation of PABBS evidence-based suicide bereavement training
 - Ambulance Staff - Ambulance staff experience in responding to a (suspected) suicide and the bereaved family

The training will be free to attend although a cancellation fee will apply for non-attendance. All participants will receive a delegate pack which will include a workbook and PABBS manual for future reference along with additional postvention literature for each delegate.

If you would like to request a place on the training then please email maddison.thursting@medway.gov.uk

Kind regards
The Kent Local Medical Committee