

LMC Update Email
11 September 2020

Dear colleagues

ARM 2020

The BMA's [Annual Representatives Meeting](#) will be held virtually next week, on Tuesday 15 September. Debates will focus on some of the key issues currently impacting the profession but the meeting will also provide an opportunity to pay our respects to the at least 34 doctors and many other colleagues, many of whom came from overseas to work in the NHS, who have died from COVID-19. Royal colleges and other organisations are urging their members to join us in a minute's silence and commemoration. The ceremony will begin at 10.45am with the minute silence observed at 11.00am. The memorial will be broadcast online and details will be circulated in the coming days so that people not attending ARM can join in this important act. I hope you and your colleagues will join us.

In my presentation on behalf of GPC to the ARM I highlight that this has been a year like no other. GPs, practices, PCNs, out-of-hours providers, LMCs and GPC have been tested as never before and despite the many challenges we have all responded and delivered. Working together, at national and local level, GPC and LMCs, we have advocated and lobbied on behalf of the profession, and helped and supported GPs and their teams to rapidly respond to the many changes and challenges they've faced and as a result they have not let their patients down. I am proud of what GPs and those working with them in general practice have done this year and this is an opportunity to thank them once again. You can watch my presentation to the ARM [here](#)

Read more about how to follow the debate on the day and how to download the ARM app [here](#)

QOF at a glance

As I reported last week, NHS England have now published [revised QOF guidance](#) which details the requirements for 2020/21. This guidance is effective immediately and the Statement of Financial Entitlement will be amended shortly to reflect this.

We have drafted a QOF at a glance document, which summarises the changes for QOF for the remainder of 2021/22. In light of COVID-19, QOF has been refocussed to:

- support practices to reprioritise aspects of care not related to COVID-19
- serve those patients most in need of long-term condition management support
- guarantee significant income protection and the relaxing of some requirements for practices.

We have drafted the attached 'QOF at a glance' guidance, which summarises the changes.



Flu guidance 2020/21

Last week, NHSE/I published the updated [flu specification for 2020/21](#) and the updated [DES directions](#). Practices will need to respond to commissioners' invitation to participate in the 2020/21 Flu DES by no later than *14 September*. Additional BMA guidance and NHS England FAQs will be published shortly.

Delivering the flu vaccination programme

Practices working in their PCNs where appropriate are encouraged to work together with pharmacies to support a successful 2020/21 flu campaign. This is even more important in light of COVID-19, and the challenges that we face in delivering this year's flu programme. As in previous years, this is a national service with both practices and community pharmacies providing NHS flu vaccinations, and we all have a role to play in identifying and engaging patients and vaccinating to protect as many as possible at a very vulnerable time.

Practices and pharmacies should talk to each other about the vaccination service they are planning to offer to understand each other's plans. Where possible discussions should include how to reduce health inequalities and how to target harder to reach or under vaccinated populations which can help achieve an effective campaign.

This year the new Investment and Impact Fund includes a shared goal across the PCN to provide immunisations to patients 65 years and over and this includes those given both by practices and pharmacies in the area. Read more in the [GP contract agreement document](#)

GP earnings and expenses 2018/19 (England)

NHS Digital has published the [GP earnings and expenses for 2018/19](#), which show an average increase in income before tax of 3.4% for GP contractors and 3.8% for salaried GPs in England. For non-dispensing GP contractors in England the increase was 4.1%. Increases were higher in Scotland, in part related to the introduction of new contract arrangements, and in Wales, but lower in Northern Ireland. After many years of sustained real-terms pay cuts for GPs, these figures show that this trend is slowly beginning to be reversed, although not yet for GPs in Northern Ireland. This is despite in 2018 the Government in England yet again failing to recognise the huge contribution of family doctors by going against its own pay review body and imposing an award that was half of what was recommended, which would have left GPs with another sub-inflation pay uplift.

That practices were able to offer uplifts to both employed doctors and partners shows how much they value their highly-skilled staff, which is vital to both recruitment and retention – and ultimately guaranteeing high quality patient care.

Pressures in general practice still remain as demand rises amid large workforce shortages - before we consider the huge challenges over the last few months - which practices were quick to meet with both innovation and compassion. The pandemic has shone a light on the huge contribution GPs make to the NHS, and it is crucial that doctors are rewarded appropriately for their hard work and dedication. This was reported by [GP online](#)

Automation of PCN payments (England)

From 1 September, payments for PCN (Primary Care Network) core payments, CD (Clinical Director) payments, Extended Hours Access, and Network Participation Payments, became automated (previously manually processed by CCGs). As part of this change, each practice is now required to verify the Network Participation Payment in CQRS before it is released.

RCA and Less Than Full Time (LTFT) trainees

The BMA GP trainees committee (GPT) have heard concerns from Less Than Full Time (LTFT) doctors about their ability to prepare for the RCA (the temporary replacement for the CSA exam). As trainees are provided with a set number of weeks to collect evidence for their assessment, those on LTFT schedules feel at a disadvantage to their full-time colleagues.

The committee continues to work with the RCGP about this issue, and raise these concerns. GPT notes that the college will soon evaluate the first sittings of the RCA exam, and this will provide them with scope to ensure the assessment is fair to all trainees.

COVID-19 antibody test results flowing to GP records

From 10 September, when a person undertakes an antibody test that is taken through the public antibody portal (an ELISA test), the result will be loaded directly into their patient records. This will be in addition to flowing of test results for pillar 2 viral testing and will follow the same process, according to each practice's IT system provider.

Results will be presented on patients' records as 'positive', 'negative' or 'unknown'. As for viral testing, there will be no action required from the GP practice on receipt of the test results. Bulk upload of test results into GP records will take place without any manual patient by patient process. Practices will receive further guidance by their own system supplier about how this will work.

Remote fit notes - please remember to sign them

DWP has asked us to remind GPs that as per previously agreed guidance they will accept fit notes that are printed, signed, scanned and e-mailed to patients. This advice has also been given to employers, who should also be accepting signed, scanned and emailed fit notes.

However, DWP is receiving a significant number of unsigned fit notes which they cannot accept and this results in inconvenience for both patients and GPs. We would therefore remind GPs that fit notes must be signed. Read more about remote fit notes in our [COVID-19 toolkit for practices](#)

LMC England Conference – motion deadline

The deadline for submitting motions for the LMC England Conference is midday, *Friday 18 September 2020*. LMCs have been sent an email with information on how to [submit motions](#) and how to [register](#) (by 16 October). The conference itself will be held virtually on Friday 27 November. More information will be provided nearer the time and will be added to the [LMC page](#) on the BMA website. For further information contact Karen Day on kday@bma.org.uk

BMA COVID-19 guidance

We regularly update our **toolkit for GPs and practices**, which includes a large range of topics relating to COVID-19. There is also guidance on the following topics:

- [Model terms of engagement for a GP providing temporary COVID-19 services](#)
- [Terms and conditions for sessional GPs](#)
- [Guidance on risk assessments](#) which includes specific information for practices.

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 our Wellbeing [poster](#), please email wellbeingsupport@bma.org.uk. Access the [BMA's COVID-19 wellbeing pages here](#)

COVID-19 media

I was interviewed by LBC following the Prime Minister's announcement about restricting gatherings of people to no more than 6.

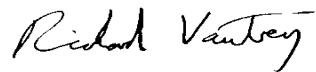
Alan Stout, Chair of GPCNI, was mentioned in an article by the Daily Mirror Northern Ireland on Tuesday, which addressed people's perceptions about GP opening times during the pandemic, with many thinking surgeries were closed when they weren't. The article read: "GP practices are still open and have been operating throughout the pandemic despite public perceptions they closed, medics have said. Dr Margaret O'Brien, from the Health and Social Care Board, Dr Laurence Dorman from the Royal College of GPs, and Dr Alan Stout, from the British Medical Association, are working together to reassure patients they can still access GP treatment, advice and prescriptions."

Future Scotland reported that the Scottish health secretary Jeanne Freeman has rejected a suggestion by Matt Hancock to make 'all' GP appointments online – 'unless there's a compelling clinical reason not to'. In response to this, Andrew Cowie, deputy chair of GPC Scotland: "It's fair to say that we will need to embed the kind of digital innovations that have supported more remote consultations throughout the past few months. These are necessary to cut down footfall in GP practices, and reduce the risk of transmitting COVID-19 in waiting rooms." Read his full quote [here](#).

See this week's GP bulletin [here](#).

Have a good weekend

Richard



Richard Vautrey

Chair, BMA GPs committee