

LMC Update Email  
9 July 2021

Dear colleagues

### **Patient survey results**

The annual [GP patient survey](#) results have been published, and with 83% of patients rating their overall experience of general practice as good, an increase on the previous year, this is testament to just how hard GPs and their teams have, and continue to, work in order to provide care to their patients and communities. To see an increase in overall patient satisfaction despite the really challenging year the entire NHS has faced - is incredibly positive. Such excellent feedback from patients about all members of the practice team will also lift morale amongst an exhausted workforce who have clearly gone the extra mile and beyond for their patients. These results also clearly show how out of touch with the real views of patients NHSE/I's damaging and demoralising letter earlier this year was.

GPs and their teams have been providing this good patient care all while playing a crucial role in the delivery of the COVID-19 vaccination programme and dealing with the consequences of a massive NHS care backlog, resulting in record appointment numbers being delivered. However, if we are to continue to meet the increasingly complex needs of our communities – delivering flu vaccine programmes, COVID-19 booster programmes, supporting growing numbers of patients with long COVID and managing an increasing number of appointments - then general practice needs more staff, more resources and better premises. It is the only way to avoid a potentially irreversible crisis in general practice and instead to build further on this feedback from patients.

### **Health and Care Bill**

The Government has introduced the [Health and Care Bill](#), which will deliver significant health reforms in England. These include making ICSs (integrated Care Systems) statutory bodies, dissolving CCGs and transferring their responsibilities, staff and powers to ICSs, formally merging NHS England and NHS Improvement, removing Section 75 of the 2012 Health and Social Care Act and mandated competitive tendering, and conferring new powers over the NHS to the Secretary of State.

[Responding](#) to the publication, the BMA raised concern over the timing of the bill given the huge pressures facing the health and care system as a result of the pandemic, as well as highlighting critical areas where we believe the bill needs to be amended and strengthened to protect the NHS from unnecessary private sector involvement and establish a healthcare system that is collaborative and fit for the future.

The BMA will continue to lobby to ensure the Bill addresses our concerns and that reform is in the best interests patients and doctors, and supports the NHS to be a publicly-funded provider to care for the health needs of our population. We have been working to shape the guidance that will underpin the Bill the in practice, including through our [response](#) to NHSE's consultation on the new provider selection regime and feeding into the newly published ICS Design Framework. We have also been clear on the critical role LMCs should play in the new arrangements. We have produced [a member briefing on that framework](#), including our immediate reaction to it.

Read more about our work around the Bill and key calls [here](#), and our detailed [analysis of the bill](#).

The story was covered by [GP Online](#), [Pulse](#), and [Pharma Times](#).



**COVID-19 booster vaccine and flu vaccine programmes**

Following the [guidance](#) published by JCVI last week about the COVID-19 booster programme, and the subsequent guidance from [NHSE/I guidance on COVID-19 vaccinations](#), we remain seriously concerned that this may be interpreted as a cap on general practice involvement in the flu vaccination campaign this winter or that practices will be limited in their ability to provide this to their patients as they would normally do because of overly restrictive arrangements set by NHSEI.

GP practices are already preparing for this winter's flu campaign, as they do every year, and will be keen to continue to play a pivotal role in protecting their patients against COVID-19 with booster jabs alongside this. GP practices have shown, for many years through the annual flu programme and recently through the COVID vaccination programme, that general practice through its place in the community is best placed to provide effective and efficient vaccination programmes to the population of England. Many patients and members of the public expect such a service to be widely available from their local GP practice. We believe delivering the flu vaccination and COVID-19 booster vaccination programme concomitantly through general practice is the best way forward and that most practices will want and expect to deliver them.

As Phase 3 begins, practices must be able to administer COVID booster jabs during the same appointment as flu vaccines within their own practice buildings if they wish – which has not always been possible for COVID vaccines, with many practices who wanted to continue to provide COVID-19 vaccination to their patients being prevented by NHSE/I from doing so. We believe patients want to be vaccinated at their local practice as they are used to for their flu jabs each year. In addition, working at practice level can reduce the bureaucracy for staff, limiting the impact on other GP services that are also important. It is also vital that existing resources are retained for additional staff who support the programme.

If we are to 'learn to live with' COVID-19 in the long-term and vaccinations are to become routine, practices need to be trusted and empowered to build on their expertise, proven track record and knowledge of their communities to lead the way in ensuring the public is protected.

We are therefore calling on the Government and NHSE/I to support practices and PCNs in delivering Phase 3, not just through appropriate funding, but also through the ongoing workforce support provided during phase 1 and 2, through managing workload (including the continued suspension of PCN service specifications), and improvements to IT systems.

**Praise for the NHS and general practice**

Responding to the announcement that [Her Majesty the Queen has awarded the George Cross to the NHS](#) to acknowledge its remarkable efforts throughout the pandemic and contribution over the last 73 years of service since the birth of the NHS, BMA council chair Dr Chaand Nagpaul said:

"This is a worthy honour for all NHS staff who have worked tirelessly throughout the pandemic to protect the health of the nation, providing care to hundreds of thousands suffering with illness and have also saved the lives of so many. The fight against Covid has been largely down to their enormous contribution, and with many putting their own health at risk as they cared of patients with a deadly and infectious illness, and with sadly several hundred losing their lives from the virus. It is only right that they should be recognised for their brave and dedicated commitment." Read the full BMA statement [here](#)

NHSE/I has published a [video](#) marking the birthday of the NHS to thank general practice and primary care teams for our phenomenal hard work and dedication. This follows the praise and

acknowledgement of the significant activity and related workload pressures in general practice by NHSE/I executive directors in a recent [NHSE/I board meeting](#).

### **Easing of COVID restrictions**

Ahead of the Prime Minister's [announcement](#) earlier this week to end the COVID-19 restrictions in England on 19 July, including mandatory wearing of face coverings and social distancing, the [BMA urged Government not to 'throw progress away' and to keep some Covid-safe measures](#), such as the requirement to wear a mask in enclosed public spaces. The BMA expressed serious concern that the government has decided to ease all mitigations, despite the Chief Medical Officer speaking about the alarming rise in cases, doubling of hospitalisations and certainty of more deaths. We are also concerned that there is no update on what restrictions should be in place in healthcare settings after this date and the BMA is seeking information for members to use going forward. As a result, the BMA will be producing guidance to support those working in practices, community healthcare and hospital settings and will issue this as soon as possible. Read the BMA statement on the response [here](#)

### **New guidance for health and social care providers on CQC's monitoring approach**

The CQC has published [new guidance for health and social care providers on their monitoring approach](#). The BMA is seriously concerned about CQC's new approach to monitoring practices and have raised this with them directly. Practices will understandably be anxious about the implications, not least when they are struggling with record demand and significant workload pressures. Whilst CQC has a legal responsibility to inspect health care providers and ensure the safety of services to patients, it has been doing this throughout the pandemic through its Emergency Support Framework. We have called for a continuation of this ESF approach which is much more proportionate and have misgivings about a move towards greater inspection numbers linked to a risk stratification approach that is new and not widely trialled.

### **PCSE pay and pension system update**

We continue to work hard at challenging the considerable shortcomings of the new portal. We are aware of the many unacceptable issues being faced by practices and GPs but it is of critical importance that users log these with [PCSE](#) to ensure that we can hold them accountable. We know that those interactions are also causing frustration and we are applying pressure for improvements and greater transparency around their customer service work. We would advise practices to keep a record of the issues they are raising with PCSE and the length of time taken to get resolutions.

Regular and ongoing meetings have led to a considerable number of 'fixes' to the system but there are many more outstanding. This will take time, but we are committed to ensuring a much improved service for the profession to use. NHSE/I and PCSE have assured us that the current run of global sum payments is going well but we are keeping a particularly close eye on this.

The BMA's Pensions committee be sending out a survey to GPs, to capture their experiences of using the new system. There will be more details on this next week, but we continue to encourage GPs to log on to the system to check the accuracy of their records. A similar survey will go to practices in the coming month. We have yet to receive a response to the [letter to NHSE/I setting out our concerns](#).

### **COVID-19 vaccination programme**

#### Acceleration of second doses for all cohorts

The government has published guidance advising that appointments of a second dose of the COVID-19 vaccine should be brought forward from 12 to eight weeks for the remaining people in all cohorts who have yet to receive their second dose, to ensure everyone has the strongest possible protection from the Delta variant of the virus at the earliest opportunity possible. Read the NHSE/I letter [here](#)

### Vaccine data

Nearly [80 million doses of COVID-19 vaccines](#) have now been delivered in the UK, and 34 million people have also received their second dose.

The BMA weekly COVID-19 data report is attached.

### **Education and training tariff guidance and prices for 2021 to 2022 financial year**

The Department of Health and Social Care and Health Education England (HEE) have published the [Education and training tariff guidance and prices](#) for 2021 to 2022 financial year. The guidance provides further information in support of the education and training (ET) tariff payment process for the 2021 to 2022 financial year, with medical placements in GP practices listed as an exclusion (see section 5.12-514). Read more [here](#)

### **Delay in roll-out of patient data sharing programme (GDPR)**

Following extensive lobbying by the BMA and RCGP, Government announced a delay to the rollout of GDPR, with full rollout now expected on 1 September rather than 1 July. BMA is now engaged in discussions with NHS Digital and other stakeholders to ensure no additional burden is placed on GPs to facilitate the implementation of this programme, and that patients are properly informed about it. We have been lobbying MPs on this issue. In view of the extension to date of the first extraction, we will keep you informed on all next steps that practices will need to take as we approach this deadline. Read our full statement about the announcement to delay [here](#)

### **Review of the England Medical Performers List Regulations (England)**

The Department of Health and Social Care has commissioned NHSE/I to review the England Medical Performers List Regulations in the context of the wider regulatory landscape in operation across England. This review has the potential to identify where regulatory requirements can be streamlined and simplified, while maintaining the high professional standards that ensure patient safety.

This questionnaire aims to gather information from stakeholders about their views of the existing regulatory landscape for GPs in England and thoughts on how this landscape might be transformed. The feedback will contribute to the content of a series of focus group discussions and inform an options appraisal that will be shared with the DHSC during autumn 2021. Take the survey [here](#)

### **ARM elections – GPC UK**

[GPC UK](#) is the only body that represents all GPs in the UK. It takes an interest in all matters concerning the professional lives of GPs, in addition to negotiating national terms and conditions. We are currently seeking nominations from GP members to join the committee. Nominations close at 10am, 13 September. [Submit your nomination here](#)

To participate in the election, you must hold the relevant position for the specified seat and be a BMA member. You must also be a delegate of the [ARM \(annual representative meeting\)](#) to vote.

### **Elections for BMA's specialist and professional committees**

Voting for the Specialist and Professional Committee elections has now opened for:

- Private practice committee (PPC)
- Professional Fees Committee (PFC)
- Committee of medical managers (CMM)

The deadline for voting is **12pm Thursday 22 July 2021**.

Nominations for seats on these committees have reopened **until 12pm on Thursday 22 July 2021**.

- Civil and Public Services Committee (CPSC)
- Armed Forces Committee (AFC)
- Committee of medical managers (one seat)

To submit your nomination or vote, please login to the BMA's [election system](#). To vote or stand in the election, you must hold the relevant position for the specified seat.

If you have any queries regarding the election process, please contact [elections@bma.org.uk](mailto:elections@bma.org.uk).

### **Calling all pharmacists: your chance to inform staff training in primary care**

Health Education England and NHSE/I would like to hear from pharmacists about their experiences of remote triage, care navigation, online and video consultations in general practice. Your input will allow us to design effective training to support all primary care staff and trainees to confidently work with these approaches. If you would like to be interviewed, please contact Frances Brown at [francesbrown@nightingaledesignresearch.com](mailto:francesbrown@nightingaledesignresearch.com) by 14 July. Find out more about the study [here](#). For any questions contact the Digital First Primary Care team: [england.digitalfirstprimarycare@nhs.net](mailto:england.digitalfirstprimarycare@nhs.net)

### **One career, endless opportunities #Choose GP**

Final applications for 2021 GP specialty training will open on 27 July – 18 August 2021. Please 'like' and follow the #Choose GP [Facebook](#) and [Instagram page](#) to keep up to date with news and views, and forward this information to any doctors who may be thinking about career options. The [GP National Recruitment Office](#) (GPNRO) website has more guidance and we have a number of GPs and trainees who can help with enquiries. Email Daryl [gprecruitment@hee.nhs.uk](mailto:gprecruitment@hee.nhs.uk) to be put in touch.

### **Media**

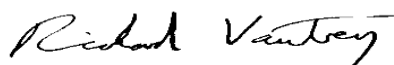
Following comments made by Seb James, CEO of Boots, that primary care had 'more or less disappeared during the pandemic' we challenged this by saying: "These comments are unfair and undermine the work of all primary care workers. Since March 2020, GP staff in England have delivered over 173 million face to face appointments. Thanks need to be given to all frontline staff and healthcare workers for their efforts throughout this pandemic." Our comment was covered by The Times (print), [Chemist and Druggist](#), and [Pulse](#)

Read the GP bulletin [here](#).

We would encourage LMCs to share this GPC update with GPs and practices.

Have a good weekend

Richard



**Richard Vautrey**  
Chair, BMA GPs committee