

OCTOBER COMMUNICATIONS TO MEMBERS

Please find below updates on some key matters which we hope you find of interest.

Contents:

1. Support Your Surgery campaign
2. Medical Exemption Certificate for Coronavirus Vaccination
3. Firearms Licensing
4. Crem Form Completion
5. Media Intrusion
6. CQC Inspectors Update
7. Update from EMAS
8. New to partnership scheme
9. Government imposes pay transparency regulations (England)
10. We are Primary Care
11. Christmas and New Year's Sub – Contracting arrangement
12. NHS Email Address
13. Save the date: LLR LMC AGM
14. Recruitment

SUPPORT YOUR SURGERY CAMPAIGN

The BMA is also running a Support your surgery campaign, further details can be read and resources available for practices to use.

- Petition
- Template letter to MPs
- Materials to download and use within practice

[BMA #supportyoursurgery campaign to support General Practice.](#)

MEDICAL EXEMPTION CERTIFICATE FOR CORONAVIRUS VACCINATION

A systematic medical exemptions process was introduced on 30 September, to ensure that those who, for medical reasons, should not be vaccinated (and/or be tested) for COVID-19 are not disadvantaged across certification use cases.

Given the need for clinical judgement and access to patient records, the Department of Health and Social Care are asking GPs, secondary care clinicians and midwives to assess applications. Steps have been taken to ensure this does not impact workload (e.g. no appointment required, pre-screening process).

Read the [guidance](#) detailing the process. There is an IOS fee of £44.00 per application regardless of whether you support or turn down the application.

The LMC is concerned that this represents additional work, but it is a contractual requirement so practices should respond to requests.

FIREARMS LICENSING

In light of the tragic incident that happened in Plymouth, the LMC has written again to the local Constabulary to raise concerns on the current process regarding firearms licensing.

We anticipate there will be national review and change on the process, but the Chief Constable has assigned his Assistant Chief Constable to work with the LMC to devise a process that is fit for purpose.

The LMC will keep members updated of the changes. Current process and template letters can be found [here](#).

CREMATION FORM 4 COMPLETION

On behalf of the crematorium administrative staff and medical referees at Gilroes, please find attached letter and guidance to help ensure correct completion of Crem 4 forms.

- [Letter to GPs](#)
- [The Cremation \(England and Wales\) Regulations 2008](#)

They receive a lot of forms where N/A is written in questions 6,7 and 8 without going onto clarify details of the patient illness and other doctors involved in patient care/ death certification in question 9.

The two commonest errors are that:

- if you are not the deceased's usual medical practitioner you should give the name and GMC number of the usual medical practitioner in your answer to question 9
- If you answer not applicable to questions 6,7 and 8, remember that a medical practitioner must have seen the deceased (in person or by video call) in the 28 days prior to death or after death and that medical practitioner's name and GMC number must be given in your answer to question 9.

Please write your mobile number on the cremation form rather than the surgery number, so that if the form is completed incorrectly, the Gilroes staff can contact you in a timely manner.

Errors can cause delay or postponement of cremation services and distress for families.

MEDIA INTRUSION

GPC has issued the following statement. We are aware that with the intense national media vilification of General Practice some journalists are approaching local practices directly for comment. There is no obligation to respond to the media.

If practices would like guidance about a specific situation, they can reach the BMA media team at Media Office MediaOffice@bma.org.uk

We are also concerned that some publications will send photographers to practices looking for photos designed to support their narrative of primary care being hard to access. The Editor's Code of Conduct which guides the practice of press organisations in the UK says that journalists should identify themselves when asked to do so and that no journalists should operate on healthcare property without permission, this applies to photographers as well. So if practice staff see a possible photographer who is not welcome then the best advice is to ask them to identify themselves and then ask them to leave.

CQC INSPECTORS UPDATE

A couple of months ago, the LMC hosted a CQC update webinar for our members to give the practices the opportunity to hear about the monitoring approach and what this means for general practice.

A copy of the presentation and areas covered for future reference, [can be viewed here](#).



UPDATE FROM EMAS: Ambulance Service experiencing unprecedented pressures

EMAS is currently experiencing unprecedented demand and workforce pressures. This is leading to delays in ambulances attending and transporting patients. If you have patients who require transport to hospital it may be more appropriate for them, and safer for them, to be transported by relatives or friends.

General practice clinicians should have a risk and benefits discussion with patients and relatives about the likely delay to transport if waiting for an ambulance. The patient and relatives can then choose whether or not to await an ambulance.

If you call for an ambulance the call handler can indicate how long the patient will wait, and this can be used to add to the risk and benefits discussion.

We advise that general practice clinicians should not make recommendations but should help the patient make an appropriately safe decision.

When the pressure in the ambulance service has released, we will let you know.

NEW TO PARTNERSHIP PAYMENT SCHEME

[The New to Partnership Payment scheme](#) is in place to support GPs and other registered health care professionals in establishing themselves in their new partnership role, offering a one-off financial payment and up to a £3,000 non-clinical training fund to be utilised within their first year.

New partners must meet all of the scheme criteria and apply to the scheme within six months of commencing in their partnership role.

Please ensure you apply to the scheme within this time frame to be eligible for the payment.

GOVERNMENT IMPOSES PAY TRANSPARENCY REGULATIONS (ENGLAND)

The Department of Health and Social Care have this week published [regulations](#) which will require GPs and their staff with NHS earnings of £150,000 and over in 2019/20 to declare these through national arrangements. This information will then be published by NHS Digital as part of the government's pay transparency agenda. In the 2019 contract negotiations, government and NHSE/I insisted on the inclusion of new pay transparency arrangements for higher earners as part of the overall package but it was also agreed that this should not solely relate to general practice but would be progressed for all those working in the NHS.

While the Government has now published [regulations](#) for general practice, to ensure GPs and their staff will have to declare their earnings over certain limits, there are at present no similar proposals for pharmacists, optometrists, dentists, consultants or other doctors in the NHS, anywhere else in the UK. As such the Government and NHSE/I have chosen to single out general practice in England Page 3 of 7 and have breached the 2019/20 agreement. We have not agreed the change. However, health ministers have instead decided to impose this on the profession. The 2019 agreement that was reached in principle did not take into the account the significant changes that have happened since, including the effect of the pandemic that has seen many GPs being willing to work longer hours and do more sessions to cope with the demand, and more recently the increased levels of abuse suffered by GPs and their teams. We strongly believe that these imposed changes risk dedicated hardworking 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 have an impact on A&E pressures. Ultimately patients will be impacted by these unacceptable changes. We have made it clear that the government will be responsible for the consequences of this.

CAMPAIGN SHOWS THE CONSEQUENCES OF ABUSE IN PRIMARY CARE

[#weareprimarycare](#)

Humberside LMC have created a great campaign which shows the consequences of abuse in Primary Care, which they have shared with LMCs across the Country to use, thanks to Humberside LMC.

A campaign has been launched to help tackle a rise in abusive behaviour towards healthcare workers in primary care.

Primary care refers to general practice, community pharmacy, dental, and optometry (eye health) services which are sometimes described to act as the 'front door' of the NHS.

Research shows that increased pressures on primary services paired with modified ways of working made necessary due to COVID-19 have led to increased demand in services. Data published by NHS Digital shows a 3.5m increase in the number of general practice appointments provided during June this year compared to June 2019 (26.7m compared to 23.2m), with an additional 4m COVID vaccination appointments delivered on top of that.

You will find all the [#weareprimarycare](#) primary care campaign materials. You can download:

- [Animations](#)
- [Email signature logos](#)
- [Digital Graphics](#)

They are uploaded in this order so scroll down the page to find what you are looking for. You can also [download a folder containing all the campaign materials from Dropbox.](#)

LLR LMC CHRISTMAS EVE AND NEW YEARS EVE SUB-CONTRACTING ARRANGEMENT

We are currently in conversation with the CCG and DHU to offer the sub-contracting arrangement to opt-ed in practices again on Christmas Eve and New Years Eve, between 4.00-6.30pm.

Further details will be sent to practices in due course.



NHS EMAIL ADDRESS

In light of the NHS email integration programme across LLR, we would like to remind practices that we do not have access to global address book, so are continuing to update our constituent details manually. Please send your changes to enquiries@llrlmc.co.uk and we will update our records accordingly.

Save the date: LLR LMC AGM

Does General Practice have a future? How will General Practice fit into the ICS.

This year's LLR LMC Annual General Meeting will be held virtually on Tuesday 9th November 2021, 7.00-8.30pm.

We have confirmed the following guest speakers for the evening, Richard Vautreay (GPC Chair) and David Sissling (ICS Chair) to discuss the future of general practice and have an opportunity for Q&A session.

More details will be shared in due course.

Recruitment

If you are advertising a position within your practice, we would be happy to include it on our 'jobs' section of our website.