

## ISSUED TO LLR GPs & PRACTICE MANAGERS ON 5<sup>th</sup> MAY 2022

Hello! In this edition, we are cover the following areas:

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### LLR LMC ELECTORAL TERM

Leicester, Leicestershire and Rutland Local Medical Committee current governing body will be soon coming to the end of its 4-year electoral term. We will be looking for committed and motivated GPs who have a natural interest to play an active part in supporting colleagues in primary care.

The previous arrangement was for the whole board to be re-elected at the same time. This creates a risk that a newly elected board may not have any pre-existing members with a loss of knowledge and continuity. Therefore, the board proposes that from this election onwards, half the board will be re-elected every 2 years, rather than the whole board every 4 years. In line with this, the term of office for the Chair will be reduced from 4 to 2 years, although the maximum total term will remain 8 years.

Further information on the role of the LMC board member will be sent to all our members in due course.

### UPCOMING LMC WEBINARS

#### PARTNERSHIP WEBINAR

The LMC has recently received several questions in regard to partnership matters including agreements and partnership disputes, so we have asked LMC Law to deliver a webinar on partnerships.

The session will cover a variety of areas relating to partnerships, as well as having an opportunity to ask any questions to Shanee on specific partnership matters – if you don't wish to disclose your practice, you can email any questions to LMC office in advanced.

Date: Tuesday 7<sup>th</sup> June 2022

Time: 12.00 – 2.00pm

Topics covered will include:

- Starting and retiring from General Practice
- Partners and Partnerships (incl partnership agreements and disputes)
- Matters to consider when adding a new partner
- Partnership terms
- Core contracts

- Core hours and essential services
- Fees and charges
- Suspension

#### MCCD/CREM4 FORM WEBINAR

LMC board member, Dr Ingrams recently produced guidance on the changes to MCCDs and Crem4 forms which came into effect from 25<sup>th</sup> March. The guidance shared is available here - [LLR LMC: Completion of Medical Certificates of Cause of Death \(MCCD\) and Verification of Death \(VoD\)](#)

The Short Practical Guide to completing MCCD and Form Cremation 4 has also been updated and is available [here](#). We have also produced a quick reference guide to aid GPs in deciding whether to complete an MCCD or report to the coroner. These documents have been produced with input and support from Professor C Mason.

We have received several questions from practices on the changes and asking for clarity, Dr Ingrams has kindly agreed to deliver a lunchtime webinar on the changes and answer any questions.

A separate communication with the date and details will be shared with our members in due course.

**If you would like to reserve a space on either of these webinars, please email us at [enquiries@llrlmc.co.uk](mailto:enquiries@llrlmc.co.uk) and we will share the link for the relevant webinar with you.**

#### PCN DES ENHANCED ACCESS

We are aware since the details of **enhanced access** (Section 8.1 of the revised Network Contracted Directed Enhanced Service) has been published there has been a lot of debate amongst the profession, GPC and media in relation to the requirements of the enhanced access.

It is worth reminding Practices that the PCN DES is an extension of the core contract.

The core contract clearly says:

The Contractor must provide: (a) services required for the management of the Contractor's registered patients and temporary residents who are, or believe themselves to be: (i) ill with conditions from which recovery is generally expected; (ii) terminally ill; or (iii) suffering from chronic disease, which are **delivered in the manner determined by the Contractor's practice** in discussion with the patient;

The core contract does not say a GP has to be on the premises at all times during the contracted hours, and by extension, therefore, a GP does not have to be present during EA hours.

The PCN DES clearly says:

"Delivered by a multi-disciplinary team of healthcare professionals employed or engaged by the PCN's Core Network Practices, including GPs, nurses and Additional Roles and other persons employed or engaged by the PCN to assist the healthcare professional in the provision of health services;

a mixture of in person face to face and remote (telephone, video or online) appointments, provided that the PCN ensures a **reasonable number of appointments are available for in person face-to-face consultations** to meet the needs of their patient population, ensuring that the mixture of appointments seeks to minimise inequalities in access across the patient population.

Given that not all consultations need to be face-to-face, by definition that also means a GP doesn't have to be on the premises at all times.

## **FEES CALCULATOR**

The BMA has published a fees calculator which helps GPs to determine the right fee for work. This tool is only available to BMA members and can be accessed by clicking on the link, <https://www.bma.org.uk/pay-and-contracts/fees/fees-calculator/bma-fees-calculator>.

As practice managers are not BMA members, practice managers can get access for 6 months by registering on the following link <https://www.bma.org.uk/about-us/contact-us/get-in-touch/bma-website-help>

## **GP DECLARATION OF EARNINGS**

The legislation requiring the declaration of earnings from some doctors is not currently being implemented. GPC understands that this will likely be revisited this summer, but no action is required at this stage. Declarations are not required by 30<sup>th</sup> April 2022.

If practices did submit this information, it will not be published by NHSEI unless they announce that they are implementing the legislation in the summer or beyond.

For complete clarity, this doesn't relate to the contractual requirements to publish salary information on practice websites. This remains a requirement.

## **DELIVERY OF PRACTICE TRACKING LABELS AND MEDICAL RECORDS**

PCSE has provided an update about the delivery of practice tracking labels and medical records.

"In March practices didn't receive as many labels as they were expecting for patients leaving their practice. We would like to reassure both LMCs and practices that this has been addressed and all labels have now been printed and will be delivered over the next two weeks.

Due to labels taking slightly longer to reach their deducting practice, practices will see an increase in the medical records they receive throughout May. If practices are waiting on a physical medical record they can check the status on PCSE Online to see whether the previous practice has released it."

PCSE has shared the following update with practices which you can view [here](#).

## **BMA CAMPAIGN FOR FAIR PAY**

The BMA has recently issued this statement, "Over the last two years doctors have worked tirelessly, with many putting their lives on the line to keep patients safe during the pandemic. With the NHS facing a backlog that will takes years to clear, in the face of severe staff shortages, these extraordinary pressures are set to continue.

Inflation is soaring and doctors are being driven out of the NHS by punitive pension tax rules. The BMA is now calling on the UK Government to award doctors a minimum pay rise of RPI plus 2% for doctors, including those working in public health services."

The BMA is urging that doctors in England write to their local MP asking for their support for our campaign. Using the [BMA's online tool](#), you can add your name to a template letter, that will be automatically sent to your local MP.

## **INFECTION PREVENTION CONTROL IN HEALTHCARE SETTINGS**

The UKHSA has revised the [Infection Prevention Control](#) (IPC) guidance for healthcare workers, and now advises returning to pre-pandemic physical distancing in all healthcare settings, including primary care, and returning to pre-pandemic cleaning protocols outside of COVID-19 areas, with enhanced cleaning only required in areas where patients with suspected or known infection are being managed.

The guidance continues to recommend all healthcare organisations should undertake local risk assessments to ensure safe systems of work in the context of the wider impact of COVID-19 on health services. Practices should assess the risk to patients and staff using this guidance, and make decisions based on the needs and risks of everyone entering

their practice building. Practices should also continue to triage patients and cohort people with respiratory illnesses. Read our [guidance](#) on risk assessments for practices

The guidance still advises that all patients, visitors and staff should continue to practise good hand and respiratory hygiene, including the continued use of face masks by staff and face masks / coverings by visitors and patients where clinically tolerated.

NHSE/I has published a [letter setting out these changes](#)

Read also the [BMA's briefing](#) in response to the Government's '[Living with COVID-19' strategy](#) which sets out the plans for managing COVID-19 going forward.

Download the BMA's updated [poster about using face coverings in practices](#).

#### ARRIVALS FROM UKRAINE: ADVICE FOR PRIMARY CARE

The UK government has published guidance [Arrivals from Ukraine: advice for primary care](#) to help primary care professionals assess and address the health needs of patients ordinarily resident in Ukraine who have arrived in the UK. Arrivals will usually be under the government visa schemes [Ukraine Family Scheme](#) and the [Ukraine Sponsorship Scheme \(Homes for Ukraine\)](#).

The guidance notes that it is important to adopt a [trauma-informed approach](#) that offers clear information and choice, supporting individuals to feel in control. Doctors of the World has produced the [Safe Surgeries initiative](#) (endorsed by the BMA) to tackle the barriers faced by many migrants in accessing healthcare, with GP registration being the first hurdle that this vulnerable group needs to overcome.

#### NATIONAL FLU IMMUNISATION PROGRAMME 2022/23

UKHSA has published the annual [National flu immunisation programme 2022/23 letter](#) which sets out which groups are eligible for flu vaccination for the 2022/23 flu season.

NHSE/I will be publishing the specifications shortly and have advised us that suppliers have committed to flexibility if the reimbursement letter has impacted current orders. Therefore, if practices are having trouble amending orders, they should contact the contact the NHSE/I flu inbox [phco.fluops@nhs.net](mailto:phco.fluops@nhs.net).

#### ACCELERATING PATIENT ACCESS TO THEIR GP-HELD RECORDS

General practices were previously informed that from April there will be system changes for all practices using TPP and EMIS systems to provide all patients with easy access to their future health records. GPs will be informed of the go-live date (now expected summer 2022) with 2 months' notice and provided with resources to support preparations.

Educational sessions have been held to support staff with this change. Over 40% of practices have already attended at least one webinar, with [further places available](#) throughout May and June.

Read [further information about the change](#) or [contact the team](#) if you have any questions.

#### MANTAINING UP TO DATE CONTACT DETAILS FOR OUR MEMBERS

We try hard to keep up to contact details for our members (GPs and Practice managers) the best we can, but often rely on practices notify us of any changes.

Since the NHS email integration, we understand keeping our contacts for our members up to date has been no simple task, so if your colleague has not received this email, it means we don't hold the correct contact details for them.

If your email address has recently changed, please share your new address with us so we can update our records accordingly.

## RECRUITMENT & VACANCIES

We know recruitment is no easy task for General Practice anymore, so if you have a vacancy within your practice which you would like help advertising, we are happy to help spread the word! Simply send us a copy of the advert and job description to [enquiries@llrlmc.co.uk](mailto:enquiries@llrlmc.co.uk).

The vacancies will then be listed on our website - [LLR LMC: Jobs](#)