

**JULY
2021**

LOCAL MEDICAL COMMITTEE
LMC
GLOUCESTERSHIRE

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NEW PCSE PAY & PENSION SYSTEM UPDATE (ENGLAND)

We are concerned about the number of issues being raised about the new online portal for pay and pensions. These are wide-ranging and involve both historical migrated data and current data. We are aware of some of this data being incorrect, some of it being missing and still more just being unclear to users. It is affecting GPs' pension data in many instances, locum and solo performers being particularly affected, and there have also been early issues with some payment runs to practices. PCSE assures us that all of this is being addressed urgently but we need to see more evidence that this is happening.

The BMA, along with the Institute of General Practice Management, have [written to the Chief Commercial Officer of NHS England](#) to raise concerns and demand urgent action to ensure that GPs and practices are able to use the system as intended as we approach a critical time for many users.

GP engagement with the new system remains low according to the data we have seen, so we would urge GPs to log in and check their records as a priority and to [inform PCSE](#) of any errors. We would also ask all system users to make use of [PCSE's guidance materials](#). We understand that a significant number of calls and emails to PCSE are being answered with information from the guidance.

ENHANCED SHARED PARENTAL LEAVE SYSTEM FOR SALARIED GPs (UK)

The new [enhanced shared parental leave](#) system for salaried GPs has been launched across the UK and will allow for up to 50 weeks of the 52 weeks maternity leave to be shared between the parents. Eligible parents are also able to share up to 37 weeks of statutory shared parental pay (equivalent of statutory maternity pay). The ESPL system will be offered by employers at GMS and some PMS practices. Employees may request for this new form of leave to be included in their contracts, in line with provisions for junior doctors and agenda for change staff. This change to a more flexible form of leave supports the BMA's commitment to address the gender pay gap. [Find out more about enhanced shared parental leave entitlements](#) and read the updated [Salaried GPs handbook](#)

DO YOU HOLD A GP SPONSORSHIP LICENCE?

If so, the BMA is keen to hear from you. Whether you already hold a sponsorship licence or are considering getting one to employ non-UK nationals, they really want to know how you found the application process and any barriers that you faced.

The Home Office introduced a new sponsorship system last October, in preparation for the introduction of the new immigration system which came into force in January 2021. The new system is designed to alleviate many of the complexities of the old system and it is hoped the new application process will support employers to apply for a sponsorship licence with relative ease. As detailed in the updated [guidance](#), employers can now apply [online](#).

The Home Office wish to survey small businesses, including GP practices to get a sense as to any barriers in the system. If you have any insights into the sponsorship process that you wish to share, please contact Caroline Strickland, Senior Policy Advisor in BMA's International Affairs on the following email CStrickland@bma.org.uk

Here in Gloucestershire, our LMC and Training Hub are in discussion with the CCG to see what can be done to support practices who may wish to sponsor a Tier 2 Practitioner.

MEETINGS WITH HEALTH MINISTER JO CHURCHILL (ENGLAND)

The BMA met with health minister, Jo Churchill, to follow up the points raised in previous meeting with the Secretary of State for Health and Social Care and following his recent [letter](#), where we called on the Minister to bring an end to SOPs, and the NHSE/I approach to overly prescriptive management of general practice. We also asked for improved direct messaging to patients and pushed for the PCN service specifications planned for October to be delayed until April 2022 at the earliest in order to reduce additional workload burden for practices during the autumn and winter when we are likely to be facing a rise in respiratory illness alongside the need to focus on flu/COVID-19 vaccinations and support patients impacted by the on-going NHS care backlog.

We raised the need to maximise ARRS recruitment this year, to maintain the options for flexible working and the issue of practice premises, including the need for more space, not least for PCN recruited staff to work from. We also discussed the need for the government to do more to inform the public about the pressures the whole NHS was under and for them to encourage people not to take out their frustration on frontline staff, particularly by abusing reception staff.

MEETING WITH THE MINISTER FOR COVID VACCINE DEPLOYMENT, NADHIM ZAHAWI

Dr Richard Vautrey met with Vaccines Minister, Nadhim Zahawi to discuss the COVID booster vaccine and the flu vaccine preparations. The Minister opened the meeting by thanking GPs for their work and recognising the success of the COVID vaccine programme. He outlined that work is underway to roll out a booster campaign, but that questions remain and the final decision will be made by the JCVI. Operational guidance will be coming out shortly to enable practices to opt in to phase 3 of the programme.

EXEMPTIONS FOR CARE WORKERS

Following a public consultation, it was announced by the Government that, from October, [people working in care homes will need to be fully vaccinated against COVID-19](#). This will impact those who visit care homes, including GPs and community teams. The government has said that a small number of people would be exempt and whilst they have indicated that individuals may be directed to their GP to provide evidence for their exemption, we do not believe this should be the approach.

A better approach would be for local authorities to receive support in commissioning a dedicated service to assess exemption requests that does not require GP involvement. The government plans to launch a further public consultation on whether or not to extend this to include all those employed in health and care settings. Read the [BMA's response](#) to the announcement on a consultation on mandatory COVID-19 vaccinations for healthcare workers.

COVID-19 VACCINATION PROGRAMME

Vaccine cohorts

[All adults aged 18 and over](#) (cohort 12) in England are eligible for the COVID-19 vaccines and will be receiving texts inviting them to book a vaccination via the national booking service, at an NHS vaccination centre, pharmacy or GP vaccination site. This weekend many sites will be offering the opportunity to attend a centre without an appointment for vaccination.

Vaccine supply

While the limited supplies of the Moderna vaccine have always been directed to mass vaccination sites, in recent weeks some areas have reported seeing a significant reduction in the volume of Pfizer vaccine available and supplies are not meeting demand from those still to be vaccinated. This means some people waiting weeks for their first-dose appointment at a time when we need as many as possible to be protected as quickly as possible.

While the Government insists that the UK is on track to offer a first dose to all adults by its own 19 July deadline, we need honesty and transparency about what supplies are available nationally. This is especially urgent given the need to stem the spread of the Delta variant by vaccinating as many people as quickly as possible.

FAQs to support general practice and students in higher education institutions

NHSE/I has published [FAQs to support general practice and higher education institutions](#), which advises that although in general, patients should return to the place they had their first dose to have their second dose, students in higher education are able to receive their second dose in a different location to their first dose if they have relocated. The National Booking Service has an option to book or re-arrange the second vaccination appointment at a different location to the first appointment.

The guidance also advises on what the options are for student who had their first dose in Wales, Scotland or Northern Ireland, but is in England at the time of their second dose. If a person has received a first dose of COVID-19 vaccine overseas with a vaccine that is also available in the UK, they should receive the same vaccine for their second dose. If the vaccine they received for their first dose is not available in the UK, the [most similar alternative](#) should be offered.

Vaccine data

[75.5 million doses of COVID-19 vaccines](#) have now been delivered in the UK, and nearly 32 million have also received their second dose.

DEPARTMENT OF HEALTH & SOCIAL CARE DRAFT DATA STRATEGY

The Department of Health and Social Care has published a [draft data strategy](#) setting out plans to harness the potential of data in health and care.

When used effectively, ethically and legally, data can play a pivotal role in improving the health of the population, whether this is for planning, research or for direct patient care. Everyone has a right to know what is happening with their healthcare data, however, as we have seen in recent weeks with the pausing of the GDPR roll-out what happens when these issues are not communicated properly, and patients are not given an opportunity to take part in such important discussions.

Therefore, the Government and NHSX must follow through with commitments to engage fully with both the public and the profession, addressing any concerns they may have about

this strategy and specifically proposals around sharing data more widely than for direct care.

The GPC will be considering the draft strategy in detail and responding formally on behalf of our members and their patients in due course. Read the full statement in response by Farah Jameel, GPC England Executive team IT lead, [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, which amounts to two months 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 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. In the interim, you may wish to consider as a practice whether to proactively contact patients to inform them of what is changing. Read the full statement about the announcement to delay [here](#)

If patients register a Type 1 Opt-out, practices must process this in a timely fashion. Codes for opt-out can be found [here](#) and are copied below for ease

Opt-out - Dissent code

9Nu0 (827241000000103 |Dissent from secondary use of general practitioner patient identifiable data (finding)|)

Opt-in - Dissent withdrawal code

9Nu1 (827261000000102 |Dissent withdrawn for secondary use of general practitioner patient identifiable data (finding)|)]

Further information, including a transparency notice, is available [here](#)

This was reported by the [Eastern Eye](#).

CERVICAL SCREENING ADVERSE INCIDENT (SCOTLAND & ENGLAND)

In December 2020, a national health service board in Scotland conducted its annual invasive cervical cancers audit and discovered that a very small number of women had developed cervical cancer after being wrongly excluded from the screening programme following a hysterectomy that was carried out more than 20 years ago. The Scottish Government have apologised for this [cervical screening incident in Scotland](#), but it is now clear that a small number of those affected now live in England (currently believed to be 19 individuals). NHSE/I will be contacting the respective practices for those patients (via regional screening leads) to ask them to notify the patients identified that they're impacted by the incident and provide advice on the appropriate next steps e.g., follow up appointment in colposcopy. They'll be providing supporting materials to those practices, including a patient letter, based on the NHS Scotland response.

CONTACT YOUR MP ABOUT PUNITIVE PENSION TAX

The BMA will begin its campaign addressing the taxation issues within the NHS Pension Scheme with a Parliamentary briefing event on 1 July. We are looking to gather support and attendance from MPs from all parties and nations to address this vital issue. BMA members are encouraged to support this event by [tweeting their MP](#) to highlight the event directly to them. Please join us and invite your MP along to the event by using our [template form](#)

RCGP REPORT ON RELATIONSHIP BASED CARE

The RCGP has published a new report '[The power of relationships: what is relationship-based care and why is it important?](#)', which sets out what is meant by relationship-based care – “care in which the processes and outcomes of care are enhanced by a high quality relationship between doctor and patient” - what the evidence tells us about its benefits for patients, GPs and the wider healthcare system, and why relationship-based care needs to be reinvigorated.

BMA COVID-19 GUIDANCE

Read the [COVID-19 toolkit for GPs and practices](#), which provides comprehensive guidance for practices to manage contractual issues and service provision during the coronavirus pandemic.

You can access all the BMA guidance on COVID-19, including ethical guidance, [here](#)

GPC UK & GPC ENGLAND COMMITTEE PAGES

Read more about the work and priorities of [GPCUK](#) and [GPC England](#) in the newly updated committee pages, which also includes surveys undertaken, membership of the committee, meeting dates and a link to the [GP practices page](#). You can also follow on [twitter](#)

Read the GP bulletin [here](#).

QOF 2021/22 QUALITY IMPROVEMENT TEMPLATES

The Quality Outcomes Framework (QOF) Quality Improvement (QI) reporting templates for 2021/22 have been published and are [available to download](#).

PROPOSED CHANGES TO ANNUAL COMPLAINTS COLLECTION (K041b FORM)

NHS Digital has published a [response to their consultation on the proposed changes to the annual complaints collection \(K041b\)](#) and the plan for its reintroduction. NHS Digital have confirmed that collections will resume from the 9 August to capture complaints recorded in 2020/21. The NHSD response sets out:

- A range of simplifying changes that will be introduced - some will commence at the next collection whilst others will commence at future collections.
- There will be an extended 12-week collection window for the next collection
- Improvements to the portal to address specific technical issues that previously occurred, which should make the experience of uploading the return easier.

PCN CD REMUNERATION

GPC lobbying has resulted in NHSEI confirming a further welcome extension to pay the full sessional payment to PCN clinical directors in recognition of their work.

LONG-COVID AND WEIGHT MANAGEMENT ENHANCED SERVICES

NHSEI published two new Enhanced Services relating to Long-COVID and Weight Management. Additional support for practices to help patients with long-COVID has merit. The GPC wants more help for the general practice workers who themselves need occupational health services and the practices that need financial support to better help colleagues on prolonged sick leave.

The Weight Management Enhanced service will present additional work at a time when practices are already stretched. We also have concerns that the specification is overly bureaucratic, further micromanages clinical consultations, is clinically flawed and demonstrates a lack of trust in GP teams to do what is best for patients. It is not clear that local weight management services have the capacity to respond to increased referrals.

It is disappointing because NHSEI could have shown commitment to be less directive and HMG could have addressed the factors underlying obesity.

KOOTH

During the summer months [Kooth.com](https://www.kooth.com) is still helping young people aged 11 - 18 in Gloucestershire and [Qwell.io](https://www.qwell.io) for adults (18+) with free, safe and anonymous wellbeing support and advice. Accessible from any internet enabled device Kooth and Qwell are available every day. If you would like more information, please email rpotter@kooth.com Please find below, links to relevant resources for this month that you can download from the digital resource hub: ([GUIDE HERE](#))

Posters to remind young people about support from Kooth over the summer holidays [HERE](#)

How to talk to young people about Mental Health [HERE](#)

How to sign up to Kooth [HERE](#)

What's on Kooth in July [HERE](#)

INAPPROPRIATE WORKLOAD

This updated [guide](#) will help practices to agree quantitative limits to individual safe practice for GPs. Appropriate limits on workload will depend on the unique circumstances of each practice, the contractual status and the preferences of each individual GP, as well as the complexity of care being provided.

REFUSAL TO PRESCRIBE UNDER A SHARED CARE AGREEMENT

Situations occasionally arise where a GP does not wish to prescribe under a shared care agreement. A suitable letter template to use to decline can be found [here](#)

QUALITY ALERTS

Hospital practitioners can request bloods electronically using their own system which is called 'Sunrise'. This is different to the GP ICE system. It has been brought to our attention that there has been use of GPs names to request bloods as a 'default' position, and the LMC has discussed the problem with GHFT. We are reminded that if GPs encounter an event which is a safety issue, they can use the 'Quality Alert' system.

'[Quality Alert](#)' is the way that Primary Care colleagues can tell the CCG about concerns they may have with the quality of care elsewhere in the healthcare system.

For example, many GPs tell us about issues they've had with poor quality or late information being sent to them after a patient has spent time in hospital. Others have told us about delays that patients have had or when they have concerns about the medication they have been given.

To register a Quality Alert, email GLCCG.SQalert@nhs.net. Please don't send patient identifiable details though as they can't handle this data at the CCG.

They will register your Alert and acknowledge receipt. Although every Alert is different, they will normally ask a CCG Quality Lead to liaise with the provider who has caused the concern and ask them to investigate. Following investigation, either the provider or Quality Lead will respond to let you know the outcome.

They collect themes and trends from all the alerts and present this to the CCG Quality and Governance Committee, as well as other meetings to help inform their work.

On 25/06/2021, we heard of safety concern with the new hospital pathology system. Since a change to the system, results were being returned with the clinical details removed.

Previously they were available with the result. To access the clinical detail, one had to go onto ICE for each individual result to view the request form. This means each result will take about 3 times longer to process. The LMC supports prioritising a repair.

LMC REPRESENTATIVE FOR TEWKESBURY

Dr Sanjay Shyamapant has been co-opted to the casual vacancy created when Dr Penny Baker stepped down. Sanjay is an experienced GP Principal and has served on the LMC before. We look forward to working with him again.

SESSIONAL GP ISSUES

NHS mail for sessional GPs has been rolled out, recognising the important contribution of locum GPs to the workforce. GP locums can apply [here](#).

Doctors who move from partnership/salaried roles to locum sometimes have difficulty transferring their NHS e mail address to locum status. If you are stuck with this, contact helpdesk@nhs.net and locumadmin@nhs.net who will help you sort it out.

The NHS pension scheme as a sessional GP Dr Krishan Aggarwal, a GPC England and Sessional GPs Committee member, and deputy chair of the BMA Pensions Committee, has written a webpage for sessional and locum GPs on the NHS pension scheme, which replaces his previous blogs on this issue. The webpage is going to be a live document and if there is anything you would like to be covered, please email the BMA at Sessionalgps.gpc@bma.org.uk The guidance sets out which pension tier to use, submitting the right forms, annualisation, the total rewards statement (TRS), the upcoming PCSE portal and how to escalate complaints to PCSE. The webpage is [here](#)

Read the latest Sessional GPs newsletter [here](#)

BMA COUNSELLING SERVICES

[BMA wellbeing counselling service](#) currently provides 24/7 support to all doctors and medical students in the UK, regardless of BMA membership, and is free of charge. Support is also available to the partners and dependants of doctors as well as medical students, aged 16-24. They are **now able to offer face-to-face counselling** for the next six months, in addition to existing services - through a grant from the [COVID-19 Healthcare Support Appeal](#), a subsidiary of the Royal College of Nursing.

SAFE HOUSE

GP Safe House (GPSH) is a virtual safe house providing a refuge and support for practitioners experiencing professional challenges. It guarantees anonymity, security and confidentiality and understands that these are essential. GPSH has five virtual rooms which offer support, information and resources. Each room corresponds to a different potential problem area. It has recently received a makeover/update from Somerset LMC who devised it.

Services available are:

Consulting Room - Personal Health Information for the Gloucestershire Area

Burnout Recovery Suite - Burnout and Stress

Professional Relationships Bureau - Working Relationship Problems

Library of Solutions - Non-clinical Aspects of Patient Care

Career Development Office - Professional Development

Contacts for Support and Advice - This is a link to the Gloucestershire LMC Advocate Area which offers the possibility of a personal, completely anonymous, one-to-one, online consultation with a professional advisor as well as more everyday modes of communication! If you have misplaced or never received a password and would like one, please contact the office. The LMC pastoral care support continues.

If any GP would like LMC support, but would prefer to ask someone other than their area Rep, please contact the office.

Also, please find below a link to the 'Supporting GPs Mental Health and Well-Being' page on the Training Hub Primary Care Workforce Centre website which has been set up to provide GPs with information and links to the resources currently available to provide support. Read it [here](#). Dr Ansell Consultant Psychiatrist recommends the [covid resilience hub](#).

The Heales Medical Group occupational health service is still available to NHS GPs. To register for the service and for further information please go to the Heales Medical website at www.heales.com/ This service is in addition to the NHS GP Health Service which is available for any registered GP or GP trainee on the NHS England performers' list who has:

- A mental health concern (at any level of severity)
- An addiction problem (whether alcohol, drugs or other addictions)

Further information about how to access this support is available on the GP Health website at <https://gphealth.nhs.uk/contact-us/>.

Also, there's a list of organisations which clinicians may contact for help and support can be found on the following NHS England webpage: www.england.nhs.uk/south/info-professional/medical/support-for-gps/ - these include:

- Local Medical Committees (LMCs)
- Royal Medical Benevolent Fund
- Royal Medical Foundation
- BMA wellbeing support services
- BMA Charities Trust Fund
- British International Doctors' Association
- The Cameron Fund
- The Medical Council on Alcohol
- Doctors' Support Network
- KSS Deanery
- The British Doctors' and Dentists' Group
- The Sick Doctors Trust
- Practitioner Health Programme
- Alcoholics Anonymous
- Narcotics Anonymous
- Samaritans.

OTHER COVID 19 RESOURCES

[BMJ – news and resources](#)

[RCGP COVID-19 information](#)

[NHSE/I daily primary care bulletins on COVID-19](#)

[COVID-19 Google Drive resource](#)

[NICE resources on COVID-19](#)

A PENNY FOR YOUR THOUGHTS

If you want to get a public health message across, celebrity endorsement seems to be the way to go. In the current Euro football tournament, a high-profile footballer ditched Coca Cola placement in a press conference, and shouted 'Drink water!' The market value of Coca Cola plummeted by 32.8 million. Now we need to convince the 18-24 lads that covid vaccine is the defence of the season. Perhaps the footballers could wear stickers to show they've been brave and had the jab.

Who is the impossible to ignore footballer? Reply to penelopewest@gloslmc.com by 20th July 2021 to be entered into the draw. The prize will be a £10 donation to a charity chosen by the winner, who will retain the bragging rights.

Congratulations to Dr Rosemary Ginns winner of the June competition. The answer was Seneca the Younger. There were 4 correct entries. A donation was made to Égalité Absolue.

The LMC will continue to run with a mixture of office and home working. Some of our meetings will be by skype, Zoom or telephone. Dr Penelope West's mobile number is 07415290140 if that is useful.

JOB OPPORTUNITIES

A full list of current job adverts is at <http://www.glosmc.com/blog-job-vacancies.asp> and available below.

GLOUCESTERSHIRE			Date posted	Closing Date
Partners in Health	Gloucester	Salaried GP Partner with view to extend	30 Sept 20	Open
Rosebank Health	Gloucester	Salaried GP	10 Mar 21	Open
Church Street Medical	Tewkesbury	Salaried GP	17 Mar 21	Open
Aspen Medical Practice	Gloucester	Salaried Doctor/GP Partner	21 Apr 21	Open
Dockham Surgery	Cinderford	GP	23 Apr 21	Open
Phoenix Health Care	Kemble/Cirencester	GP Temporary contract	23 Apr 21	Open
Primary Healthcare Team GP	Gloucester	GPs to cover 2 x sessions a week	05 May 21	Open
Royal Crescent Surgery	Cheltenham	GP (2 sessions)	28 May 21	Open
Cotswold Medical Practice	North Cotswold	Partner/Salaried GP	28 May 21	30 June 21
Upper Thames Medical Group	Cirencester/Lechlade	Salaried GP	01 June 21	02 July 21
Hucclecote Surgery	Gloucester	Fixed Term Salaried GP (Maternity Cover)	04 June 21	Open
Leckhampton Surgery	Cheltenham	Partnership or Salaried	06 June 21	23 July 21
Chipping Campden Surgery	North Cotswolds	GP Partner/Salaried GP with view to Partnership	09 June 21	Open
Frampton & Stonehouse Practice Group	Frampton/Stonehouse	Salaried GP	16 June 21	Open
Brockworth Surgery	Gloucester	Locum GP	16 June 21	Open
Newnham and Westbury Surgery	Newnham	Salaried GP with a view to Partnership	18 June 21	Open
St Paul's Primary Care Network	Cheltenham	GPs	18 June 21	Open
Underwood Surgery	Cheltenham	Salaried GP (View to Partnership if desired)	23 June 21	16 July 21
Weston House Practice	Cheltenham	Salaried GP or Partner	30 June 21	Open
Longlevens Surgery	Gloucester	Salaried GP with a view to Partnership	30 June 21	Open
ELSEWHERE				
The Vauxhall Practice	Chepstow	Salaried GP (Maternity Cover)	16 June 21	31 July 21

Sibford Surgery	North Oxfordshire	GP Partner	16 June 21	Open
Townhill Community Surgery	Southampton	Salaried GP with a view to Partnership	25 June 21	Open

REMINDER: If you are advertising with us and fill the vacancy please let us know so we can take the advert down.

[The Spark Programme – Funded CPD, educational sessions, peer support and mentorship opportunities for Newly Qualified GPs in Gloucestershire.](#)

Are you a newly qualified (or about-to-qualify) GP whose CCT date is between August 2020 and November 2021? If so, you may be interested in the Spark Programme, run by the Gloucestershire Primary Care Training Hub.

What is it? A two year programme of monthly educational evening sessions aimed at New To Practice GPs, where your time is funded. You can also access mentoring from senior GPs, peer support groups with other newly qualified GPs, networking opportunities, and the opportunity to apply for a funded CPD project of 26 sessions.

When is it? The programme will commence in August 2021 and run until May 2023. For further information, and for a link to an application form, please see the link below:

<https://glosprimarycare.co.uk/news/the-spark-programme-applications>