

LMC ELECTIONS: 2020-2024

The current LMC's Term of Office ends on 30 November 2020, with a new committee being convened in December.

We are pleased to announce that the elections for the 2020-2024 Term of Office will be overseen by Dr Trish Edney, who has kindly agreed to take on the role of Returning Officer.

Nomination papers will be posted to all represented GPs (at the practice address where GPs are based in a practice). All levy paying GPs on the national medical performers list at the time of the election will be eligible to join the LMC.

The LMC's primary function is to represent Sheffield GPs, and it is extremely important that local GPs have a means of debating the important topical issues and influencing or making policy, in order to represent the breadth of general practice in Sheffield. General practice, even prior to the COVID pandemic, was experiencing unprecedented workload, recruitment issues and organisational change. It is vital that the profession locally is heard and expresses its views.

We hope to encourage all branches of general practice - partners, salaried doctors and locums - to be represented and give their opinions. We are keen to welcome new members, as well as re-electing existing members, in order to ensure the continuation of our current strong negotiating position and extensive support and representation of Sheffield practices.

The Committee meets on the second Monday of the month at 7.45 pm. During the pandemic meetings have been held virtually, but were previously held at Tapton Hall. Members are also able to participate in various other meetings and negotiations which shape health policy and direction in the city, should they wish to do so.

Further details of the work of the LMC can be found here, and our Chair's Update issued in February can be found here.

If you are interested in joining the LMC and would like further information, or the opportunity to discuss membership, prior to the elections commencing, please do not hesitate to contact David Savage via <u>secretary@sheffieldlmc.org.uk</u> or Margaret Wicks via <u>manager@sheffieldlmc.org.uk</u>.

COVID-19 SUPPORT FUND FOR GENERAL PRACTICE

The Government has previously described the intention to create a COVID-19 fund to assist with the legitimate additional costs of the response borne by GP practices. Details were published on 4 August 2020 setting out how practices can claim for:

- Specific and net additional costs incurred for Bank Holiday opening across Easter and on 8 May 2020.
- Additional net costs incurred in delivering additional services to Care Homes.
- COVID-19 related absence cover from day one of absence, where it was required to maintain necessary clinical and non-clinical capacity, staff could not work from home, and the individual received full pay.
- Additional capacity which has been required, where supported by the commissioner.
- Costs incurred as a result of purchasing other consumables required as a result of COVID-19.

Last week all practices should have received a <u>letter</u> from NHS England confirming the details of the COVID-19 Support Fund for General Practice. We would urge practices to read the letter and, in particular, note the statement "*Practices should submit actual claims within six weeks of the date of this letter*":

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COVID-19 Resources: Sheffield LMC Website

Documents added to or updated on the COVID-19 page of our website since the July LMC newsletter include:

- Face covering exemption guidance
- <u>Supporting staff who are shielding to return to work</u>
- Risk Assessment for Staff and Premises

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OCCUPATIONAL HEALTH SERVICES: GPs AND PRACTICE STAFF

Practices will be aware of recent <u>guidance</u> from Sheffield Clinical Commissioning Group (CCG) with regards to COVID risk assessments for staff and GP employers. This refers to advice available from the occupational health department following practice assessments as employers and also availability to mediate in disputes.

The LMC has sought clarification with regard to the ongoing service available to practices with regard to doctors and employees. We have been assured by the CCG that the historical contract for both GPs and their staff is still commissioned through Occupational Health at Sheffield Teaching Hospitals (telephone number and referral template included in the CCG guidance). If practices have any issues accessing this service please inform the LMC office via <u>manager@sheffieldlmc.org.uk</u> and we will take them up with the commissioner.

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FACE COVERINGS IN GENERAL PRACTICE

Following the Government's announcement that face coverings will be mandatory for people visiting shops in England as from 24 July, the British Medical Association (BMA) has been <u>calling for the policy to be extended</u> for all places where social distancing cannot be maintained, including GP practices. Public Health England has published <u>New recommendations for infection control in primary and community health care providers</u>, which states that:

- Practices should ensure that measures are in place so that all settings are, where practicable, COVID-secure, using social distancing, optimal hand hygiene, frequent surface decontamination, ventilation and other measures where appropriate.
- Where a setting cannot be delivered as COVID-19 secure, a local assessment may conclude that primary care staff, when not otherwise required to use personal protective equipment, *should wear a face mask*, to prevent the spread of infection from the wearer.
- Where a COVID-19 secure environment cannot be maintained, patients and members of the public entering primary care premises should be advised to use face coverings in line with government advice.

This guidance is in addition to existing national COVID-19 infection prevention and control (IPC) guidance, which advises on appropriate PPE usage in patient facing clinical settings and other measures to reduce transmission risk.

PPE PORTAL REMINDER

The General Practitioners Committee (GPC) has issued a reminder about the existence of the PPE Portal for ordering free, emergency top-up supplies of PPE, to ensure regular supplies of PPE in advance of the winter / flu campaign.

An invitation to register to use the portal should have been emailed to the practice email address that is registered with the Care Quality Commission (CQC).

More information and guidance is available <u>here</u>. The portal customer service team can be reached on 0800 876 6802 for enquiries or registration support.

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REMOTE INTIMATE CLINICAL ASSESSMENTS

<u>Joint guidance</u> has been developed setting out the key principles for intimate clinical assessments undertaken remotely in response to COVID-19.

The pandemic has accelerated the use of online and video consultations in general practice and the guidance is aimed at clinicians who are consulting remotely and focuses on how to safely manage the receipt, storage and use of intimate images taken by patients for clinical purposes, which must be guided by the principle of the interests of the patient. The approach to video consulting, image sharing, and storage should be the same as it would be for face-to-face interactions.

The principles described in the guidance aim to support patients to access care in a way that meets their needs and to support clinicians to provide care in a way that is in the best interests of their patients, whilst protecting both from the risks associated with remote intimate assessments.

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NATIONAL FLU IMMUNISATION PROGRAMME 2020/21

Details of the 2020/21 flu immunisation programme were announced last week in a joint letter which outlines that this year, as part of the wider planning for winter, and subject to contractual negotiations, flu vaccination will be additionally offered to:

- household contacts of those on the Shielded Patient List specifically individuals who expect to share living accommodation with a shielded person on most days over the winter and therefore for whom continuing close contact is unavoidable.
- children of school Year 7 age in secondary schools (those aged 11 on 31 August 2020).
- health and social care workers employed through Direct Payment (personal budgets) and / or Personal Health Budgets, such as Personal Assistants, to deliver domiciliary care to patients and service users.

It is intended to further extend the vaccine programme in November and December to include the 50 to 64-year-old age group, but this will be subject to vaccine supply and notification about this is likely in September. It is planned that this extension is phased to practices to prioritise those in at risk groups first.

The General Practitioners Committee (GPC) is urgently seeking confirmation that all PPE will be provided for practices and guidance on delivery models (although this will be up to individual practices, working with their localities, to decide).

There needs to be support, resources and leniency so that practices can prioritise the flu programme over this uncertain period.

Flu Vaccination Programme Template

All practices should have recently received a Flu Vaccination Programme template from Sheffield Clinical Commissioning Group (CCG). As the aim of the template is to enable the CCG to gauge what additional support practices may need in order to deliver the flu programme this year, we would encourage practices to complete the template and return it at the earliest opportunity to <u>sheffieldccg.flu2020-21@nhs.net</u>. The deadline for completion is *Friday 21 August*.

If you have any queries or wish to discuss completion of the template, please email the CCG via sheffieldccg.flu2020-21@nhs.net.

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CARE QUALITY COMMISSION (CQC): MYTH BUSTERS

Professor Nigel Sparrow, Senior National GP Advisor at the CQC issues <u>guidance</u> to clear up some common myths about CQC inspections, as well as sharing guidance on best practice, which practices may wish to be aware of. The following Myth Busters have been added recently:

- <u>Resuscitation in GP surgeries</u>
- <u>Sexual and reproductive healthcare</u>
- Patient Group Directions (PGDs) / Patient Specific Directions (PSDs)
- Care of people with a learning disability in GP practices
- Speaking up and listening well
- Looking after homeless patients in General Practice

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SUPPORTING MENTORS SCHEME

The Supporting Mentors Scheme aims to upskill experienced GPs to support their own more junior doctors.

GPs on the scheme will be provided with funded training, leading to a recognised mentoring qualification. Once trained, GP mentors will be reimbursed to conduct one session of mentoring every week.

To be eligible to participate in the scheme, the prospective GP mentor must:

- Be a GP, either as a partner or in a salaried post, working in general practice who holds full registration and a licence to practise with the General Medical Council (GMC)
- Meet the requirements for remaining on the NHS England GP Performers List and report to NHS England any concerns that might affect their status on the National Medical Performers List and
- Not be subject to interim suspension under section 41A of the Medical Act 1983
- Commit to deliver one session of mentoring every week.

This is a national scheme which forms part of a suite of GP recruitment and retention initiatives. Further information can be found <u>here</u>.

Please note that Sheffield LMC's GP-S Mentoring scheme is a separate, locally funded and provided scheme. Details on how to access GP-S can be found <u>here</u>.

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GENERAL PRACTICE FELLOWSHIP PROGRAMME

The <u>General Practice Fellowship programme</u> is a two-year programme of support, available to **all** newly-qualified GPs and nurses working substantively in general practice, with an explicit focus on working within and across a Primary Care Network (PCN).

The programme offers support with PCN portfolio working and learning and development post-registration, supporting nurses and GPs to take up substantive roles, understand the context they are working in and become embedded in the PCN, as well as increase and maintain high levels of participation in the primary care workforce.

Participants receive funded mentorship and funded CPD opportunities of one session per week (pro rata), and rotational placements within or across PCNs to develop experience and support transition into the workforce.

Further information on the programme is available here.

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INTERNATIONAL GP RECRUITMENT (IGPR) SCHEME REVIEW

Given the current challenges presented by COVID-19 and the future relationship with the EU, it is a difficult period for international recruitment. It has been confirmed that NHS England has terminated all contracts with the IGPR scheme recruitment companies as of 30 November 2020.

This means that the programme will be paused ahead of a full review next year. Health Education England will retain funding to see any doctors through the scheme who are already in the system, while the Induction & Refresher scheme will continue to take international doctors on an individual basis.

While the scheme supported some GPs from abroad to work in the NHS, it is now clear that it will fall far short of meeting both its initial target of recruiting 500 GPs and the vastly increased number of 2,000 set more recently. It is now important that an evaluation takes place of how much value it delivered for the investment made.

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DISPENSING SERVICES QUALITY SCHEME (DSQS)

The DSQS was reinstated on 1 August 2020. Dispensing practices wishing to participate in the DSQS this year will need to inform their commissioner.

Following discussions with the General Practitioners Committee (GPC), NHS England plans to revise the requirement in relation to patient medication reviews this year. The scheme currently requires dispensing practices to deliver medication reviews for at least 10% of their dispensing patients. This requirement will be reduced to 7.5% in light of the current circumstances. Practices are asked to prioritise patients who they consider to be higher-risk or would benefit most from a review. Practices will also be able to undertake these reviews remotely if they so wish and it is clinically appropriate. The Statement of Financial Entitlements (SFE) will be amended to reflect this. All other requirements remain the same.

Dispensing practices should receive a letter confirming the position.

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PUBLIC SERVICE PENSION SCHEMES CONSULTATION

The Government has opened a consultation on changes to the transitional arrangements to the 2015 schemes after conceding that the protection offered to older members resulted in unlawful age discrimination.

The British Medical Association (BMA) brought legal cases on behalf of its members which are currently on hold. However, similar protection to older members was offered when the NHS 2015 career average revalued earnings scheme was introduced and, as such, this is also likely to amount to unlawful age discrimination. However, it is important to note that it was the offering of protection to older members rather than the introduction of the new scheme that is unlawful.

To remedy this age discrimination, the Government has released a <u>consultation</u> proposing two options for the period in which the discrimination occurred (1 April 2015 to 31 March 2022). The consultation outlines that the likely solution to rectify this discrimination is to offer affected members the choice of whether they are transitioned to the 2015 scheme or remain in their legacy scheme (1995 / 2008) for the remedy period. After the remedy period, all scheme members are likely to move to the 2015 scheme, probably in April 2022. The deadline for the consultation is 11 October 2020. In addition, the BMA will continue with its own legal case to ensure members are fully supported.

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Please forward any articles for inclusion in the LMC newsletter to manager@sheffieldlmc.org.uk

Submission deadlines can be found at <u>http://www.sheffield-</u>

lmc.org.uk/website/IGP217/files/Newsletter%20&%20VB%20Deadlines%202020%20.pdf

Contact details for Sheffield LMC can be found at:

Executive Officers: <u>http://www.sheffield-lmc.org.uk/page1.aspx?p=13&t=1</u> **Secretariat:** <u>http://www.sheffield-lmc.org.uk/page1.aspx?p=13&t=2</u>