

Newsletter

November 2021

Sheffield
LMC



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INDICATIVE BALLOT OF PRACTICES ON POTENTIAL ACTION

Despite all attempts to work on a solution focused package backed by the profession, and to put in place a plan that would improve access, quality of care, free up time by reducing bureaucratic workload and enable practices to properly care for their patients over this expected difficult winter, the Government's '[access and support plan](#)' has failed to address these and instead could create further bureaucracy and further demoralise the workforce. As a result:

- A resolution was passed in a [recent emergency General Practitioners Committee \(GPC\) meeting](#) rejecting the 'support plan';
- [What the NHSEI package means for general practice](#) was published;
- An [indicative ballot](#) of all practices in England was launched, asking what actions practices might be prepared to take.

The indicative ballot questions relate to the practice contract and, as such, it requires a practice level decision. The GPC is, therefore, requesting that each practice provides ONE response to the ballot on behalf of the practice. While the liability of any decision rests with the partnership, the GPC strongly encourages practices to discuss the indicative ballot options with Salaried and Locum GP colleagues, Practice Managers and others working within the practice, since any future industrial action would affect all the workforce within the practice.

It is important that as many practices as possible submit their views in order to provide the GPC with the insight they need to make decisions on next steps. Each practice with a BMA member has a vote.

The deadline to vote is **14 November**. You can cast your vote [here](#).

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GP EARNINGS THRESHOLD

Due to the imposition of contract regulations in October 2021, it is now a contractual requirement to ensure [GPs earning over the earnings threshold \(£150k\) declare their income](#).

Declarations apply to GP partners, GP subcontractors or locum GPs operating under the core contract and earning above the income threshold, and if they fail to declare their earnings, then the practice will be in breach of its core contract.

Individuals employed by the contractor or employed by a sub-contractor (including where a locum GP is engaged by a third party to provide services) are not within scope and so do not need to declare their earnings. Therefore, Salaried GPs and those who are employed by a contractor or sub-contractor, which is a company, and the individual is not named on the contract or sub-contract, will not need to declare their earnings if above the threshold. Company directors are also not included unless they fall under the definition above.

If the practice breaches its contract, the Commissioner can take action against the practice and the British Medical Association (BMA) cannot prevent them from doing this due to the inadequacy of trade union laws in protecting GP Partners.

Through the act of self-declaration, the individual will be consenting to publication. Individuals should therefore carefully consider the implications before self-declaration. Further information about the consequences of taking this action or not can be found in the BMA's [Indicative action supporting information](#).

The BMA believes this policy provides no benefit to patients, but will potentially increase acts of aggression and abuse toward GPs and practices. It will be damaging to morale among the profession and wholly counterproductive in terms of the ability to recruit and retain GPs. Reports have already been received of GPs reducing their hours to remain under the threshold, which will impact patient access to services at a critical time for the NHS.

The BMA believes the position the government and NHS England and NHS Improvement (NHSEI) have taken on this matter, singling out GPs alone rather than applying this requirement to all other healthcare professionals, is completely unacceptable. They continue to do all they can to address this.

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ELECTED MEMBER VACANCY ON SHEFFIELD LMC

The LMC's primary function is to represent Sheffield GPs and, therefore, 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. Further details of the work of the LMC can be found in [A Guide to Your Local Medical Committee](#).

We are always keen to welcome new members, whether co-opted to an elected member vacancy or as an observer for an initial period. Membership is open to all GPs (Partners, Salaried, Locum etc) who contribute to our levies and are on the National Medical Performers List.

Details of current LMC members can be found [here](#).

Meetings of the full LMC are held on the second Monday of the month at 7.45 pm. These used to take place in the Lecture Theatre at Tapton Hall, but are currently held via Zoom. The meetings offer an opportunity to keep abreast of topical issues in General Practice, with the chance to air your views and concerns with other GPs working in the same city. Participation in discussions is always encouraged. Much of the content can be used for professional development, and notes of meetings can be accepted as part of your PDP. It is a great opportunity to learn and contribute to current policy issues. It is also a chance to meet and discuss these issues with a broad range of GPs across different types of practices in our city.

We are the only statutory representative body for General Practice in the city, and have core representation across the key bodies in commissioning and the emerging Integrated Care System (ICS).

In addition to attending monthly meetings, members are welcome to represent the LMC on other committees, with LMC Executive support, and this additional meeting attendance is funded by the organisers of the committees or the LMC.

If you are interested in joining the LMC, would like more information about what being a member involves, or are interested in attending a number of meetings as an observer initially, please do not hesitate to contact Margaret Wicks, LMC Manager via manager@sheffieldlmc.org.uk or (0114) 2588755.

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DEATH CERTIFICATION AND MUSLIM BURIALS

As many of you will be aware, in response to a number of incidents where families had experienced added distress in trying to obtain the necessary legal paperwork to expedite their relative's burial, in 2010 the LMC entered into discussions with the Sheffield Muslim Burial Forum, Sheffield GP Collaborative and the Coroner, regarding a proposal for assisting with the problem of obtaining death certificates for Muslim families in expected deaths out of hours.

It was agreed that in a situation where the GP is aware of an expected death / palliative situation in a Muslim patient, then the GP should complete an electronic GP Collaborative 'Special Notes Form' which should be sent on to the GP Collaborative. This form should state whether the GP would be prepared to be contacted out of hours in the event of an expected death.

Where the GP has indicated that they can be contacted, the GP Collaborative (not the relatives or the police) will contact the GP directly and make them aware of the need for a death certificate. The GP can then arrange for the certificate to be collected at an appropriate time and place. This is a voluntary arrangement that some GPs, out of their good nature, may wish to offer at a time of distress for Muslim families. However, it *does not apply to deaths that were unexpected or which occurred in suspicious circumstances*. These must proceed through the normal Coroner's office channels.

Cases of families attempting to contact GPs out of hours have recently been reported to the LMC office. We have reiterated the above agreement and raised concerns about inappropriate contact with GPs, particularly in cases of unexpected deaths.

For future reference, the LMC's guidance on this issue can be found [here](#).

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INFECTION CONTROL RECOMMENDATIONS FOR PRIMARY CARE

The UK Health Security Agency (UKHAS) recently published [Recommendation 4: a more flexible approach to patient consultations in primary care and general practice](#), following previous recommendations which focussed on changes in elective care.

The main amendment is the reduction of the 2 metre social distancing rule to 1 metre, highlighting the need for appropriate mitigation. The British Medical Association (BMA) has already made the point that even 1 metre social distancing will be difficult for some smaller surgeries and, as such, there will still have to be a reduced capacity in some practices and buildings. The guidance strongly emphasises that local decisions and local risk assessments will ultimately govern judgements, such as whether a face-to-face consultation is appropriate and where physical distancing can be safely reduced, which is welcomed. Therefore, it is for practices to determine what arrangements they have in the surgery.

The full guidance will be published shortly. In the meantime, further information about the UKHSA review into infection prevention and control (IPC) guidance can be found [here](#).

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TPP ACCESS TO RECORDS

As part of the accelerated access to records programme, practices will have seen communications about patient access to records held in TPP SystemOne is planned to go live in December, with EMIS and Vision to follow in 2022.

The General Practitioners Committee (GPC) has been engaged in discussions on this and have expressed significant concerns, including the timing of the launch during winter months, with anticipated unprecedented demand adding to patient safety risks that would result from a December rollout.

The GPC is seeking a pause to ensure the views of the profession are better represented, and the programme delayed until there is appropriate time to work through the GPC's list of concerns.

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LMC BUYING GROUP FEDERATION 2022-23 FLU SEASON INFORMATION

The LMC Buying Group Federation's website has been updated with [information for the 2022-23 flu season](#), as well as [Seasonal Flu Vaccines Offers 2022-23](#).

The Federation communicated this to member practices that they have contact details for. However, not all member practices registered with the Federation post-GDPR.

If you have not received the information directly, but wish to be a part of the LMC Buying Group (membership is free to all represented Sheffield GP practices), please see the information available on our website [here](#).

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CAMERON FUND CHRISTMAS APPEAL 2021

Message from Dr Ian Winterton, Cameron Fund Treasurer

Last year, partly due to Covid, [the Cameron Fund](#) awarded a record amount of £304,871 to colleagues in hardship. This was primarily paid as monthly grants to enable GPs and their families to meet their essential expenditure but also included Money Advice to help applicants to improve their situation. In a few cases, where applicants had assets but no available cash, we provided interest free loans.

Once again, this year has been an incredibly challenging time for primary care. GPs have continued to work tirelessly though the pandemic, trying their best to deliver high level patient care, while under restricted working conditions. Sadly, increased pressure on the profession is likely to mean more GPs taking time off work suffering from stress, burnout, anxiety and depression.

If a colleague is struggling to work with their own personal crisis and / or has been unable to work, it's likely that this has impacted negatively on their financial situation as well as their health. If you know a GP or GP Trainee who is struggling financially, please encourage them to contact us at the Cameron Fund. We have produced a [video](#) explaining the eligibility criteria and clarifying who we are likely to offer financial support to.

The Fund's aim is to help GPs get back to work (or continue with their GP Training) as soon as they are able. The support we give is tailored to an individual applicant's needs and in line with their plans. This year has proved to be the worst possible time for GPs, and we need to ensure we are there for every single one of them who needs our support.

As we come up to Christmas, I would ask that you spare a thought for those colleagues experiencing hardship, for whom this time of year can be particularly difficult. In the spirit of Christmas giving, please consider a donation to help us support them.

As always, I would like to thank all the LMCs and individual members who continue to support the Cameron Fund, your generous support is greatly appreciated. We are dependent on LMCs, other medical organisations and individual GPs for about 50% of our income. At a time when General Practice is in crisis and fundraising somewhat restricted, your donations to the Fund are more important than ever. We gladly accept donations made directly into the Fund's Account (CAF Bank Sort Code 40 52 40, Account Number 00015215) or by cheque if you prefer.

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CARE QUALITY COMMISSION (CQC) MYTHBUSTERS

Professor Nigel Sparrow, Senior National GP Advisor at the CQC issues [guidance](#) 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 Mythbuster has been updated recently: [GP mythbuster 61: Patient registration](#)

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GREENER NHS

Article submitted by Dr Frances Cundill, Sheffield GP / Greener Practice

Have you heard of the [Greener NHS](#)? It is a programme working with all NHS staff, hospitals and partners to help the NHS achieve net zero on the emissions they control by 2040 (and on emissions they can influence by 2045). Their vision is 'to deliver the world's first net zero health service and respond to climate change, improving health now and for future generations.' In October 2020 the NHS became the first healthcare system in the world to commit to a net zero national health system. This means improving healthcare while reducing carbon emissions and investing in efforts that remove greenhouse gases from the atmosphere.

We know that climate change poses a major threat to health, for example air pollution accounts for 1 in 20 deaths in the UK, and reducing emissions will contribute to reducing cases of asthma, cancer and heart disease. One year on from the net zero commitment the NHS is on track to reduce its emissions this financial year - equivalent to powering 1.1 million homes with electricity, and this has all been achieved during an unprecedented public health emergency.

We are in the middle of COP26, the United Nations Climate Action Conference, which is an international meeting to bring parties together to accelerate action towards the goals on the UN framework convention on climate change. It is even more important than ever that the NHS builds on the progress we have already made. If you would like to get involved with the Greener NHS you can join the community [here](#) or [consider these ideas](#).

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**GP TRAINEE WORKPLACE EXPERIENCE
AND WORK PROGRAMME PRIORITIES SURVEY**

The GP Trainee Committee of the British Medical Association (BMA) has just launched a [survey](#) which is open to all GP Trainees regardless of location in the UK or BMA membership status.

The survey has been designed over the past year with input from representatives and staff from all 4 nations. The aim is to gather information about multiple aspects of training / working, the impact of COVID and future career plans. It is hoped that data from the survey will be pivotal in directing the BMA's future work and will build on their lobbying positions.

The survey will close on 13 November.

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**MANAGEMENT OF IRRITABLE BOWEL SYNDROME (IBS)
IN PRIMARY CARE SURVEY**

Article submitted by Zainab Bogle-Dawoud, Nutrition & Dietetics (BSc), King's College London

Are you a GP currently in clinical practice in the UK? Do you or have you previously worked with people that have IBS?

At King's College London Department of Nutritional Sciences, we are carrying out research into the ways GPs diagnose and provide dietary advice to patients with IBS. This will help us understand your practices and needs in this important area. To participate, please complete a brief, 5-8 minute online [survey](#)***

We are aiming to close the survey on Wednesday 24th November 2021.

For more information contact Dr Eirini Dimidi - Eirini.dimidi@kcl.ac.uk.

****Participants will also be invited to enter a 32GB prize draw upon completion*

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**RESEARCH PROJECT:
ANNUAL HEALTH CHECKS FOR AUTISTIC PEOPLE**

The [Centre for Research in Autism and Education](#) is conducting a research project to understand the views of primary health care professionals on the value and feasibility of providing annual health checks for autistic people. By taking part, participants have the chance to shape policy recommendations and provide their opinions regarding the implementation of annual health checks for autistic people.

They are inviting GPs, nurses and other primary health care professionals in England who are involved in the implementation of other health checks (eg learning disability health checks, diabetes annual reviews etc) to take part in a short [survey](#).

Participants *do not* require any expertise in autism. Further information is available by contacting Jade Davies j.davies@ucl.ac.uk.

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

Submission deadlines can be found [here](#) (2021) and [here](#) (2022)

Contact details for Sheffield LMC Executive can be found [here](#)
Contact details for Sheffield LMC Secretariat can be found [here](#)