Newsletter November 2023	
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SHEFFIELD LMC REPRESENTATION OF LOCUM GPS

Sheffield LMC stopped receiving information about GPs joining and leaving the Medical Performers List from Primary Care Support England (PCSE) in 2016. Due to GDPR we have been unable to routinely receive information about GPs working in Sheffield and their contact details from any other source. With regard to GP partners and Salaried GPs, we are grateful to Practice Managers who respond to our requests for updated information regarding the doctors working in the practice. However, it has proved more difficult to identify Locum GPs.

Locum GPs are an important part of the modern workforce in these difficult and changing times and, historically, have been underrepresented both locally and nationally. We have produced <u>guidance</u> highlighting the benefits of LMC representation, how to seek representation and contact details for further information, which we are disseminating through various channels. If you have Locum GPs working in your practice, please could you either forward their name / contact details (having sought their consent) to <u>adminassistant@sheffieldlmc.org.uk</u> or highlight this article to them, in order for them to be aware of the information and services that are available to represented Sheffield GPs.

Thank you.

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ACCELERATED ACCESS TO RECORDS PROGRAMME UPDATE

Since the article in the October LMC newsletter, GPC England (GPCE) has created a new webpage with <u>guidance for practices</u> on how they can provide prospective access to their patients' GP-held medical records safely. Legally, GPs must act in the interests of their patients. As data controllers, they must mitigate data protection risks. Practices are required to carry out a Data Protection Impact Assessment (DPIA) exploring the risks and any possible mitigations as part of the implementation of this programme.

GPCE is supportive of patients having access to their records so long as this is safe for patients and safe for GPs. They continue to put forward the case for making access to records on an opt-in basis. If you have any examples of where your practice or patients are being put at risk as a result of the programme, please email <u>info.gpc@bma.org.uk</u>.

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FLU VACCINATION FOR STAFF

Provision of flu vaccination for staff is an employer responsibility, and is not provided under the NHS flu programme. Frontline primary care staff are not eligible for a free NHS flu vaccination and, therefore, are not included in the Annual Flu Letter cohorts. However, they do appear in the <u>enhanced service specification</u> because the decision was taken last year to include frontline primary care staff to allow for cover under the Clinical Negligence Scheme for General Practice (CNSGP), as provision of flu vaccinations to these staff is an employer responsibility.

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SENIORITY PAYMENTS RECONCILIATION EXERCISE

Some practices may recently have received letters from Primary Care Support England (PCSE) regarding the Seniority Payments Reconciliation Exercise 2023. <u>Seniority Payments</u> used to be made to GP partners and were based on length of NHS service and received profit. The seniority scheme closed to new members on 1 April 2014, and was then phased out, with the last payments made by 31 March 2020. Seniority funding was then diverted to Global Sum, as part of the 2013/14 Contract Agreement. The actual entitlement to seniority pay depended on the Final Seniority Factor (FSF) and, as there was a time-lag in calculating this, the FSF for financial years 2017/18, 2018/19, and 2019/20 have only just been published. NHS England and PCSE are now reviewing the adjustments made for those years and will be contacting practices once this has occurred.

Current partners should advise their accountants of the information that has been received from PCSE, as the amounts can be challenged via the *on-line form link within the letter received from PCSE*. In a limited number of cases there will be a need to liaise with retired colleagues, and the matter may not always be covered by written arrangements.

General Practitioners Committee England (GPCE) recommends that practices first ask their accountants for advice in terms of PCSE figures, raising a query if appropriate, which may not be a value-for-money exercise if the variance is small.

Further information can be found <u>here</u>.

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FIT NOTE GUIDANCE

The Department for Work and Pensions (DWP) has updated its guidance <u>Getting the most out of the fit note: guidance for healthcare</u> <u>professionals</u>. General Practitioners Committee England (GPCE) was involved in its development.

Separate updated guidance is available for patients and employees, and for employers and line managers.

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WORKLOAD AND OVERTIME GUIDANCE FOR SALARIED GPS

The Sessional GPs Committee of the British Medical Association (BMA) and General Practitioners Committee England (GPCE) have produced <u>Workload and Overtime Guidance for Salaried GPs</u>, which builds on the BMA's <u>Safer Working Guidance</u> (published last year). The aim of the guidance is to encourage more open conversations where needed, around sustainable workload and demand management. However, the BMA and GPCE have stressed that the real solution lies with the Government, in making sure that general practice has the resources required to safely and effectively meet patient demand in the first place.

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NHS SUICIDE POSTVENTION GUIDANCE FOR STAFF

The University of Surrey, Keele University, and the University of Birmingham have developed postvention guidance for NHS services on how to support staff after the death by suicide of a colleague. The Social Partnership Forum Workforce Interest Group, of which the British Medical Association (BMA) is a member, has been asked to circulate the <u>executive summary</u> and <u>full report</u>.

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CARE QUALITY COMMISSION (CQC) MYTHBUSTERS

CQC National Clinical Advisors and Policy Team issue <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 mythbusters have recently been updated:

• <u>GP mythbuster 61: Patient registration</u> (updated 11 October 2023 to include more detail on inclusive healthcare)

- <u>GP mythbuster 12: Accessing medical records and carrying out clinical searches</u> (updated 23 October 2023 to include further information for the search categories)
- <u>GP mythbuster 21: Statutory notifications to CQC</u> (updated 7 November 2023 to include more examples illustrating when a notification is necessary and information previously in GP mythbuster 63: Disruption to services notifying CQC).

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PHYSICIAN ASSOCIATES (PAS)

At a recent General Practitioners Committee England (GPCE) meeting an emergency motion was tabled and passed, expressing concern over the increasing trend of PAs erroneously used to replace GPs. The British Medical Association (BMA) recognises the vital role that multidisciplinary teams play in General Practice, but patients need to know and understand what each healthcare professional can and cannot do, and where their expertise is relevant. There have been some recent examples suggesting a potential blurring of lines between doctors and non-medically qualified professionals, leading patients to think they have seen a GP when they have not. PAs are not doctors, they are not regulated, and they cannot prescribe. The distinction between GPs as expert medical generalists, and PAs must be protected. PAs cannot be used as a substitute for GPs, or in place of a GP when supervising GPs in training. A recent press release on this issue can be found here.

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GP REGISTRARS COMMITTEE

The British Medical Association (BMA) GP trainees committee has now officially changed its name to the <u>GP registrars committee</u>. The decision to change the committee name was made to reduce confusion for patients as it better reflects their roles as fully qualified doctors. You can read more about how the GP registrars committee is working toward regaining their professional identity in this <u>blog</u> by the GP registrars committee chair, Dr Malinga Ratwatte.

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SESSIONAL GPS E-NEWSLETTER: NOVEMBER 2023

The latest edition of the Sessional GPs e-newsletter can be found on the British Medical Association (BMA) website <u>here</u>. The main articles include:

- Workload toolkit from Mark Steggles
- Salaried GPs FAQs: know your rights
- Guidance for ARRS supervision
- Locum demand falling
- Zero-hour working
- Digital platform guidance

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CAMERON FUND AUTUMN NEWSLETTER & CHRISTMAS APPEAL 2023

The Cameron Fund provides help and support solely to GPs, including those who are retired, and their dependants. It aims to meet needs that vary considerably, from the elderly in nursing homes to young, chronically sick doctors and their families, and those suffering from unexpected and unpredictable problems such as relationship breakdown or financial difficulties following the actions of professional regulatory bodies. Careful consideration is given to the help most needed, which could be advice, a grant or a loan.

The Fund's Autumn 2023 newsletter covers a number of topics such as:

- News from the Chair
- BMJ article on long covid
- Introducing our new trustees
- How you can support us

The Fund's Christmas Appeal 2023 letter from Dr Ian Winterton, Cameron Fund Treasurer can be accessed here.

If you know of colleagues who may need help from the Cameron Fund please encourage them to contact the Fund. More information on how to contact the Cameron Fund, the support they can offer and how to donate can be found <u>here</u>.

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

Submission deadlines can be found here

Contact details for Sheffield LMC Executive can be found <u>here</u> Contact details for Sheffield LMC Secretariat can be found <u>here</u>



Sheffield LMC's free peer to peer mentoring, coaching and signposting for General Practice. GP-S is free and open to all represented Sheffield GPs. More information can be found <u>here</u>.