

LMC ViewPoint



The newsletter of Leeds Local Medical Committee Limited

1st December 2023

General Practice: Your Career – Your Future Survey

Next year marks both the 20th anniversary of the introduction of the 2004 GMS contract, and the end of the current 2019-24 five-year investment framework. A general election is also likely at some point in the year, and potentially, a new government. With change comes opportunity, and a window to influence how we deliver patient care now and for the years ahead.

The RCGP have recently produced their [General Practice General Election Manifesto](#).

The BMA's GPC England will publish its own vision outlining the future direction for general practice after conducting a survey of opinion. The survey is open to all GPs: partners, salaried, retainer and locum GPs; those working in wider primary care roles, in trusts, urgent care, secure or out-of-hours settings, and GP registrars at ST3 and above. A separate survey for all GP trainees ST1+ will be opened by the BMA in the new year. This survey is targeted at ST3+ to ensure that respondents have appropriate experience working within the practice setting to enable them to answer as many questions as possible.

Participants do not need to be a member of the BMA to participate but we will need a GMC number so we can corroborate responses as coming from qualified GPs based in England. All responses will be anonymised.

The [survey](#) will close on [Sunday, 21 January](#). Please complete the survey as soon as you're able to, to ensure our negotiating position is as strong as possible. [Complete the survey >](#)

eDec submission deadline – Friday 1st December

The BMA have provided advice to practices in relation to completing both questions within the eDec that relate to the pay transparency regulations, that is, questions 2N and 2O.

The BMA is reluctant to advise answering 'no' if a responder is unable to confirm compliance, as this appears to inappropriately combine two separate and distinct scenarios: one being a definite knowledge (that no self-declaration has been made) and the other being uncertainty about this information.

The BMA might suggest that a commissioner should not ask a contractor whether they have complied with the self-declaration requirement on the grounds that someone else does not know whether they have or not.

NHSE advice is that if the eDEC response is 'no', a commissioner may wish to ask a contractor this question, but simply responding to say that partners have not self-declared cannot in itself be taken as an indication that they should have done so. The BMA believe it is reasonable to suppose that more information would be needed for the commissioner to justify such an enquiry.

The eDec should be completed accurately to the best of the responder's belief. If, however, they do not know because the information is unavailable to them, then question 2N cannot be answered accurately. In these circumstances, GPC recommends this question is N/A, and the practice sends the following email to ssd.nationalservicedesk@nhs.net

Dear colleague,

I am unable to complete question 2N because I do not have the information available to be assured of the accuracy of my response.

[Practice Responder Name]

With best wishes

Oliver McGowan Mandatory Training on Learning Disability and Autism

The DHSC consultation into the implementation of the [Oliver McGowan Mandatory Training](#) has now closed and we are awaiting the recommendations. GPC England has responded, expressing a number of concerns regarding the impact this programme may have on general practice.

In the interim, you should note there is a legal requirement within the Health and Social Care Act 2022 for GP practice staff to receive training in autism and learning disability. However, while the title of the programme includes the word mandatory, this does not mean that any single particular training programme is required. It is, for the time being, the DHSC and NHS England recommended programme, so should practices undertake this programme, CQC and ICB teams will accept this.

It is unlikely, at least in the short term, that practices will find it easy to identify alternatives, especially for Tier 2 training, which needs to be delivered by specified trainers including one person with a learning disability/autism. If practices do undertake alternative Tier 1 training, it is recommended they ask the training provider for written assurances of the equivalency of their training programme to the [Tier 1 Oliver McGowan training](#) (which can be delivered remotely). CQC is waiting to receive clarification in relation to the accreditation of alternative training packages.

Tier 2 training currently involves a full day's face-to-face training: given the number of eligible participants, undertaking such training will cause a significant interruption in service capacity. Ideally, **Tier 2 training should be delivered over one day only, within six months of receiving Tier 1 training.** This creates difficulty for practices as at present it is unlikely that local dates have been set for Tier 2 training and this may not be realistic to do until the outcome of the consultation is known.

The LMC have raised concerns about this with the ICB and work is ongoing as to how the ICB could provide the Tier 2 training for the whole of WY, potentially using protected time in TARGET sessions, as this would also allow the whole practice team to be involved. The plans for this are being looked at through the relevant Workforce Committees. Until more information is available practices should not do tier 1 training unless they are confident tier 2 training will be available within 6 months.

GP pressures and workforce data

The BMA teams collate monthly appointment and the [latest workforce data](#) onto their website. This has been refreshed and republished this week. October 2023's data shows that the NHS in England has 2,062 fewer fully qualified FTE GPs than we did in September 2015. The number of GP practices in England has also decreased by 119 over the past year.

As of October 2023, there was another record-high of almost 63 million patients registered with practices in England, with an average of 9,954 patients registered per practice. A single full-time GP now has an average list of 2,300 patients, an increase of 362 more than September 2015.

[Find more infographics and data about the pressures in general practice >](#)

Shingles technical guidance

NHS England has published [updated technical guidance](#) on the shingles vaccination programme. The guidance sets out information on eligible cohorts, clinical codes required to record shingles vaccination events and how payments will be supported via GPES, following the changes to the programme that came into effect in September this year. [Read the guidance >](#)

MMR catch-up campaign

NHSE has now confirmed the [vaccination 'catch-up campaign' for 2023/24](#). As with last year this will focus on MMR vaccinations and NHSE has set out a number of actions for practices to support the campaign. As per the SFE, practices will receive an item of service fee for every vaccination delivered.

ICB letter on ADHD

The LMC continues to work with the ICB to address the significant issues relating to the lack of access and capacity in the ADHD service. Please see the attached letter that has been sent out by West Yorkshire ICB outlining all the available services that have direct contracts with West Yorkshire ICB.

IIF CAN-02 Data Recording (FIT testing)

Following the recent launch of the new FIT pathway the ICB have received several queries regarding achievement of the IIF CAN-02 indicator (Percentage of lower gastrointestinal two week wait (fast track) cancer referrals accompanied by a faecal immunochemical test result, with the result recorded in the twenty-one days leading up to the referral).

As positive tests are automatically upgraded within the trust, primary care colleagues are asked to code the 2ww referral 1+day after the FIT result- Code: Fast track referral for suspected lower GI cancer (892201000000106) upon receiving notification through the ICE system. The ICE system will provide a prompt for this to be done.

If you have any questions about this process, please contact the Data Quality team:
wycb-leeds.dataqualityteam@nhs.net.

You can learn more about the new Lower GI referral pathway by watching the recent Confed Connects session available through the following link:

[Confed Connects- Lower GI Suspected Cancer _ FIT Pathway Update-20231017 125936-Meeting Recording.mp4](#)

Patient Prescription Delivery Frauds

It has been reported nationally that fraudsters have phoned patients, pretending to be from a pharmacy. The caller has said they are ringing to arrange the delivery of medication and have asked the patient to confirm their full name, date of birth, address, and some banking details.

Fraudsters can be very convincing and so we ask that if you have any vulnerable friends or relatives, you let them know about this scam. They should be particularly mindful of such calls if they do not usually pay for a prescription medication delivery service.

It is recommended that if such an unsolicited call is received, that the patient hangs up and contacts their pharmacy as they usually would. The ICB advise that either a different phone is used, or to wait for at least 20 minutes before making any verification phone calls just in case the fraudster has jammed the line. Patients can find out more information to protect themselves from fraudsters by visiting [Action Fraud](#).

NHS App Digital Prescriptions launches in West Yorkshire on 5 December 2023

From 5th December, patients in the West Yorkshire region can view their confirmed prescriptions on the NHS App, including repeat prescriptions, and one-off prescriptions. Previously, patients could only see their confirmed prescriptions on paper, or not at all. Now they can use the NHS App to:

- View items prescribed.

- the prescription type (repeat or one-off)
- who the prescribing professional is.

This gives patients earlier visibility of exactly what their healthcare provider has prescribed for them and what they will then collect or receive from pharmacies. Once a patient has been prescribed a medication following a consultation or request for repeat medication, they can now view the confirmed prescription on the NHS App.

Patients without a nominated pharmacy will also be able to view a prescription with a barcode in their NHS App. This barcode can be presented to a pharmacist without having to collect an FP10 paper prescription or an EPS Token from their GP.

For more information, please contact wycb-leeds.primarycare@nhs.net. You can also find more information and a Communications Toolkit with useful materials to help you share this information with your patients published here [Digital prescriptions in the NHS App - NHS Digital](#).

The NHS App has also been redesigned to make it simpler for patients to find and access services. Patients will be prompted to update their NHS App over the next few weeks and will see an updated home page, simpler structure, and easier-to-understand language. The roll out should start before Christmas.

Some services have moved within the NHS App, but all the services patients need are still available. [Download the colleague](#) pack to find out what's changing and how to support patients.

Pharmacy First Service Specification Published

The service specification and clinical pathways for the [Community Pharmacy NHS Pharmacy First Advanced Service](#) are now available on the NHS England website. Community pharmacies that have not yet opted in or registered to deliver these services, are encouraged to do so from 1 December 2023, by registering via the ['Manage Your Service platform'](#). Pharmacies that are already delivering the Community Pharmacist Consultation Service (CPCS) will be required to 'opt in' by 31 Jan 2024, in order to qualify for the one off initial fixed payment of £2000. The existing [CPCS specification](#) will continue to be available on the NHS England website until 30 January 2024.

Pharmacy contractors should ensure their service information for both services is also up to date on their profiles using [NHS Profile Manager](#).

AARC - OPEL 4 Primary Care Process/Launch of Ambulatory Respiratory Clinic Service

Please note that the attached Process Map has been updated for practices reporting OPEL 4. All patients referred on to the Adult Ambulatory Respiratory Clinic (AARC) pathway from practices will now be allocated a Face-to-Face appointment, this is to ensure patients can be treated effectively within the service.

Leeds GP Confederation's new service, Adult Ambulatory Respiratory Clinic (AARC), for adults in Leeds presenting with acute respiratory symptoms, was launched this week. AARC has been developed in collaboration with the Leeds Office of the WYICB.

This service is predominantly available to book by NHS111, however Leeds GP practices reporting OPEL 4 will have access to a small number of appointments each day. OPEL 4 AARC appointments will be released by Leeds GP Confederation at 9:30am Monday to Friday. The AARC service, based at St George's Centre (Middleton), will run Monday to Friday (12pm – 6pm) and Sunday (10am – 4pm). It currently aims to run over the Winter period until approximately the end of March 2024. Please see the **updated** attached process map for more information.

AARC will run alongside the Community Ambulatory Paediatric Service (CAPS). CAPS was implemented in January 2023 to provide children with acute respiratory symptoms a service more suitable for their needs. GP practices, 999 Paramedics, NHS111 and Urgent Care centres can

directly book children into a CAPS appointment between 1pm and 8pm, Monday to Friday and between 10am and 6pm on weekends.

If you have any queries regarding this service, please contact leeds.confed@nhs.net

The state of medical education and practice in the UK: workforce report 2023

The GMC have published their annual [State of Medical Education and Practice in the UK](#) report.

Key Findings Include

- The number of doctors joining the UK medical register is rising. In 2022 there were 296,182 doctors with a licence to practice, an increase of 18% since 2018.
- Between 2018 and 2022 there was an 8% increase of GPs on the register – rising from 61,313 to 66,170.
- Over the same time period there was a rise in the number of GPs working less than full time.
- The rise in the number of GPs joining the register was largely due to an increase in international medical graduates. Between 2018 and 2022 there was an increase of 192% - rising from 321 to 936. However, the number of UK graduates joining the GP register fell by 4% over the same time period.
- The UK's healthcare systems need to urgently address why general practice appears to be a less attractive career path to UK graduates. GPs consistently report high workloads and higher risk of burnout than other register groups.

Have your say on Government smoking and vaping consultation

The Department of Health and Social Care is asking for views on its consultation [Creating a smokefree generation and tackling youth vaping](#) which closes on 6 December.

Proposals include bringing forward legislation to make it an offence to sell tobacco products to anyone born on, or after 1 January 2009; reducing the appeal and availability of vapes to children while ensuring they remain available to smokers as a quit aid; and new powers for local authorities to issue on the spot fines to enforce age of sale legislation for tobacco and vapes.

WY ICB have issued a response to the consultation, please see the attached letter 'Response to the consultation on Stopping the Start: Creating a Smokefree Generation'.

Autumn Statement 2023: BMA Briefing – 27th Nov 23

Please see attached the BMA briefing paper outlining the key elements of the government's Autumn Statement.

Medication blister pack recycling

The LMC is supportive of initiatives to try to reduce the impact of healthcare on climate change. Please see the attached link regarding the Aldi Blister Pack Envelope Recycling Programme.

https://www.terracycle.com/en-GB/brigades/aldi-uk?fbclid=IwAR3-zA3urU8dSwnVzRUodN1mDt_pcB5eysFEj3s1Z_02P9r7QHQBw8YFWM

November Counter Fraud Newsletter

Please find attached the November edition of our counter fraud newsletter.

GPM Plus - Team Strengthening fully funded courses

Are you looking to improve and strengthen your team? Do you want to further your leadership skills? Would you like to have a better understanding of why the culture and values of your practice underpin everything that happens within your practice?

GPMPlus can help and are offering the below **funded courses** to practices in North Yorkshire and Humber and West Yorkshire which together encompass all areas of team leadership and wellbeing.

Team Wellbeing – Huddles and Civility – 7th December- 9.30am-11.00am.

This interactive course will explore ways in which you can improve the practice team's wellbeing. Through practical exercises we will explore wellbeing activities that have proved useful in local practices. You will leave with various activities for you to consider introducing in your own practice. Suitable for practice managers, senior leaders/managers and GP partners. ([Book Now](#))

Team Leadership and Engagement – 12th December- 9.30am-11.30am

Define good and bad leadership and share important tools to take back to your organization to develop leadership skills. We are all leaders in one way or another. Understand the importance of staff engagement and formulate your own leadership action plan. Suitable for practice managers, senior leaders/managers and GP partners. ([Book Now](#))

For other GPMPlus fully funded courses - personal, team and practice - and more information - please click [HERE](#) or email Tim Bennett directly.

PLEASE VISIT OUR LMC WEBSITE FOR PRACTICE VACANCIES VIA THE LINK

[Leeds LMC: Jobs](#)