# LMC ViewPoint

The newsletter of Leeds Local Medical Committee Limited

8th April 2022

Leeds LMC Event - CCG to ICS: What's the implications for general practice? Tuesday 24<sup>th</sup> May, 6.30pm registration/buffet, 7-9pm Weetwood Hall, Leeds Please see the attached flyer for more information. Register your place today by email to mail@leedslmc.org

## Update from Director of public Health - Accurate 8/4

As has been covered in the news, <u>PCR testing facilities close this week and free lateral flow tests</u> <u>will no longer be available for asymptomatic testing</u> for the majority of people, with a number of exceptions including people with a higher risk of serious illness, people working in hospitals, prisons, hospices, and care settings. The national guidance 'Living with Covid-19' outlines how to continue to best protect ourselves and our loved ones from COVID-19 as the focus of testing moves towards protecting those most vulnerable to Covid. This includes encouraging safer behaviours by following public health advice, in common with longstanding ways of managing other infectious respiratory illnesses such as flu or a common cold.

The success of the vaccination programme in Leeds together with access to treatments means that we are able to move to a proportionate approach with testing, focusing on those at higher risk of serious outcomes from the virus, while encouraging people to keep following simple steps to help keep themselves and others safe. We need to continue to encourage people to take action to prevent and protect themselves and other people from Covid-19. People should continue to self-isolate if they have symptoms of Covid-19 and follow the usual public health advice to avoid passing it onto other people. The best way to protect yourself and others around you is by getting two Covid vaccine doses and a booster, keep indoor spaces well ventilated (e.g. opening windows), regular hand washing and using masks in enclosed spaces (where there will be large numbers of people). This is a good way of helping to reduce risk to others and is all part of the steady movement to a new phase of managing and living with the virus.

## **Vaccination Programme**

- The vaccination programme for 5-11 year olds began this week- information and FAQs are on the <u>NHS Leeds website</u>.
- Information for people eligible for a Spring booster is here.
- There is vaccination advice for people of different faiths, including advice about fasting and vaccination, <u>here</u>.
- Pop up clinics will be running at Halton library, the Old Fire Station, Dewsbury Road
  Community Hub, St Aidan's community hall, the Compton Centre and the Denis Healey Centre
  over the next two weeks. Full details of local vaccination clinics are available on the <a href="NHS">NHS</a>
  Leeds website.

It is also critical that we help to develop confidence in our communities to return to working and socialising differently and safely. It is understandable that many people, particularly those with existing health conditions, may feel vulnerable and find the changes a difficult adjustment. As a city, we want to ensure people are supported with this transition and that we respond with compassion and kindness; our Team Leeds ethos has championed this throughout the Covid-19 pandemic.

Whilst we learn to live with COVID-19 it is important to remember that the pandemic is not over, rates in Leeds are gradually increasing similar to the national picture, and as we transition into this next phase we need to continue to be vigilant for new variants and surges as vaccine effectiveness wanes and be ready to respond. In the medium to longer term epidemiologists predict that the virus

will eventually become endemic, ie the virus will remain circulating in the population but will become more stable and predictable, much like seasonal influenza.

We will continue to work closely with our UK Health Security Agency colleagues locally and nationally to monitor the local position and manage outbreaks and any new variants of concern in line with national and local guidance.

As you will be well aware, hospitals in our region remain under significant pressure as they deal with the ongoing impacts of the pandemic on the health and care system. This week hospital trusts in West Yorkshire and Harrogate have warned of <u>very high wait times at Accident & Emergency departments</u>- up to 12 hours in some cases- and have asked that people <u>only attend A&E if their condition is life threatening</u>. People in need of urgent medical care are encouraged to call 111 for advice on where to go for urgent treatment. This comes as A&E attendances across the six trusts are 14% higher than a year ago. Additionally, significant pressures remain in primary and social care with increases in demand and workforce shortages.

I know this continues to be a busy time for primary care and I am grateful for everything you continue to do. Coming up over the next week there are a number of faith events and celebrations which many people and communities across the city will be taking part in. I hope you are able to get some time off work and some much needed rest.

### **COVID-19 infection rates**

The latest information from the Office of National Statistics (ONS) Infection Survey covers up the 26 March and gives an estimate that 7.56% (1 in 13) of the population in England would test positive on PCR if tested in the previous two weeks. This is the highest rate since this survey, which is not affected by testing uptake, which began in April 2020. The most recent estimates suggest the infection rate were continuing to rise in the week up to 26 March.

For Yorkshire and the Humber, the equivalent figure is 7.83% which again equates to 1 in 13 and is the highest rate for the whole pandemic. At a local authority level within West Yorkshire the estimates are slightly lower with 1 in 15 Leeds 6.7%. This level of infections is close to that seen at the peak of the Omicron wave with the rate continuing to rise. All ages are seeing high levels of infection, and this is leading to a rise in demand within primary and secondary care. Hospitals across West Yorkshire now have a total of 537 patients with COVID-19 (as at 4 April). This number has increased by 48 (10%) over the last week. It has doubled over 32 days.

# COVID-19 testing, patient group directions and guidance

NHSE have issued a <u>Living with Covid testing update</u> advising that patient facing staff should continue to test twice weekly when asymptomatic. LFD tests for patient facing staff will continue to be available through the gov.uk portal. All symptomatic staff should test using LFDs and continue to follow the current return to work guidance. Staff who are household contacts of a positive COVID-19 case will no longer be required to have a PCR test in order to return to work and staff who are household contacts of a positive COVID-19 case will now be able to continue to work as normal if they remain asymptomatic and continue to test twice weekly. They will no longer be required to have a PCR test in order to return to work.

Although the general public will not be offered COVID-19 tests routinely if symptomatic, there may be some instances where a clinician will want to offer a COVID-19 test as part of a diagnostic pathway to support clinical decisions. In these cases, patients should be directed to the gov.uk website to order their tests, where they will be asked to confirm that their clinician has requested this.

High risk patients in the community identified for COVID-19 MAB / antiviral treatment will continue to access tests from UKHSA and a <u>letter</u> has been sent to eligible people and they will be sent one pack of lateral flow tests by 12 April.

Updated versions of COVID-19 patient group directions have been produced. They include:

Children 5-11 years

Comirnaty® 30micrograms/dose COVID-19 mRNA vaccine

Spikevax (formerly COVID-19 Vaccine Moderna)

COVID-19 Vaccine AstraZeneca (ChAdOx1-S [recombinant])

The UK Health Security Agency have updated <u>guidance for people with respiratory symptoms</u> and this highlights the increased number of symptoms that people with COVID-19 may have and what actions should be taken.

#### **GP contract 2022/23 documents**

NHSEI have published <u>GP contract 2022-23</u> information. This includes a letter outlining <u>financial</u> <u>implications</u>, <u>QOF 22/23 guidance</u> and a number of documents about the <u>PCN DES</u>, including an updated <u>FAQ document</u>.

A one page summary of <u>IIF 22-23</u> has also been produced.

# Pay transparency arrangements for 2022/23

Following significant concerns raised last year about the government's plans, amendments to the GP contract regulations have now been laid in parliament which, if progressed, will remove the requirement for individuals within scope of the general practice pay transparency provisions to make a self-declaration of their 2020/21 NHS earnings by 30 April 2022.

Individuals within scope of the pay transparency provisions should therefore not take any action ahead of 30 April 2022. Commissioners have been told by NHSEI not to enforce the requirement for individuals within scope of the pay transparency provisions to have declared their 2019/20 earnings by 12 November 2021.

## Ramadan and Eid Guidance

The NHS Muslim Network has produced some <u>guidance</u> to help give advice to people who may be fasting during the month of Ramadan. In addition, the Muslim Council of Britain has produced a <u>Guide to Ramadan 2022</u> and the British Islamic Medical Association has also produced a guide to help with the <u>management</u> of patients with long term conditions in Ramadan

## General practice workforce and February appointment numbers

Responding to the latest <u>GP appointments</u> and <u>workforce</u> data released last week, Dr David Wrigley, deputy chair of council at the BMA, said: "This is yet another example of the worrying trend currently facing general practice; that we have far fewer GPs seeing more patients than two years ago. In February 2022, GPs provided almost 13 million appointments (12.9 million) in England – that's about 463 appointments per GP and is over and above Covid-19 vaccine appointments. Two years earlier in February 2020, 12.46 million appointments were delivered – around 445 per GP. We have the equivalent of 1,565 fewer fully-qualified full-time GPs than we did in 2015, despite the average number of patients each GP is responsible for having increased by around 300 – or 16% - since 2015.

"This rise in GP appointment figures – and that the vast majority are being delivered face-to-face - is testament to the dedication of our healthcare workers. But as members have repeatedly told the BMA, going above and beyond to fill staffing gaps and trying to meet patient demand, is not a sustainable way of working."

The full BMA response can be found here.

#### British Social Attitudes Survey: fall in patient satisfaction

The annual <u>British Social Attitudes Survey 2021</u> was published on 30 March by the King's Fund and the Nuffield Trust. It found that public satisfaction with the NHS has fallen to its lowest level since 1997. It should be noted that the survey was carried out in September and October 2021, at a time when there was significant negative media reporting about general practice. It found that

public satisfaction with how the health service runs had fallen to 36 per cent. Record falls in satisfaction were also seen across all individual NHS services, including GP and hospital services. Public satisfaction with GP services – historically the service with the highest levels of public satisfaction – has fallen by an unprecedented 30 percentage points since 2019 to 38 per cent, the lowest level of satisfaction recorded for GP services since the survey began in 1983. For the first time the number of people dissatisfied with GP services (42 per cent) is higher than those who are satisfied.

The fall in overall satisfaction with the NHS can be seen across all ages, income groups, sexes and supporters of different political parties. More people (41 per cent) are now dissatisfied with the NHS than satisfied. Concerns over long waiting times (65 per cent), NHS staff shortages (46 per cent) and inadequate government funding (40 per cent) remained the top reasons people gave for being dissatisfied with the NHS in 2021. Despite this, support for the principles of the NHS is as strong as ever. The overwhelming majority of people expressed high levels of support for the founding principles of the NHS when asked if they should still apply in 20213: that it is free of charge when you need it (94 per cent), primarily funded through taxation (86 per cent) and available to everyone (84 per cent).

In response Dr Chaand Nagpaul, BMA chair of council, said: "It is unsurprising that impressions of the NHS have suffered some of the sharpest declines ever seen, a direct consequence of a service which has been pushed to the edge of collapse with severe deficits – in staffing, in beds, in community services, in facilities and in equipment. As a result it is the public and patients who are suffering the consequences as clearly shown in this survey. This should be a wake-up call for the UK Government that has been woefully inadequate in its response to the crisis unfolding before them, despite being advised by the British Medical Association, doctors and other healthcare professionals that this would be the consequence of their lack of attention.

"The truth is that the NHS in England has been underfunded for so long and we went into the pandemic frighteningly ill-prepared for what was to come. Now staff morale is at an all-time low with doctors leaving the NHS every day. Commitments made by the UK Government, like the recruitment of more GPs, are routinely missed, while at the same time rejecting demands from the House of Lords and over 100 medical organisations for transparent workforce planning."

## Cremation regulations guidance

The Ministry of Justice has produced updated <u>cremation regulations guidance</u> for the completion of cremation forms. It highlights that the requirement for a confirmatory medical certificate (form Cremation 5) has been permanently removed. They continue to expect the medical practitioner signing the form Cremation 4 to have treated the deceased during their last illness and to have seen the deceased within the 28 days prior to death – including visual/video consultation, or viewed the body in person after death (including for verification), and to be able to state the cause of death to the best of their knowledge and belief. Otherwise a referral to the coroner should be made. The guidance also covers how certain questions in Form 4 should be interpreted.

# **Fit Note changes**

The Department of Work and Pensions has changed regulations so that fit notes no longer require a signature in ink to authorise them. Instead, a new template is being delivered that is authorised by the name of the doctor included in the form. This means fit notes can be completed, authorised, and sent digitally from 6 April. Key changes include:

- GPs' names will be automatically captured by their IT systems from their user login
- the exact date the system will be updated depends on your system supplier
- until the new template is delivered, continue to use the current version, which still requires a signature in ink to be valid
- until the systems are fully updated both the previous and new versions are legally compliant and employers have been told they must accept both
- if patients cannot receive the fit note digitally or require a paper copy, then this must be provided (but does not require an ink signature)

- if there are issues, the form can still be completed by hand and authorised by the doctor writing their name, or signing the fit note in the relevant place and will still be legally compliant
- hospitals will still be using paper fit notes ordered from DWP, but from 6 April this should be on the new template.

More information is available in the DWP's Fit Note guidance.

## Gender incongruency guidance

The BMA have updated <u>Gender incongruence in primary care</u> guidance alongside a <u>statement on commissioning GIC services</u>. The ethical guidance <u>Inclusive care of trans and non-binary patients</u> has also been published.

# **Updating patient information on PDS**

NHSE are running a pilot <u>Contact Details Service</u> scheme encouraging people to update their contact details held in the Personal Demographics Service (PDS). People who have missing or malformed email addresses or phone numbers will be encouraged to update this information. These people will receive a text or email requesting they update their NHS account using the NHS App or NHS login. They could also receive a notification if their email or phone number does not match those recently used in other NHS services.

## **Spring Statement summary**

The BMA have produced a <u>Spring Statement 2022 summary</u>. The main messages for the health and social care system are:

- no increases or decreases to health spending the Chancellor chose not to protect the NHS from rising inflation
- but confirmation that the new health and care levy will go ahead (although the threshold at which you start to pay it will be raised) this will not affect the amount of DHSC/nations funding through the Barnett formula
- the NHS efficiency target will double from 1.1 per cent to 2.2 per cent and this will include a review of Arm's Length Bodies including NHS England and NHS Improvement

# NHS Standard Contract 22/23: provisions applicable to primary medical services

The NHS Standard Contract is mandated for use by CCGs/ICBs and NHS England when commissioning non-primary medical services NHS-funded healthcare services. Where primary medical services are being commissioned, the appropriate form of primary medical services contract must be used in accordance with the relevant Regulations and Directions. In certain circumstances commissioners may commission a package of services including both primary and secondary care elements from a single provider. An example of this would be the commissioning of an integrated NHS 111 (for which the NHS Standard Contract must be used) and GP out-of-hours service (for which a general practice contract must be used). In those circumstances neither the NHS Standard Contract nor any form of primary medical services contract may lawfully be used on its own to commission that package of services. Various contractual structures may be used to deal with this. NHS England have now produced a template for this situation.

If the package of services includes primary medical services and services for which the NHS Standard Contract is the mandated form of contract, commissioners may include provisions in Schedule 2L of the NHS Standard Contract to make the Contract compliant with the APMS Directions in relation to the provision of primary medical care services. In other words, to ensure that the contract is both an NHS Standard Contract and an APMS contract.

Foods to avoid in pregnancy: updated guidance

UKHSA has updated advice on high risk foods for certain patients where there is specific concern about Listeria monocytogenes. NHS.UK has produced <u>updated guidance</u> for pregnant and vulnerable individuals to reflect the risk of <u>listeriosis</u> from smoked fish.

# Health and human rights

The BMA has published a comprehensive human rights report <u>'Health and human rights in the new world (dis)order'</u> to coincide with World Health Day. The report has been several years in the making and covers a broad range of issues impacting human rights and health globally.

The Guardian has reported on this and a <u>press release</u> and <u>a blog on the BMA's website</u> have been issued.

# Resources for Ukrainians arriving in the UK

The Department for Levelling Up, Housing and Communities have produced a <u>guide for Ukrainians</u> arriving in the UK, as well as home sponsor guidance.

Doctors of the World and Bevan have also produced some posters for migrants explaining how the NHS works, which are available in multiple languages including <u>English</u>, <u>Russian</u> and <u>Ukrainian</u>.

## **Leeds Med Chi Edith Pechey Lecture 2022**

This year's Edith Pechey Lecture will be given by Dame Clare Gerada. The lecture will be at 5.30pm in the Medical Lecture Theatre in the Worsley Building, and will be open to medical staff and students, as well as being streamed on-line. More detrail can be found at <a href="http://www.leedsmedchi.org.uk/program.php">http://www.leedsmedchi.org.uk/program.php</a>

# **GP Forum Study ~ Day - LEEDS**

Regarding the planned GP / Primary Care study day which is to be on the topic of "Women's Health" and has 3 hours CPD approval. The meeting is to be held on Wednesday 11 May 2022 at The Mercure Leeds Parkway Hotel, Otley Road.

Please see attached flyer for more information.

## **Latest Cameron Fund Video: Our Funding**

For your information, please see the video link below: www.youtube.com/watch?v=6WRZ8EHsRkA

If you are aware of a GP who is struggling financially, please do ask them to contact info@cameronfund.org.uk.

## **COMINGS & GOINGS**

- After 25 wonderful years at Oulton Medical Centre Dr Martie Duvenage has retired.
- North Leeds Medical Practice have had a few new clinicians start work over these last few months. We have a new ANP, Sonia Wisdom and 5 new Salaried GP's, Dr Philippa Sallows, Dr Helen Culley, Dr Iram Chaudary, Dr Emma Jackson and Dr Mandeep Sandhu! We'd like to take this opportunity to welcome them all to our team.

#### **VACCANCIES**

# Salaried or Retainer GP, to start w/c 29th August 2022

4 sessions pw Wednesday to Friday (including all day Fridays) £9,500 - £9,700 per session according to length of NHS experience We are seeking a salaried or retainer GP with strong clinical skills to join our democratic and forward-thinking practice. We'd like you to bring a commitment to serve our varied practice population, and you will have the opportunity to play a full role in all aspects of the practice.

We are a co-operative team, meeting daily for mutual support in our modern spacious new premises. We want all our clinicians to have a good work-life balance and an enjoyable working day.

St Martin is an urban training practice, caring for a patient list of 7500. Excellent QOF and target achievement and a track record of innovation. 5 partners. Excellent skillmixed nursing team doing long-term condition management. Well-developed Patient Support Team who are "care navigating" & managing the clinical letters. Wide range of attached staff and services. Active member of Chapeltown Primary Care network.

For a full information pack see our website <u>www.stmartinspracticeleeds.nhs.uk</u> which will also tell you more about our practice. The information pack has job description, person specification, and terms and conditions.

To arrange an informal chat please contact Camilla Hawkes, Practice Manager, camilla.hawkes@nhs.net, or 07493 877922

Closing date: Monday 11th April 2022

St Martins Practice, 210 Chapeltown Road, Leeds LS7 4HZ

# LOWER WORTLEY, LEEDS LS12 5SG SALARIED GP / ADVANCED NURSE PRACTITIONER UP TO 4 SESSIONS

Hawthorn Surgery is a well-established training practice based in Lower Wortley and New Farnley, just 3 miles West of the vibrant city centre of Leeds. Proximity to road networks make life here convenient for enjoying the beautiful Yorkshire landscape.

Following the recent successful recruitment of a GP we are now looking for another enthusiastic, forward thinking colleague to join our growing team. We are looking for a strong team-player who will share our patient-centred ethos.

We are a training practice with a culture of learning and development. We currently have 1 GP registrar and 1 FY2 doctor working with us.

Our dedicated and supportive clinical workforce comprises 2 GP partners, 3 salaried GP's, 2 practice nurses and a health care assistant for a list size of 6000 patients.

We cater for a diverse mix of patients, that being located close to a large city affords.

We encourage clinical and administrative teams to contribute and share innovation through regular meetings and hold daily catch-up's over coffee. We have 15 minute appointments.

As a member of our local PCN we hold COVID vaccination clinics and have developed new and collaborative ways of working. We have co-employed clinical pharmacists, first contact physiotherapists, social prescribers, care-co-ordinators, and a paramedic, using the Additional Roles Reimbursement Scheme (ARRS).

A salaried GP / ANP role for up to 4 sessions has arisen and will be an exciting prospect for a likeminded candidate in this highly reputable practice.

We encourage candidates to contact us for an informal visit.

- System One
- High QOF achievement
- CQC "Good" with "Outstanding" in responsiveness to patients
- Purpose based modern leased building
- Additional extended hours locality Hub working available if desired
- Keen baking skills and food huddles along with seasonal guizzes.
- Hawthorn surgery allotment group

If you would like any more information about this opportunity, please contact Amanda Nelson, Practice Manager on 01132954770, or <a href="mailto:amanda.nelson@nhs.net">amanda.nelson@nhs.net</a>

# Come and join us at Rutland Lodge Medical Practice, Leeds

We have a vacancy for a newly qualified or experienced GP or ANP to provide 6-8 sessions per week.

You will be working with an experienced GP and nursing team ably supported by management and administration staff.

We are a teaching and training practice currently with four GP partners, 3 Salaried Doctors, 1 Advanced Nurse Practitioner, 3 Practice Nurses, and a Health Care Assistant.

Our Practice covers a diverse area of North Leeds from the inner city up to the Ring Road in North Leeds, with a patient population of just over 9,000. The Practice has two sites with main purpose built premises well located and easily accessible on the Scott Hall Road and a branch surgery in Little London.

We are very active within Central North Leeds Primary Care Network

#### Key Information:

- Several sessions available with flexible telephone and face to face session times
- Well organised GMS, SystmOne practice
- Purpose build premises
- Practice has a reputation for consistent high achievement
- Use of AskMyGP embedded in practice
- We would welcome applications from trainers or intending trainers
- No premises buy in but scope for development of branch site

#### Kev Benefits:

- Contract based on BMA standard contract
- Immediate parity for a partner
- NHS Pension
- Practice is part of NHS Fleet solutions

## What Happens Next:

If you would like to be considered for this post please talk to us in confidence by calling our Practice Manager Paula Dearing on 0113 2007455 or get in touch by emailing p.dearing@nhs.net.

# **Practice Nurse Vacancy – Alwoodley Medical Practice**

We are a friendly, supportive GP surgery looking for an experienced and enthusiastic Practice Nurse to join our busy practice team.

We are currently a team of 6 Practice nurses and 5 Health Care Assistants and are looking for a full time nurse with the following attributes :

- RGN with NMC registration.
- Experience in managing chronic conditions.
- Specific nursing skills / qualifications including cervical cytology, wound care, immunisation.
- Commitment to continuing professional development.
- Excellent communication and interpersonal skills.
- Ability to work autonomously and collaboratively within a team.
- To be able to determine workload priorities.

- Able to work under pressure in an ever changing environment.
- Flexibility of working hours that may include extended hours.

## Terms & Conditions:

- Ideally full time
- Offer of a competitive rate of pay dependent on experience
- NHS Pension Scheme
- Uniform provided
- 6 weeks (pro rata) annual leave plus bank holidays
- Training and CPD provided where necessary.

Please contact Jayne Tait for more information jayne.tait@nhs.net

# Foundry Lane Surgery (Drs Sarah Frost, Simon Hall, Bruno Rushforth & Cathryn Cooper) in East Leeds, are looking to recruit a salaried GP:

- 4-8 sessions a week
- Starting August 2022 but flexible earlier / later start for right candidate
- 7,200 patients; 6 GP team; 4 GP registrars
- CQC 'Good' across all domains and all patient groups
- Experienced practice nurse team (3 nurses, 2 HCAs)
- Supportive management, admin and reception teams
- Support from PCN staff including clinical pharmacy team
- 6 weeks annual leave plus 1 week study leave a year
- No duty doctor sessions
- Very low home visit practice (young demographic)
- We meet daily for lunch in large room for peer support
- 2 current Partners started as salaried GPs

Experienced candidates or those embarking on their GP career post-CCT would be equally welcome to apply. We would support the successful candidate with training to develop their clinical educator skills to support our GP registrars at the practice.

Applications by CV plus cover letter by **5pm Friday 29<sup>th</sup> April**. We welcome candidates to come for an informal visit.

Email:- Kay Harvey - Practice manager: michaela.harvey@nhs.net

# Salaried GP with view to Partnership

We are a GMS Practice situated in the town of Goole in the East Riding of Yorkshire. Goole is a port town surrounded by picturesque surrounding villages, towns, cities and good schools. Providing easy access to the Yorkshire Wolds, North Yorkshire Moors and plenty of lovely coastline and seaside villages and towns, it is an ideal location for someone looking to live and work in a lovely area of the country.

Goole is on the M62 corridor, lying close to the M62 and the M18 motorways and is easily commutable from York, Leeds and Hull. The town is served by a railway station, which has services to Leeds, Selby, Hull, York and London.

With a friendly, enthusiastic and patient focused team, we have a current list size of 8700 patients and offer a full range of GMS services.

We are looking for an enthusiastic, motivated and flexible GP to join Montague Medical Practice, on a salaried basis with a view to future partnership. This vacancy would suit a newly qualified or experienced GP.

To assist with recruitment and retention, we are really excited to be able to offer successful candidates a place on one of the Humber, Coast and Vale Fellowship Programmes:

CATALYST: 2 year programme to design and deliver bespoke QI projects

- Enhanced GP Fellowship (for newly qualified GP's within 2 years post-CCT)
- Phoenix Fellowship: 12 month mid-career GP development programme

See attached flyers for further information.

## Main duties of the job

The successful candidate will undertake all the usual duties of a GP. We are supportive of individuals personal areas of interest and development and would look to support these in your work at the practice.

You may also be assigned or choose to take on areas of oversight/responsibility in terms of specific projects, disease groups or ad hoc areas of work etc. and would have protected time in which to carry out this work.

## About us

Montague Medical Practice has a very supportive team across the board, from reception to administration, nursing, management and General Practitioners. We work hard but in a friendly, open and inclusive culture as one cohesive team.

- SystmOne
- High QOF Achievement
- Strong Nursing & Clinical Team
- Comprehensive Admin and Management Team
- Nurse training
- 6 weeks annual leave
- 1 week study leave

Montague Medical Practice is a member practice of the CYGNET PCN, a strong PCN with excellent working relationships between member practices.

# Job description / Job responsibilities

As a Salaried GP you will carry out all the normal duties of a General Practitioner, telephone, face to face, online and video consultations, home visits, administrative work, audits and project work. You will take part in on-call duty doctor days. We offer a competitive salary of up to £11,000 per session per annum, dependent on experience.

You will have opportunity where appropriate to develop or utilise any areas of personal interest within the practice.

You will attend meetings where required and work in the practices Extended Hours and Improved Access clinics.

You will work as part of the wider team in a cohesive manner and uphold the open and inclusive culture of the practice.

## Person Specification Knowledge and Skills Essential

- Ability to provide good quality of patient care
- · Good clinical knowledge and skills
- Can do attitude
- Team player
- Open, willing and able to take on change, projects, ad-hoc pieces of work and see it through
- Desire to uphold the open and inclusive culture of the practice
- Good interpersonal and communication skills
- Good IT skills

## Desirable

• Good leadership skills, qualities and attitude

#### Essential

Qualified GP

# Garforth Medical Practice, Garforth, Leeds, LS25 1HB Salaried GP vacancy - 4/5 sessions per week

The practice is looking for an enthusiastic, highly motivated GP to join our forward thinking and hardworking friendly team. The doctors are supported by excellent nursing and administrative

teams. We are actively involved in our Primary Care Network with a GP Partner holding the position of Clinical Director. Within the PCN we have a team of additional roles including Paramedic, Pharmacists, First Contact Physiotherapists and Social Prescribers.

- 13,950 patients
- Committed to achieving high standards in QOF
- Rated Good in CQC inspection
- Training practice
- SystmOne, eConsult and AccuRx systems
- Competitive salary negotiable and medical indemnity covered by practice
- See our website for more details www.garforthmedicalcentre.co.uk

We strive to provide the highest standards of modern primary care while maintaining the very best of traditional family general practice.

Please email CV and letter of application to Lisa Carroll lisacarroll@nhs.net

# Burton Croft has a vacancy for a salaried GP

- 6 sessions at 10K per session. Days are negotiable.
- Advert is on NHS jobs and CVs can be emailed to <a href="mailto:des.mcevoy@nhs.net">des.mcevoy@nhs.net</a>