



Supporting General Practice
to be the best for our communities

Your News Update

from the LMC team...

Issue: 18th April 2024



Dear Colleagues

Wessex LMCs Introduction



Dr Andy Purbrick
Joint CEO
Wessex Local Medical Committees Ltd

Death Certification Reform and the Introduction of Medical Examiners.

The DHSC laid regulations before Parliament on 15th April which will put the medical examiner system on a statutory footing from 9th September. Under these reforms all deaths will legally become subject to either a medical examiner's scrutiny or a coroner's investigation.

This also means that changes to simplify the death certification process for GPs, such as the cremation form becoming redundant and relaxation of the 28 day rule, will not come into force until September.

It had originally been proposed that these changes would be implemented in April, but the Government has confirmed an official September start date, emphasising that the death certification reforms are 'highly complex and sensitive', and that it has 'allowed additional time to prepare for implementation'.

[Written statements - Written questions, answers and statements - UK Parliament](#)

Find out more about the proposals here: [Medical Examiner and Death Certificates Educational Podcasts and Videos - Wessex LMCs](#)

New BMA Guidance on COVID Therapeutics for GPs

The BMA have updated the GPC England guidance on COVID-19 Therapeutics. [Click here to read.](#)

GPC England Meeting Update

Click [here](#) to read the full summary from the GPC England Committee Meeting on 28th March 2024.

A Message from GPC England Chair, Dr Katie Bramall-Stainer

The following message was released by GPC England Chair, Dr Katie Bramall-Stainer on 3rd April 2024

“On behalf of GPC England, I want to thank every single GP and GP registrar across the country who took part in our referendum. Let us not forget, this referendum wasn’t even a ballot, it was merely a dress rehearsal for what’s around the corner. Either way, had it been a ballot, it would have comfortably passed the required thresholds

This referendum was a temperature check of the profession - and make no mistake - in the week where we have a third consecutive contract imposition, we are at boiling point. I’m overwhelmed to share the result that more than 99.2% of you have voted firmly against this contract. This is an unequivocal result that will demand NHS England, the Department of Health and Social Care, Government, and other parties now sit up and take notice.

It is now clear that we are one profession, which has spoken with one voice and said enough - time’s up. This contract imposition does not give practices stability. It does not give us hope. This contract, which NHSE are choosing to impose upon us, is not safe.

The contract changes, which will be imposed by the Government and NHS England from 1 April 2024, include a national practice contract baseline funding uplift of just £179m for England’s general practices, way below inflation in recent years, meaning many practices will struggle to stay financially viable over the next six to 12 months and risk closure.

The day after the referendum closed, GPC England met to decide and determine the next steps we’ll be taking as a profession knowing you’re standing right behind us. We are now starting to receive the full dataset and results breakdown from Civica, and we’ll share that with you in due course too.

When I qualified as a GP in 2008, we were called the ‘jewel in the crown of the NHS’. General practice has been demeaned, diminished, diluted, bullied and gaslit long enough. We now start the fight back, bringing our patients with us. Patients want access to their family doctor in a surgery that feels safe, with a well-resourced team ready to meet the needs of our communities, and that’s what we want too.

We are the bedrock upon which the rest of the NHS stands, with 400 million patient contacts a year. Almost 1.4 million every single day. That’s a lot of voters.

So, congratulations, ‘team GP’. The battle to save general practice has begun. I’m proud to represent you, and I know that your BMA committee, GPC England, is proud to serve you.

We will be in touch soon with more information, guidance on the 2024/25 contract and next steps for us all”

Watch Katie’s video about the GP contract referendum results: [GPCE contract referendum results](#)
[Find out](#) about the contract changes and read our FAQs to learn what this means for you.

Link to press release: [GPs vote overwhelmingly to reject contract changes in BMA referendum](#)

Next steps on the Delivery Plan for Recovering Access to Primary Care 2024/25

NHS England has published an [update on the Delivery Plan for Recovering Access to Primary Care and outlined next steps for the year ahead in 2024/25](#).

Thanks to the hard work of primary care teams, huge progress has been made in the last year on making it easier and more convenient for patients to access the help they need from primary care services, which has included: rolling out the biggest expansion of community pharmacy services in years; training thousands of people in practice reception teams in care navigation skills; and supporting the majority of practices in

upgrading to digital telephony systems.

NHSE has set out that continuing to improve timely access to primary care and reducing pressure on staff remains a priority for the second year, with [the letter](#) setting out some key areas of focus, including taking further steps to: improve the primary – secondary care interface; increase the number of people self-referring across all pathways; implementing core elements of modern general practice; and boosting the number of people viewing their health information and ordering repeat prescriptions via the NHS App.

An update on the delivery plan will be shared in the [next NHSE GP webinar on 2 May 2024](#).

BMA Guidance on Physician Associates

The BMA published [guidance](#) on 7 March 2024 regarding medical associate professionals (MAPs). From a GP perspective and are well aware that some practices will have substantive employment contracts with associate clinical staff employed both directly by a practice, and also within the ARRS under the PCN DES at a network level.

The BMA readily appreciate the shifting sands of opinion, not to mention the NHSE letter of 27 March 2024, and the Government's planned and imminent regulation of MAP roles by the GMC which itself has aroused strong feelings across the profession. GPCE recognises it may be likely that many roles may have been working in a manner as described in the PCN DES contract, that is they "must" see as a "first point of contact", "undifferentiated and undiagnosed" patients. Substantive guidance for employing practices which will complement the wider BMA position is under development. In the interim, it is for GP employers to determine the terms of individual staff members' abilities to undertake their job competently and safely in meeting the needs of the practice's registered list.

GPC England is in discussion with NHSE and DHSC in light of the recently published guidance which may present a demanding expectation in terms of both supervisory time and availability. However, we would remind GP employers that PAs are not independent practitioners – they do require supervision and oversight. Their scope of practice means that GP employers retain responsibility and liability for clinical oversight. Hence in reality, the 'undifferentiated' element is unlikely to be practically implemented in its fullest sense.

Each MAP needs to be assessed on an *individual* basis, with GP employers undertaking due diligence in assessing and monitoring the relevant scope of practice and clinical competence of their respective employees. Furthermore, at present there is no general practice training pathway with supported induction, curriculum or competency coverage. It might be noted that nascent preceptorships are conspicuous by their absence due in part to a familiar story of a lack of ICB support to practices and PCNs.

All staff require induction, and a programme of support. Who decides when staff are ready (or not) to see undifferentiated clinical presentations should be determined on an individual basis after an automatic period of close supervision. In the absence of regulation and quality training assurances, GPs as employers remain ultimately responsible. GPC England would always advise GPs ensure they are fulfilling their GMC obligations.

In terms of a strategic perspective, the BMA appreciate that medically qualified doctors who are not GPs must stay within their scope of practice, therefore one might perceive an inconsistency in approach to then support non-regulated professionals, (given the imposed contractual guidance from NHSE) in seeing undifferentiated, undiagnosed patients.

NHSE Reasonable Adjustments Digital Flag Actions Checklist

As the NHS starts to implement the reasonable adjustments digital flag, NHS England is encouraging organisations to start conforming to requirements during this month.

The new [digital flag action checklist](#) allows organisations to check that processes are in place to identify, record, flag, share and update reasonable adjustment needs on their own systems and records. The Reasonable Adjustment Digital Flag Information Standard mandate applies to NHS and independent providers, social care (as providers) as well as independent contractors such as GPs and dentists. It also

impacts all health and care IT system suppliers. A [good practice resource package is available on FutureNHS](#).

Patient Enquiries about COVID-19 Vaccination Invitations

National invitations for COVID-19 vaccinations started the week of 15 April. Please follow this guidance to resolve or redirect patient enquiries:

- Patient's details are wrong – check their GP record and update if needed
- Patient needs to know why they've been identified as having a severely weakened immune system - check their record and/or provide clinical advice as per immunosuppression, Table 3 or 4, [Chapter 14a Green Book](#)
- Patient needs help with booking - advise them to [call 119](#)
- Patient needs help with anything else, or you are not able to resolve their enquiry - advise them to contact the [NHS England Contact Centre](#).

General Practice Pay Transparency

The deadline for the submission of 2022/23 general practice pay transparency self-declarations is 30 April 2024. Individuals are required to self-declare if their 2022/23 NHS earnings are above £159,000. NHS England has [published pay transparency guidance](#) which includes information on:

- who is required to make the self-declaration
- the definition of NHS earnings for the purpose of general practice pay transparency
- how the self-declaration is made
- how the information collected will be used

New Campaign Encouraging Veterans to let their GP know they have Served

To improve care and support for veterans, NHS England has launched a campaign encouraging ex-forces personnel to tell their GP practice they've served in the UK Armed Forces. GP practices are encouraged to use the associated assets [on the campaign resources website](#).

By capturing this information in a patient's record, practices can better understand veterans' health needs, particularly those relating to their time served, and make referrals, where appropriate, to dedicated services, such as [Op COURAGE: The Veterans Mental Health and Wellbeing Service](#) and [Op RESTORE: The Veterans Physical Health and Wellbeing Service](#).

Headlines from the Latest NHS Stats

GP Workforce – February 2024

- There are 32 fewer fully qualified, full-time equivalent GPs in February 2024 than January 2024, the first month showing a fall in FTE numbers after seven months of sustained increases.
- We have the equivalent of 1,862 fewer fully qualified full-time GPs than we did in September 2015.
- The number of GP practices in England has decreased by 105 over the past year – reflecting a long-term trend of closures as well as mergers. This fall in both staff numbers and GP practice coincides with a rise in patients: as of February 2024, there was another record-high of 63.20 million patients registered with practices in England – an average of 10,018 patients registered per practice.
- As a result, each full-time equivalent GP is now responsible for an average of 2,298 patients. This is an increase of 360 patients per GP, or nearly 19%, since 2015, demonstrating the ever-mounting workload in general practice.

GP Appointments – February 2024

- Around 30.5 million standard (non-COVID-19 vaccination) appointments were booked in February 2024, with an average of 1.45m appointments being delivered per working day. This is lower than the

average of 1.48m appointments per working day the previous month.

- An average of 1.40m appointments per day were booked in the past year (March 2023–February 2024).
- The number of COVID-19 vaccination appointments decreased significantly from about 11,700 in January 2024 to approximately 140 in February 2024.
- In terms of access, the proportion of appointments booked to take place the same day has decreased slightly from the previous month: 43.5% of appointments in February 2024 were booked to take place on the same day, compared to almost 45% in January 2024.

Appointments booked to take place face to face stayed the same – about 67% of appointments in both January 2024 and February 2024. 45.2% of appointments were delivered by a GP in February 2024: a slight decrease since the previous month (45.5%).

Wessex LMCs Education & Events

Take a look at our full range of **educational courses** for the whole practice team [here](#)
Find at our range of **podcasts** [here](#)

Wessex LMCs Conference 2024 for GPs and PMs 'Here, Now...and Tomorrow'



Tuesday 25th June 2024 09:15 – 16:30
All Wessex LMC Members £95pp
Bournemouth International Centre, Exeter Road,
Bournemouth, Dorset, BH2 5BH

BOOK NOW



At our 2024 Conference this year, we are really excited to offer you a wide range of interesting, innovative and thought-provoking topics as we look at 'here, now...and tomorrow'.

We would love you to join us in a supportive, encouraging environment as we come together to inspire, learn, and help shape our own and our practices' future.

The day will feature new and familiar faces to intrigue and inform. All GPs, Practice/Business/PCN Managers are welcome as well as any other leaders within the practice teams.

Why attend?

- Gain and share new ideas and best practices in a supportive environment.
- Meet new people, make connections, and catch up with colleagues from across the patch. It's a great opportunity for us all to come together in one space.
- A break from the practice can spark new enthusiasm and get you that fresh perspective you might need.

We hope that you create time to come and enjoy the headspace that a day out of the practice can give you.

[Click here to view the agenda and book your place](#)

Contraception Update for GPs and Allied Health Professionals



Wednesday 15th May 2024 13:00 – 14:00
All members of staff working within GP practices in
Wessex £30pp.

BOOK NOW



Dr Camilla Janssen talks to Dr Alison Vaughan to cover the new developments and guidelines in the contraceptive world.

Alison will equip GPs and allied health professionals with skills to navigate the complexities of contraception

presentations. She will use cases relevant to everyday practice to demonstrate contraceptive conundrums covering a wide range of different issues, encourage discussion and to help cement learning.

Areas covered include:

- Contraception in the over 40's
- Contraception with HRT
- When to stop contraception
- Tailored use of CHC (unlicensed)
- New developments/guidance
- Different contraceptive options
- Delaying menses

Please note, this training is being recorded and available to purchase afterwards [here](#)

Bite Size - Maintaining good financial health for your practice



Thursday 23rd May 2024 13:00 – 15:00
All members of staff working within GP practices in Wessex £20pp.

BOOK NOW



This event will be relevant to all PMs, Deputy PMs and Business Manager in General Practice.

Keeping your practice financially healthy has rarely been so challenging. With the disappointing contract imposition, alongside the living wage increases and spiralling fixed / variable costs, having control of the practice finances is critical for survival.

Whilst we cannot offer magic solutions, we can share and discuss the impact of 24/25 contract changes, ways to ensure you are aware of your practice's financial position including maximising income and minimising expenses, and to ensure decisions are made for the right reasons to maintain a healthy financial position

Please note, this training is being recorded and available to purchase afterwards [here](#)

Helpful Education & Events User Guides

Our helpful user guides have been created to assist you with the events process and purchasing education resources.

[How to Book a Wessex LMCs Event](#)

[How to Download Event Materials](#)

[How to Complete Event Feedback](#)

[How to Download your Event Certificate](#)

[How to Purchase a Lunch & Learn Package](#)

[How to Purchase a Video Resource](#)

Regards

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