

**JANUARY 2020**

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**INFLUENZA 2020/21 LETTER**

NHS England and NHS Improvement has now published a [letter](#) based on the recommendations by Joint Committee on Vaccination and Immunisation (JCVI) which sets out the vaccines that should be offered to eligible people and the reimbursement guidance for 2020/21.

The NHS England guidance for the 2020/21 flu season can be found [here](#).

**BMA SECURES SIGNIFICANT HIGH COURT VICTORY OVER UNLAWFUL PENSIONS CHANGES**

The BMA has recently secured victory in the High Court over controversial changes made by the Secretary of State for Health and Social Care to the NHS Pensions scheme in England and Wales.

In April 2019, the Government amended the NHS pension rules in order to grant the Secretary of State the power to suspend payment of pensions benefits to any doctor or NHS professional who had been charged with certain criminal offences but not yet convicted. These changes, which also did not include a right to appeal or a provision for the suspension of payments to be lifted automatically upon acquittal, were a total disregard of the principle that a person charged with a crime is presumed innocent until proven guilty.

In the judgment handed down the Hon. Mrs Justice Andrews described how the Government had drawn no distinction between someone charged with a crime and someone convicted of a crime despite the fundamental principle in law being that “every defendant to a criminal charge, however serious, and however compelling the evidence against him may appear, is presumed innocent until proved guilty to the criminal standard.”

### **PREMISES CLAIMS AGAINST NHSPS**

The BMA has proceeded to lodge claims with the High Court on behalf of five test claimant practices that are challenging the basis of their inflated service and facilities management charge demands from NHS Property Services. The action seeks to obtain a declaration that NHSPS’s ‘Consolidated Charging Policy’, which it has relied upon as the basis for its demands, does not form part of the tenancy agreements between the claimant practices and NHSPS, and as a result cannot be relied upon as a lawful basis for the inflated charges being demanded.

### **CORONA VIRUS INFECTION OUTBREAK**

A corona virus infection outbreak declared by the Chinese authorities, and Public Health England have distributed the attached document through their systems. With the upcoming Chinese New Year on 25 January, practices should be vigilant if patients present with recent history of travel to China/ close exposure to birds/ respiratory symptoms. GP action is limited to:

1. Call the ambulance service explaining your suspicions. The ambulance service has the responsibility to deal with the transfer and the destination hospital.
2. Keep the patient in one room and turn off the air conditioning.

A patient information leaflet can be found [here](#).

### **GENDER PAY GAP**

The [Institute for of Public Policy Research](#) has published report which showed that women GPs earn an average of £40,000 a year less than their male colleagues. The IPPR argue that this is because of the existing GP

partnership model and women being underrepresented amongst GP partners.

In response to this, Farah Jameel, GPC England executive team member said: "The gender pay gap in this day and age is something that we as a society should be ashamed of, and we need to work harder to examine more closely and address the issues that lead to this in the medical profession. For many female doctors – many of whom will have family or caring responsibilities – working flexibly is the right thing for them, and salaried roles at present are able to provide a greater control over work-life balance. However, partnerships too can offer a great opportunity for flexible ways of working, which could be positive for the recruitment and retention of women, but action must first be taken to reduce the risks that put off GPs of all genders from currently taking on this role."

### **NHS ENGLAND CAMPAIGN MATERIALS**

Practices in England should now have received the materials to support the NHS 'Measles, Mumps and Rubella (MMR) – Help Us Help You, Get Protected' campaign (also available on the PHE [Campaign Resource Centre](#)). This is final one of the six campaigns that practices are required to take part in as agreed in contract negotiations last year.

The other campaigns, materials for which practices have also been sent already, are:

- NHS 111 (Help Us Help You - Know what to do)
- Keep Antibiotics Working
- GP Access (Help Us Help You – When you need it)
- Pharmacy Advice (Help Us Help You – Before it gets worse)
- NHS App

If you have not received materials for any of the above, please contact your local NHS England team

### **QOF PERSONALISED CARE ADJUSTMENTS**

Following the concerns raised by practices about the loss of opportunistic prompts following the roll out of the QOF changes in 2019, TPP have confirmed to NHS Digital that they will add a status flag to the patient record which will alert practices to the fact these patients may be missing QOF care as part of their roll out of v44 of the QOF business rules. This will be implemented in the next two weeks.

NHS Digital will explore whether additional functionality can be added to v45 of the QOF business rules to ensure that the two invitation PCA will only come into force at the end of the reporting period i.e. 31<sup>st</sup> March.

## **ONLINE CONSULTATIONS TOOLKIT**

NHS England has published a toolkit to inform staff in practices and commissioning organisations who are implementing online consultation systems. There is a [shortened version](#) aimed at GPs and other practice staff, as well as a [full version of the toolkit](#) for those who are leading these projects.

## **BMA MENTAL HEALTH WORKFORCE REPORT**

The BMA published a [mental health workforce report](#) recently, which revealed that over half of respondents said they were too busy to provide the care they would like to be able to give, with 44% saying that they felt demoralised and the same number saying their workload was unmanageable. It also showed that around two in five GP appointments now involve mental health, while two in three GPs say the proportion of patients needing help with their mental health has increased in the last 12 months. Read more [here](#).

## **PERFORMERS LIST ONLINE SERVICE**

The new online Performers List service has now been launched by NHS England and is being managed by Capita (PCSE). GPs will be automatically registered on PCSE Online. You may have recently received an email from PCSE, with a link for you to verify your account. This is a legitimate email and we are recommending that you follow the link and verify your account – you will need to do this within 72 hours of receiving the link. If the link has expired you can use the 'forgotten your login details' button on the PCSE Online homepage.

If you have not received this email you will need to check that you have an email address registered with the GMC and/or that this is up to date. You can do this by logging into your GMC Online account and updating the 'My details' section, by emailing [gmc@gmc-uk.org](mailto:gmc@gmc-uk.org) or by calling the GMC on 0161 923 6602.

The new online Performers List essentially is a move from a paper application to an online application and GPC have been involved in the development of the system.

There has been some concern regarding a tick box which asks for your permission for your details to be shared with your Local representative committee; this is your LMC. Please do share your details as this will allow your LMC to contact you. Capita (PCSE) cannot share your details with anyone else.

## **UPDATED BMA HANDBOOK FOR SALARIED GPs**

The sessional GP committee has updated the salaried GP handbook which is written for salaried GPs and GP employers. It will also be of interest to those who are intending or about to become salaried GPs. It explains the legal entitlements of salaried GPs as employees and helps to ensure that salaried GPs are aware of their statutory and contractual rights. It also helps to prevent GP employers contravening the law unwittingly. In addition, it explains the national and local representation of salaried GPs, how to become a salaried GP and the work involved.

The handbook provides detailed guidance for salaried GPs. However, this cannot replace the expert and confidential advice on individual employment issues that salaried GPs should and can obtain. This is available as part of BMA membership by contacting the BMA.

The handbook is a valuable tool for GP employers. It explains the statutory entitlements that a GP employer must provide to its salaried GPs in order not to fall foul of the law. It also highlights various contractual obligations, including those under the model salaried GP contract. You can access the updated handbook [here](#).

## **PENSIONS**

A special edition of the PCSE GP Bulletin had been published, which covers the End of Year Pension administration processes for 2020 and an update about Annual Benefit Statements (ABS). NHS Pensions has released the Type 1 Annual Certificate of Pensionable Profits and the Type 2 medical practitioner self-assessment form will be available very soon. In this bulletin we will help you understand what you need to do in order to prepare End of Year Pension administration in 2020.

Pension forms and associated guidance notes have now been published and are available to download from the NHS Pensions website [here](#).

To read the full bulletin clickn [here](#)

## **NEW YEAR'S HONOURS**

We would like to congratulate Dr Jonathan Leach who received honours in the [Queen's New Year's honour list](#):

Dr Jonathan Leach, joint honorary secretary of the Royal College of General Practitioners, was awarded an OBE for services to general practice. Read more [here](#).

## **POST-BREXIT ACCESS TO FREE NHS CARE**

Currently EU nationals are not required to pay the health surcharge. GPC has consistently and repeatedly lobbied the Government on this issue, and on the impact of Brexit on access to healthcare more widely, and have seen no indication that those with settled or pre-settled status will be expected to pay the IHS (Immigration Health Surcharge) in order to access NHS care post-Brexit. The Government has confirmed that those with settled or pre-settled status will retain their current access to free NHS care - this is [stated clearly in the Government's guidance](#) for EU residents of the UK looking to apply for either settled or pre-settled status.

Currently non-EU nationals who enter the UK to work have to pay the IHS (Immigration Health Surcharge). We have previously lobbied to try and gain an exemption from the health surcharge for doctors and other healthcare professionals on the grounds that migrants who do not have indefinite leave to remain in the UK are working, paying tax and making National Insurance contributions. However, previously no exemption had been given to any group of workers or sector. In the context of the current recruitment and retention crisis, should the charge apply to EU nationals, we are concerned that the additional financial burden could further act as a disincentive to EU nationals coming to work in the UK.

Should you know of any BMA members who are concerned about their immigration status, they can use our [Immigration Advice Service](#) which provides free, basic immigration advice in connection with their employment and/or study in the UK.

- **Primary care registration/eligibility:** Anyone can currently register with a GP practice and receive GP consultations free of charge. Patients are also not required to provide any proof or evidence of residency in order to register at a practice. Current GP registration forms do include questions regarding a patient's immigration status, but these do not have to be completed. [NHS England's guidance](#) states that a lack of ID or proof of address is not a reasonable ground to refuse registration and is clear that this applies to asylum seekers, refugees, homeless patients or overseas visitors, whether lawfully in the UK or not.

## **LMC WEBSITE**

The following guidance has been added to the LMC website [www.worcslmc.co.uk](http://www.worcslmc.co.uk) during the last month:

### **NHS:**

[Summary of NHSE PCN Draft Service Specifications](#)

[JCVI Advice and NHS Reimbursement Flu Vacs 2020](#)  
[ESCR Poster](#)  
[ESCR Letter to GPs](#)

**LMC:**

[LMC PCN Service Specifications Position Statement](#)

**Other:**

[GPDF Information Note for GP on IRHPs](#)

# WORCESTERSHIRE AND HEREFORDSHIRE LMC LTD

**Registered office: St Stephens Surgery, Adelaide Street, Redditch, Worcs B97 4AL  
Tel. 01527 65082**

All topical issues relating to local general practice are discussed at the monthly LMC meetings and those minutes can be read on the LMC [Website](#). Should you require further information on any issues raised at the LMC meetings please do not hesitate to contact the LMC representative for your area or practice.

## **MEMBERS OF THE WORCESTERSHIRE COMMITTEE**

**CHAIRMAN:** Dr Shaun Pike  
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## **Representatives:**

**BROMSGROVE:** Dr D Pryke  
Dr K Hollier

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Dr S Pike

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Dr S Morton  
Dr J Rayner

**WYCHAVON:** Dr D Herold  
Dr J Rankin  
Dr R Kinsman

**MALVERN:** Dr P Bunyan  
Dr B Fisher

**WORCESTER:** Dr F Martin  
Dr C Whyte  
Dr R Benney

**Out of Hours:** Dr E Penny  
**Dispensing:** Dr J Rankin  
**Registrars Rep:** Dr E Shantsila (North)  
Dr K Wiltshire (South)  
**First5 Rep:** Dr M Venables  
**Co-opted Rep:** Dr R Williams  
**Non Principals:** Dr W Safdar

## **Practice Manager Representatives:**

Helen Garfield, Representative WF PM  
Lisa Luke, Representative R&B PM  
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## **MEMBERS OF THE HEREFORDSHIRE COMMITTEE**

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### **Representatives:**

All 20 practices are represented at Committee Meetings

**Worcestershire and Herefordshire GPC Representative:** Dr S Parkinson

**THIS NEWSLETTER IS PRODUCED FROM THE LMC OFFICE AT  
ST STEPHENS SURGERY**

### **The next LMC meetings will be:**

Worcestershire – 20<sup>th</sup> February 2020

Herefordshire – 19<sup>th</sup> February 2020