

31<sup>st</sup> August 2020

## **GMS and PMS Regulations Changes From October 2020**

The amendments to GMS and PMS regulations in England to commence from October have now been laid before Parliament and [published](#). These mainly bring into force elements of the GP contract agreement from earlier this year.

The amendments include:

- Requirement for monthly data submissions to the NHS Digital Workforce Collection
- Requirement to participate in the existing GP appointments data collection
- Requirement for practices to ensure patient registration data is regularly updated
- Removal of patients who move outside of the practice catchment area: the practice is responsible for the patient's care for up to 30 days (unless and until the patient registers at another practice) but is not responsible for home visits or out of hours services during that period.
- A modification to make sure that patients who have previously been removed from a practice list and been put onto a violent patient scheme cannot be permanently refused readmission to a practice list if they have been correctly discharged from that scheme.
- Patient assignment to any practice within the patient's local CCG, rather than within the practice area.
- Patient assignment as part of a list dispersal
- An exemption to the ban on subcontracting a subcontract in order to allow PCNs greater flexibility to deliver the DES
- Final cancellation of CQC registration is a ground for termination of a GMS contract
- Other minor amendments to wording without significant change to the meaning

## **Registering Patients prior to their Release from the Secure Residential Estate**

Practices have a contractual obligation to support patients prior to their release from the secure residential estate, as set out in the [NHS England Standard General Medical Services \(GMS\) Contract 2017/18](#). Practices are therefore asked to ensure that processes are in place to support this and information on how to do this [here](#).

The BMA's [guidance page on patient registration](#) has now been updated to reflect this clarification.

### **Redacting GP Records**

In June, GPC wrote to NHSE/I to raise concerns over the redaction of records and unintended consequences of any processes put in place to facilitate patient access to records. The letter sought reassurances that a) patients would not be able to view incoming correspondence before a GP has had the opportunity to review it and b) that the workload of GPs should not increase as a result of needing to review individual records and mark consultation notes for redaction. They have now received a response outlining what measures have been put in place to mitigate these concerns. They have also received reassurances that where practices feel granting access to patients' records during the pandemic would have an adverse impact on provision of essential services, they are not required to do so. NHSE/I is now reviewing their patient-facing guidance on access to records to reflect these points.

### **GP Workforce Data**

The latest GP workforce data has been [published](#). The continued decline in the number of FTE GPs in England is a matter of serious concern, and reflects the immense pressures family doctors are under across the country.

This further drop of 1.4% FTE GPs since March speaks for itself, and yet despite the clear need to do more to attract and retain more GPs, the government have just undermined morale further by failing to use the DDRB recommendations to recognise the incredible work GPs and their teams have done during the pandemic.

### **GP Appointment Data**

The [GP appointment data](#) for July was released yesterday, which shows that the number of appointments delivered by practices are continuing to rise towards pre-pandemic levels. This is certainly what we are hearing from GPs locally. Although total figures still remain around 6% down on those for March, the number of same or next day appointments has risen to the highest in the 18 months covered by the dataset, supported by the continued pragmatism

and flexibility of practices utilising triage arrangements and remote consultation methods.

### **Important Information regarding the Recording of Vaccines Administered by Community Pharmacists**

Our local NHS England Regional Team name here will be using PharmOutcomes this year to support the community pharmacy seasonal influenza vaccination service. This will automate both service audit and the GP notification process at pharmacies. Please read the full document [here](#).

### **Transfer of Work – Survey Reminder**

We are conscious that with new ways of working and increasing demand and limitations on all organisations as we enter the restoration phase of the pandemic, practices are reporting increasing levels of workload transfer. We have made our views clear on this in our previous Statement on [Transfer of Work](#). In order to determine the extent of the problem locally we would be grateful if you could complete this [survey](#) for your practice in order to reflect your experience over the last three months by the end of August.

Practices are reminded that our LMC/CCG/Acute Trust joint letter regarding the responsibilities by primary and secondary care clinicians for the safe transfer of information about diagnostic results and tests still stands and has been recently circulated again to secondary care colleagues at the Acute Trust. The document can be accessed [here](#). Should you be experiencing inappropriate transfer of work we would advise that you use the [template letter](#) to highlight this to other providers.

### **Mentor Support**

Please find a flyer highlighting how you can access peer support during this time [here](#). More information about [wellbeing](#) support can be found on the LMC website.

### **Mental Health and Wellbeing**

The BMA continue to offer [wellbeing services](#) and confidential 24/7 counselling and peer support for all doctors and medical students, as well as their partners and dependents, on 0330 123 1245.

### **LMC Website**

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

[Update on NHS Property Services Legal Action](#)

## **Other COVID 19 Resources**

[BMJ – news and resources](#)

[RCGP COVID-19 information](#)

[NHSE/I primary care bulletins](#)

[NICE resources](#)

# 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:**

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Dr K Hollier

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Dr S Pike

**WYRE FOREST:** Dr M Davis  
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

## **Co-opted Representatives:**

**Out of Hours:** Dr E Penny  
**Dispensing:** Dr J Rankin  
**Registrars Rep:** Vacant (North)  
Vacant (South)  
**First5 Rep:** Dr M Venables

## **Practice Manager Representatives:**

Helen Garfield, Representative WF PM  
Lisa Luke, Representative R&B PM  
Meryl Foster, Representative SW PM

**IT Rep:** Dr R Williams  
**Non Principals:** Dr W Safdar  
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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 – 10<sup>th</sup> September 2020  
Herefordshire – 9<sup>th</sup> September 2020