

2nd August 2021

In this week's Newsletter...

[New NHS England Chief Executive](#)

[GP Appointment Data Demonstrates Workload Pressure](#)

[Supporting General Practice Campaign](#)

[RCGP Report Echoes BNA Call to Tackle General Practice Pressures](#)

[GP Payments and Pensions System Update](#)

[Improving the NWRS \(National Workforce Reporting Service\)](#)

[Gender Incongruence in Primary Care](#)

[Mentor Support](#)

[Mental Health and Wellbeing](#)

[LMC Website](#)

[Covid Resources](#)

Click on any title to go directly to an item

NEW NHS ENGLAND CHIEF EXECUTIVE

The new Chief Executive Officer of NHS England and Improvement will be Amanda Pritchard. She is currently the Chief Operating Officer at NHSE/I and was previously Chief Executive of Guy's and St Thomas' NHS Foundation Trust after beginning her NHS career as a graduate management trainee in 1997. She is the first woman in the health service's history to hold this post, which she will take up on 1st August.

As we previously highlighted, Amanda Pritchard recently publicly praised GPs and their teams and acknowledged the work we are doing saying: 'a really big thank you to primary care – working well beyond pre-pandemic activity – (they are) really really working at an astonishing rate'.

We've welcomed her appointment and hope this provides an opportunity to reset our relationship with NHS England in such a way that GPs can see tangible

evidence of both understanding and support for them and the teams they work with at this critical time of workload pressure and workforce exhaustion. We believe that a strong and supported general practice is the core foundation on which the wider issues facing the NHS can be dealt with and it's vital that NHSE/I under this new leadership do all they can to address the fundamental issues we all face.

Read the [BMA response to the announcement](#).

GP APPOINTMENT DATA DEMONSTRATES WORKLOAD PRESSURE

The latest [GP appointment data for June](#) has been released. The data shows a 3.5m increase in the number of appointments provided during June this year compared to June 2019 (26.7m compared to 23.2m), with an additional 4m COVID vaccination appointments delivered on top of that. Taken together the total number of appointments during June was approximately 31.1m.

The appointment figures continue to demonstrate the immense pressures that GPs and practice teams are under with the ever-increasing workload generated by the pandemic and NHS backlog. Figures like these have become all too familiar but to see them in the summer when the workforce should normally be able to take time out to rest and recharge after such a difficult year is very concerning. GPC will be highlighting to the new incoming NHSE/I Chief Executive that there is a critical need to alleviate the severe pressure GPs and their teams are under and we will continue to remind our local MPs of that too

[Read the BMA response here.](#)

SUPPORTING GENERAL PRACTICE CAMPAIGN

In the coming weeks, the BMA will be sending to practices materials and tools they need to explain to their patients the pressures general practice is facing. The monthly appointment data clearly shows the need for this as we all experience unprecedented pressures which are increasingly hard to deal with. There is no evidence that these pressures are going to lessen in the coming months as we face what many are predicting to be a very difficult winter. Our CCG has responded very positively to our suggestion that more is needed to support local practices who are facing abuse from some patients. We know how demoralising this is for the practice team particularly when everyone is working so hard to meet the demand and we are grateful to the CCG for agreeing to roll out a zero tolerance to abuse campaign outlined below:

“Abuse is not in a day’s work” Campaign Launched

The NHS in Herefordshire and Worcestershire is taking a zero tolerance approach to abuse and aggression towards our staff and our patients. Most people who need support from NHS staff do so in a respectful way which helps us create a safe environment for all. Sadly, there are a very small number of people who can be abusive towards our staff and our patients. Dealing with people who are abusive or aggressive towards our staff and our patients, takes us away from caring for patients. We will investigate any incidents that are reported to us, this could result in action being taken by the police. We have the right to refuse treatment and take further action against anyone who threatens the safety of our staff and our patients. Help us focus on caring for you by treating our staff and our patients with respect.

Practices can download the Practice toolkit which includes information for social media and posters here. The CCG will also be creating a campaign and issuing a press release.

RCGP REPORT ECHOES BMA CALL TO TACKLE GENERAL PRACTICE PRESSURES

The RCGP has published a [report](#) reinforcing many of the key public messages regularly made by the BMA in recent months including that general practice is now 'at breaking point'. It proposed a five-point recovery plan to prevent GPs and other members of the practice team from burning out and ensure patients can continue to receive the care they need, well into the future. The RCGP described the pressures within general practice as unsustainable and said that they must be urgently addressed as we move beyond the 'emergency' pandemic period. During this time, GPs have to deal with the aftermath of COVID in their local communities, including long COVID, and the additional mental and physical health problems it is causing in patients of all ages.

They call for much more work to be done by the Government on recruitment and retention of GPs and the wider workforce. There is an urgent need for investment in premises so staff have space to work safely while providing care for patients. In addition, [workload pressures must be reduced](#), including the removal of unnecessary bureaucracy, and GPs need to have a strong voice in the new ICS arrangements. We would agree that all these goals must be delivered to see a real change in the crisis we currently face.

GP PAYMENTS AND PENSIONS SYSTEM UPDATE

As we approach the end of the second month of its use, we continue to see an unacceptably high level of issues being raised about the new online portal. GPC continue to liaise with PCSE several times a week but the progress is frustratingly slow. The survey for GPs in England to provide their experiences

of the new system will remain open until 13 August. If you haven't already, we would urge you to please [fill out the survey](#) so that we have further evidence of the full extent of the issues and can hold PCSE to account. Note that this survey is not a forum for individual issues – [please raise these with PCSE directly](#).

We know that practices are the biggest users of the portal and we are aware of the many issues they are facing. The intention is to release a survey of practices in England at the start of September which GPC hope to use as a 'snapshot' of progress after three months of its use. There will be further information on this in the coming weeks but, again, the purpose is to help us hold PCSE accountable for their performance. Please be assured that practice use of the portal continues to be central to the work we are doing on this issue.

IMPROVING THE NWRS (NATIONAL WORKFORCE REPORTING SERVICE)

NHS Digital has [improved the way they collect primary care workforce data](#) making the new NWRS is easier to use, and as simple and efficient as possible to help minimise the burden placed upon practices and primary care networks.

From July, users should access the new NWRS via the [Strategic Data Collection Service](#) (SDCS) - using the same login you use to complete other data collections, such as the General Practice Annual Electronic Self-Declaration (eDEC). Visit the [SDCS Data Submission site](#) to check that you have access to the new system. If you have never used SDCS, [you will need to register for an account](#).

It is important to understand staff capacity in the health service - this information helps shape GPC's negotiating strategy and how investment, training and resource is directed across the primary care workforce. It is therefore critical that the information you submit to NHS Digital about your staff is accurate and complete. Provision of workforce data is also a contractual requirement for practices and PCNs as it is crucial for understanding changing capacity across the primary care workforce.

To find out more about the changes to the NWRS, Practice and PCN Managers can [join one of NHS Digital's webinars](#) which are running twice weekly until end of August.

GENDER INCONGRUENCE IN PRIMARY CARE

Several practices have contacted the LMC office recently with regard to the management of patients who present with gender identity problems. In

particular, regarding prescribing and monitoring responsibilities in relation to the gender reassignment process. The guidance linked to below aims to explain what should be provided in primary care, signposts further sources of guidance, and highlights some of the underpinning ethical and legal considerations.

<https://www.bma.org.uk/media/1085/bma-focus-on-gender-incongruence-in-primary-care.pdf>

We would like to draw your attention to the following points in bold from the guidance:

Appropriate ongoing treatment of patients with gender incongruence should be provided by trained clinicians who have both the resources and experience to provide the necessary standard of care. This can either be through specialist prescribing (facilitated through the electronic prescription service) or through properly funded shared-care arrangements with GPs who have consented to provide this service, or through locally commissioned alternative providers within primary care.

We do not have shared care agreements in place for this work. GPs in our county are not commissioned to prescribe such medications for this cohort of patients.

Clinicians in primary care should be supported by specialists when prescribing for patients with gender incongruence. Before a patient can be discharged from a GIC, the gender service must confirm what arrangements have been commissioned locally, provide detailed recommendations and guidance to enable clinicians to take over responsibility for ongoing care, and should ensure consent from primary care for that transfer of responsibility. Arrangements must be in place for patients and clinicians to receive rapid specialist advice in future should this be required.

Participating in a shared care agreement is voluntary, subject to a self-assessment of personal competence, and requires the agreement of all parties, including the patient. This will necessitate NHS England arranging additional local services to meet the prescribing and related needs for the patients of those GPs not commissioned to provide these services.

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 SUPPORT

Wellbeing

We are fortunate to have excellent mental health support in place for general practice locally across both our counties. Do please access support if you need it and remember that it is very hard to look after others if you are not looking after yourself! The latest support available can be found on our [website](#).

There is help and assistance available within the Herefordshire and Worcestershire Healthy Minds service. They are able to provide bespoke talking therapies for all colleagues irrespective of your role in your organisations to assist with anxiety, low mood, stress and other common mental health problems. Referral is easy and can be completed via visiting <https://www.healthyminds.whct.nhs.uk/>. This is a NHS service and as such is free at the point of contact and confidential.

The Service Manager, Phill Morgan Henshaw is happy to answer any questions regarding referral and treatment and can be contacted on 01432 842200 or via phill.morganhenshaw@nhs.net.

BMA Mental Health and Wellbeing

The BMA continues 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. Access the [BMA's COVID-19 wellbeing pages here](#).

The BMA has welcomed the NHSE/I [announcement](#) of further funding for the expanded and rapid access provision of mental health services for NHS staff in England over the winter. This is urgently required and something the BMA has been calling for to support the major challenges NHS staff are facing. At the ARM, a motion was passed expressing concern at the potential long-term impact of the pandemic and called for resources to support the profession. As we head into a second wave of the virus it is vital that staff are protected. [Find out more here](#).

LMC WEBSITE

The following guidance has been added to the LMC website www.worcslmc.co.uk this week:

No New Items

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 David Herold
Riverside Surgery, Waterside, Evesham, Worcs. WR11 1JP
Tel: 01386 444400 Email: d.herold@nhs.net
- VICE-CHAIRMAN:** Dr Matthew Davis
Bewdley Medical Centre, Dog Lane, Bewdley, Worcs
DY12 2EF
Tel. 01299 402157 Email: matthew.davis@nhs.net
- SECRETARY:** Dr Gillian Farmer
St Stephens Surgery, (address and contact details as above)
Email: gfarmer@worcslmc.co.uk
- EXECUTIVE OFFICER:** Lisa Siembab
St Stephens Surgery, (address and contact details as above)
Email: lsiembab@worcslmc.co.uk

Representatives:

- | | | | |
|---------------------|--|-------------------|--|
| BROMSGROVE: | Dr D Pryke
Dr K Hollier | REDDITCH: | Dr I Haines
Dr M Shah |
| WYRE FOREST: | Dr M Davis
Dr S Morton
Dr J Rayner | WYCHAVON: | Dr D Herold
Dr J Rankin
Dr K Gines |
| MALVERN: | Dr P Bunyan
Dr R Khehar | 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: Dr J Chun (North)
Dr L Jones (South)

Practice Manager Representatives:

- Helen Garfield, Representative WF PM
Michelle Hallahan, Representative R&B PM
Meryl Foster, Representative SW PM

First5 Rep: Dr M Venables
IT Rep: Dr R Williams
Non Principals: Dr W Safdar
Clinical Directors: Dr R Williams
EDI: Dr R Benney

MEMBERS OF THE HEREFORDSHIRE COMMITTEE

SECRETARY: Dr Nigel Fraser
Wargrave House Surgery, 23 St Owen Street, Hereford, HR1 2JB
Tel: (01432) 272285 Email: nfraser@hereflmc.co.uk

MEDICAL DIRECTOR: Dr Paul Downey
St Stephens Surgery, Adelaide Street, Redditch B97 4AL
Tel: 01527 65082 Email: pdowney@hereflmc.co.uk

EXECUTIVE OFFICER: Lisa Siembab
St Stephens Surgery, (address and contact details as above)
Email: lsiembab@worcslmc.co.uk

Representatives:

All 20 practices are represented at Committee Meetings

Worcestershire and Herefordshire GPC Representative: Dr S Parkinson

The next LMC meetings will be:

Worcestershire – 8th September 2021
Herefordshire – 9th September 2021