

YOUR News Update



Issue: 14 October 2022

Dear Colleagues

Wessex LMCs News Update from the Team. . .

Wessex LMCs Intro...



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During these challenging times, it's more important than ever to stay in touch with your patients. Good communication can make all the difference when it comes to your patients feeling supported, trusting your judgment, and engaging with your advice.

To help support your practice in communicating with your patients and avoid unnecessary patient contact with GPs, we have linked to [various resources](#) which you can print as posters, use on your website or circulate via your social media channels. Looking for a communication resource not featured on our website? Email us at office@wessexlmcs.org.uk to let us know.

The use of social media can have many advantages. It's a good way to promote your practice, get important health messages across to your patients and engage with those who don't regularly come into the surgery. However, there are also disadvantages. It is inevitable that you will, at some time, receive complaints/negative comments and you also need to protect the privacy of staff and patients, particularly those who are vulnerable. We have put together [guidance](#) on what to consider, together with links to good practice and further reading so that practices can develop their own social media policies.

As an LMC, we work hard to communicate with our members, take a look at our:



Website www.wessexlmcs.com containing guidance, resources and more
[Regular newsletters](#) distributed to all GPs and Practice Managers
[Podcasts](#) on a variety of topics
[Recorded webinars](#)
[Twitter posts](#) follow us @Wessex LMC
[Facebook posts](#) follow us @Wexxed LMCS
[Instagram posts](#) follow us @WessexLMCs
[You Tube channel](#) for handy user guides

Follow and tag us on social media so we can like, share, and comment on your posts!

Looking to improve your profile in the press or your engagement on social media? This [pre-recorded session](#) will help you identify and improve your presence.

General Practice in Crisis

General practice continues to face overwhelming [pressures](#), with unmanageable workloads, coupled with a rapidly shrinking and exhausted workforce. The COVID-19 pandemic has generated a vast backlog of care, which is so far largely unmeasured and unrecognised in general practice, exerting greater pressure on a system already at breaking point.

The pressures practices are under are evident from the most recent [GP appointment data](#) which shows that in August, practices in England delivered a staggering 3 million more appointments than in the same month in 2019, meaning we are now managing the levels of demand used to see in a pre-pandemic winter in the middle of summer, fighting an uphill battle to meet patients' needs, with fewer GPs.

It is therefore [disappointing to see the announcement by the shadow health secretary](#) demanding that GPs provide face-to-face appointments for every patient who wants them, making divisive headline-grabbing promises that are not grounded in reality suggesting the existing workforce are somehow not trying hard enough.

The present crisis is so acute that the BMA is now recommending practices take urgent action to preserve patient care and their own wellbeing, and have updated our guidance on [Safe working in general practice](#), which is designed to enable practices to make decisions as to how to prioritise care, and deprioritise certain aspects of their day to day activity, within the confines of the GMS

As part of this guidance, they strongly recommend practices take immediate measures to move to 15 minute appointments, move towards capping consultation numbers to a safe number per day - safe for clinicians and safe for patients. Excess demand beyond these levels should be directed to NHS 111, extended access hubs, or other providers.

Changing the way they work would allow practices to devote their resources to those patients and problems that general practice is uniquely positioned to help, and those with the greatest need, and not simply as a provider of last resort for other parts of the NHS and social care.

Practice might also want to read the BMA's guidance on [How to improve the safety of your service and wellbeing of your workforce](#), setting out safe limits of the numbers of patient contacts per day, and what is considered 'essential services' under the GMS contract.

The GPC will be looking at other ways of supporting practices - please let them know if you have any feedback on how they can develop further tools to help practices by emailing info.gpc@bma.org.uk

People first: a response from health and care leaders to the urgent and emergency care system crisis

[This resource](#) published by the Care Quality Commission (CQC) and aims to support the design of person-centred urgent and emergency care services and encourage innovation across integrated care systems.

Mental Health & Wellbeing

We are all affected in different ways by the increasing workload and pressures faced each day in practices, with many of us feeling exhausted and drained at the end of a day in surgery. If our wellbeing is suffering, we cannot care for our patients as well as we would like, if we are in need of care ourselves. We, as doctors, have to start prioritising our wellbeing so that we can continue to provide the care to patients that they need.

We encourage anybody who is feeling under strain to seek support, and also check in on your colleagues' wellbeing.

A range of wellbeing and support services are available to doctors, from the BMA's 24/7 confidential [counselling and peer support services](#) to networking groups and wellbeing hubs with peers, as well as the [NHS practitioner health service](#) and non-medical support services such as [Samaritans](#). The organisation [Doctors in Distress](#) also provides mental health support for health workers in the UK.

See the BMAs [poster with 10 tips to help maintain and support the wellbeing of you and your colleagues](#).

Visit the BMA's dedicated [wellbeing support services page](#) for further information and resources.



The 10th of October marked World Mental Health Day and this year's focus is to 'make mental health and wellbeing for all a global priority'

There is a varied range of free, confidential support services at [Support available for our NHS people](#)

Wessex Support Hubs for Practice Staff

Banes, Swindon & Wiltshire: [BSW Wellbeing Matters service](#)

Dorset: [The ICS staff wellbeing service – Here For Each Other \(joinourdorset.nhs.uk\)](#)

Hants & IOW: [HIOW Staff Support Hub](#)

NHS Pension Scheme: Proposed amendments to continue the suspension of restrictions on return to work: Response to consultation

The amendment to Part 3 of the 2022 Regulations will continue the temporary suspension of:

- the 16-hour rule in the 1995 section until 31 March 2023
- abatement of SCS members who retire and return to work between age 55 and 60 in the 1995 section until 31 March 2025
- abatement of draw-down members who claim a portion of their benefits and continue working in the 2008 section and 2015 scheme until 31 March 2023

A further suspension of these easements ensures that the NHS workforce continues to benefit from increased capacity from retired and partially retired staff during a period when staff sickness absence rates are likely to increase. It also recognises the exceptional pressures faced by the NHS in dealing with backlogs and elective recovery.

DHSC intends to proceed with the proposals as set out in this [consultation response](#). DHSC will lay the final regulations before Parliament such that the proposed changes are in place for 31 October 2022. These reforms will extend the existing temporary modifications to NHS Pension Scheme regulations to ensure a further continuation of the temporary easements. The government will keep the impact of this continuation under review.

Overview of QOF, IIF, DES & Local Authority Agreements

When looking at the areas included in QOF, IIF, DES & Local Authority Agreements, there are a number of indicators that span all of these. We have therefore produced a [spreadsheet](#) which gives an overview of the domains in the QOF for 2022/23 and shows how other targets within the IIF and other Directed Enhanced Services/Local Authority Agreements link to these domains. This may help your Practice and PCN look at how you may want to achieve these.

The image is a screenshot of a spreadsheet titled "QOF, IIF, DES Overview 22/23". It contains a table with multiple columns and rows, detailing various indicators and their links to different domains. The table is complex, with many small text entries and links.

It is a summary, so please check your contracts, service specifications etc for full details. Please let us know at office@wessexlmcs.org.uk if you have any queries relating to this.

PCN DES Opt Out Window

As practices may be aware, at the end of September NHS England [published a letter](#) outlining support for practices and PCNs. This includes changes to the ARRS (including changes to reimbursement rates to reflect the Agenda for Change pay award and the introduction of 'GP Assistants' and 'PCN Digital Leads'), removal/postponement of some IIF indicators, and a new PCN 'capacity and access support payment', funded from the reduced IIF indicators.

As these changes have been introduced by NHSE in-year, an opt-out window for the PCN DES has been triggered. Within this opt-out window, practices can choose to opt-out of the DES without risking a breach of contract. The BMA have developed [this guidance](#) as a primer to support practices that are considering opting out of the DES.

The BMA is advising practices to read the [guidance](#) and consult with their staff and fellow PCN members as to whether to utilise the window to leave their PCN. If practices choose to stay in their PCN, the next opt-out window is expected to be April 2023.

Citizen Access to Records Programme

Following representations made to NHS England, GPC England has said it has not received satisfactory assurance that the citizen access to records programme scheduled to rollout on 1 November can go ahead. Against a backdrop of sky-high pressures on general practice, they believe that the necessary planning and resourcing required to launch the programme at this time cannot be put in place to enable a safe and successful rollout. They are supportive of the initiative to enable patients to view their medical records, but have stated that this cannot be rushed especially when there remains risks to patient safety.

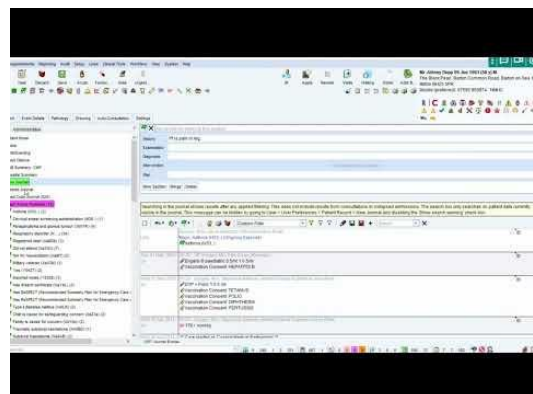
Online Access – Redacting a Consultation

With the future rollout of patient access to online accounts, Wessex LMCs have produced these helpful guides for redacting a consultation from your clinical system.

[An EMIS guide for redacting a consultation](#)



[A TPP guide for redacting a consultation](#)



Consider using a test patient in your clinical system and similarly a test patient in the NHS App to see how actions within your clinical system will look to the patient within the App. [NHS Digital](#) have full details of how to do this. The NHS App test patient can be set up on a [computer](#) or laptop, as well as a smartphone, android or tablet.

With our kind thanks to Dr Michelle Sharma from BSW who has produced [a crib sheet](#) for all healthcare professionals that shows how to “Redact from online view”.

Updated Flu Specification

NHSE/I has published an [updated flu specification](#), alongside updated guidance, which now covers vaccination of practice staff. Whilst this will ensure that flu vaccinations provided to staff will be covered under the CNSGP, please be aware, however, that practice staff vaccination will still not be eligible for an IoS (Item of Service) payment or vaccine reimbursement for this year. The BMA recognise this is a frustrating decision and will continue to press NHS England about this issue and try to reach a better solution for many practices out there who are already facing enormous pressure as we head into the winter months.

Issues Impacting Adult and Childhood Seasonal Flu Extracts for September

NHS England have been notified of issues impacting both adult and childhood seasonal flu September extracts, which could result in inaccurate flu payment data. Further work is underway to fully investigate the issues and ascertain the actions required to remedy this.

In the interim, NHS England is asking that practices **do not** declare their September flu achievement data. This action is to mitigate the need for manual reconciliation work once the matter has been resolved.

Action required

To support mitigation, the following actions are recommended for practices.

- **No further declarations for the two flu services should be completed for September 2022 claims only until further notice**
- **Declarations may continue for all other services**
- **Practices should liaise with NHSE if there are concerns about cash flow.**

NHSE Vaccination Strategy Consultation

As you may be aware NHS England (NHSE) is seeking engagement from providers to inform the future shape of vaccination services and share views on ways in which NHSE can maximise uptake of vaccinations and reduce inequalities.

The original 'market engagement exercise' closed on 7th October, however, as part of the same process NHSE have also published an alternative [consultation page](#) on the proposed 'strategy', which remains open to the 13 October. If practices or LMCs still wish to contribute, you can do so via either method using the links below:

- [Market engagement portal \(using quote/tender 56405\)](#)
- [NHSE consultation page](#)

For more information on this exercise, the Future NHS page [here](#) provides a copy of the draft vision, the feedback questions, a portal user guide and FAQs.

It remains the view that general practice remains the best route to engaging with patients and encouraging vaccine uptake across all GP based V&I programmes, and that any expansion of providers runs the risk of simply redistributing existing patients and undermining practice funding, rather than increasing uptake. The BMA have subsequently made clear to NHSE that the key to meeting the aims of its strategy is to build upon and support existing practice-based programmes. We will continue to engage with NHSE on their proposals and update as things progress.

Proposed Repeal of the IR35 Tax Forms

As part of the recent '[mini-budget](#)' the government announced that it intends to repeal the 2017 and 2021 IR35 reforms of the [IR35 off-payroll working rule](#). The changes are expected to come into force from April 2023 and once confirmed, the BMA will produce further guidance in due course.

Survey on how Inflation and Energy Costs are Impacting your Practice

We know GP practices across England are feeling the impact of inflation and high energy costs. Please complete the BMA survey so that evidence can be collected to advocate on your behalf. The survey asks for a range of information relating to practice costs including energy, staffing and other expenses.

While the BMA is encouraging you to complete the whole survey, if you do not yet have the information, please still complete the parts you can. The BMA needs to hear from as many practices as possible to enable them to make a strong case to NHSE/I, DHSC and the government to seek solutions. [Take the short survey here](#) (closing Thursday 20 October).

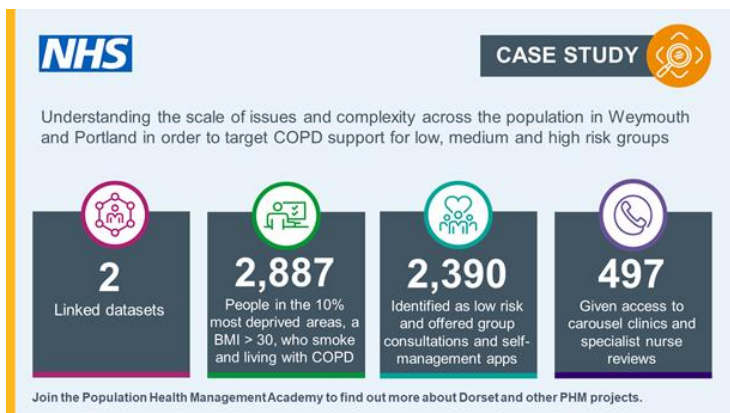
Recent Reports and Key Research to Support ICS Development

The King's Fund | [Interoperability is more than technology: the role of culture and leadership in joined-up care](#) - explores what is needed for interoperability to progress in an ICS setting using existing literature and a

combination of interviews and workshops with staff in the health and care system and national bodies.

The King's Fund | [Building capacity and capability for improvement in adult social care](#) - this discussion paper looks at how local authorities in England can improve the quality of adult social care.

Using Population Health Management to target COPD support for low, media and high-risk groups in Dorset



Nearly 3,000 people in [Dorset](#) with Chronic Obstructive Pulmonary Disease (COPD) at risk of degenerating health were helped to manage their condition to improve their wellbeing by being given fresh access to health apps, social prescribers, group consultations and carousel clinics.

A mix of analysts, nurses, social prescribers, GPs, a consultant, a patient group and local authority colleagues in Weymouth and Portland Primary Care Network (PCN) worked together using a PHM approach to identify and support 2,390 low risk, 224 medium risk and 273 high risk patients.

[Read the full case study on the PHM Academy.](#)

Wessex Education & Events

Biochemistry Update on Endocrine & Lipids

Thursday 24 November 2022 09:30 – 11:30
Wessex LMC Members £35pp
Book Online: <https://www.wessexlmcs.com/events/14018>

Consultant Chemical Pathologist and Lipidologist Dr Paul Downie, from Salisbury District Hospital, will be joining us to cover the less well-known parts of biochemistry.

Aimed at GPs, during the 2-hour session we will cover:

- Common pitfalls in endocrine testing
- Abnormal thyroid results
- Parathyroid hormone requesting
- Testosterone deficiency
- Diagnosis of menopause
- Cortisol testing
- Investigation of hyper/hypoadrenalism



We are recording this session and it will be available [here](#) for 12 weeks after the event at a cost of £30 for members of Wessex LMCs

The NHS Pension Scheme for PMs – you and your pension

Thursday 9th February 2023 09:30 – 11:30
Wessex LMC Members £50pp
Book Online: <https://www.wessexlmcs.com/events/14292>

This session for **PMs** will give you an overview of the NHS Pension and help you understand about your own membership. You will leave with info & knowledge that will enable you to make informed decisions about your membership of the pension scheme and your ultimate retirement.



- Overview of the NHS pension scheme
- Understanding of your Pensionable Pay and how your pension is calculated
- The real cost of contributing to the NHS pension scheme
- Family Benefits
- Taking responsibility for monitoring your Pension

Please note this session will NOT be recorded

Induction to the NHS Pension Scheme

Wednesday 30th November 2022 13:00 – 14:00

Wessex LMC Members £40pp

Book Online: <https://www.wessexlmcs.com/events/14126>

This one hour webinar is suitable for **all newly employed nurses, admin, reception & secretary staff and managers**. Delegates will be given comprehensive information on:

- An overview of the pension scheme
- The decisions you need to make about your pension
- What to ask your employer
- How to monitor your pension
- Staying abreast of future pension changes



Please note this session will NOT be recorded

Regards
The LMC Team

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