

Dear Colleagues

Wessex LMCs News Update from the Team. . .

Wessex LMCs Intro...



*Dr Will Howard
Medical Director
Wessex Local Medical Committees Ltd*

In a world of hyperbole, where society is “disgusted” by this and “horrified” by that, it is difficult to think of any hyperbole that would sufficiently describe the devastation wreaked on Turkey and Syria in the last week. Many lives have been so sadly lost, and many more torn apart on a scale not seen since the 2004 Boxing Day earthquake and subsequent tsunami. In the UK we look on in horror, but also most of us are detached from this - our only window being our television screens and social media feeds. The brief glimpses that these afford demonstrate how utterly awful this is for so many individuals. Heart wrenching tales that are real, not a television drama, seem so difficult to comprehend from the comfort of our own living rooms with rooves, heating and running water on tap. As difficult as life currently seems for us here in the UK we wanted to reflect on these awful events and offer our thoughts and prayers to those affected on the eastern borders of the Mediterranean.

We are incredibly fortunate to live on a small island relatively unaffected by natural disasters. The regularity of our weather is as reassuring as it can be frustrating and so, on reflection, we must be grateful as the first green shoots of spring appear and the sun starts to warm our faces. Though much in our country is far from perfect, and we face significant struggles in the NHS and particularly in General Practice, we are also still very fortunate to be where we are and have what we have. Take a moment to appreciate our country, appreciate the beauty have on our doorsteps and the relative safety of it. Take the opportunity to hug your loved ones that little bit tighter and reflect on sometimes what we take for granted in our normality.

Feedback from the BMA England General Practitioners Committee Meeting on 2nd February

This was one of the four scheduled meetings of GPC England. The meeting was held following negotiations between GPCE officers and NHSE for the 2023/24 year (Year 5) of the current five-year contractual deal, with NHSE having presented their contractual proposals at 7pm the day before.

These negotiations had been conducted over a compressed timetable of four weeks, meeting twice weekly, following NHS England being unable to secure a mandate for the negotiations from the Government in November.

2023/24 contractual negotiations

The headline outcome of the negotiations between the GPC England officer team and NHSE was that there was to be no additional investment for year 5 (2023/24), beyond what was agreed as part of the five-year deal (in 2023/24, there will be an uplift to global sum of 2.1%), despite the inflationary pressures that practices are facing, mounting staffing and cost pressures and the increasing precariousness of their finances. In addition, new excessively onerous, and likely unachievable access targets had been proposed by NHSE as part of these contractual changes, alongside a simplification of some other targets and funding flows.

During the debate around this contractual offer, the committee expressed disbelief that there was no recognition of the financial pressures that practices find themselves in, which threaten the very viability of practices. In addition, committee members were shocked that NHSE, and the Government would seek to create new demanding targets around access, when practices are currently already dealing with unsustainable workloads. The problem practices and patients face is not access, it is that demand outstrips capacity.

The committee were asked to vote on whether to accept or reject the negotiation outcome as presented to them. The committee voted to **reject** the negotiation outcome, with no votes in favour of accepting the negotiation outcome. Following this vote, GPC England made NHSE aware and issued this [press release](#).

- **Action:** GPCE will be urgently seeking significant improvements to the negotiation outcome and will consider its next steps, including industrial or collective action, should there not be significant improvements.

Support for GP trainees potentially undertaking industrial action

GP trainees in England are currently being balloted for industrial action, as part of the ballot being coordinated by the Junior Doctor Committee of the BMA. This ballot closes on 20 February. In a demonstration of solidarity with GP trainees, members of GPC England passed the below motion.

That this committee notes that all Junior Doctors in England, including GP Trainees, have been balloted to undertake industrial action in 2023 due to the real terms pay erosion they have experienced since 2008. For GP Trainees this issue is compounded by the failure of NHS Employers to address the deficit in the GP Flexible Pay Premia identified during the 2018 Junior Doctor contract negotiations.

We offer our support to all Junior Doctors, particularly GP Trainees in England, in pursuing Full Pay Restoration to 2008 levels, which for GP trainees includes addressing the deficit in the GP Flexible Pay Premia.

During the debate, committee members expressed their solidarity with GP trainees and stated that they and their colleagues should do all they can to demonstrate their support for GP trainees in taking action, if they choose to do so.

- **Action:** In addition to the above motion, the committee discussed guidance being planned on being issued by GPCE to practices about how they should support GP trainees if they do go on strike and how they should manage the impact of trainees' absence. The committee also agreed that guidance should be issued to practices around how they could financially support trainees during the potential action if they chose to do so.

Report from Alternative Action Working Group (AAWG)

The committee received and discussed a report from the above working group which had been set up to explore possible options around collective or industrial action open to GPs in England.

During the discussion, the committee considered the viability of different forms of action, including the impact and how much member appetite there might be. Any form of action is designed to create leverage to force a better outcome and is not an end in itself. It was acknowledged that no GPs want to take this course, but the current dire situation may necessitate it for the sake of preserving and improving patient care.

- **Action:** These discussions will steer the future work of AAWG

2023 LMC England Special Conference

The committee were asked to vote on whether they supported there being a LMC England Special Conference in 2023, as there was in 2022. The committee voted overwhelmingly in favour of this proposal.

- **Action:** A funding request will have to be submitted to the General Practice Defence Fund (GPDF) by GPC to enable the running of this conference, with support from BMA staff.

Committee strategy for GPC England

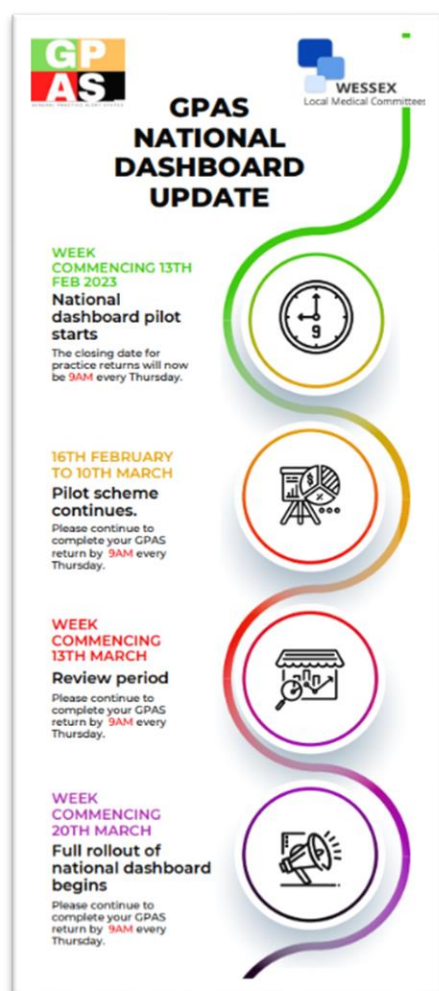
Following on from previous discussions at the September and November 2022 committee meetings, a revised version of the committee strategy was presented to the committee. The revisions in this version reflected feedback received at the November meeting during roundtable discussions amongst the committee members.

The aim of this strategy would be to provide a clear and succinct outline of what the committee's vision for general practice in England. In addition, the strategy aims to define committee's goals, and what its objectives are which will help it achieve its goals and vision. Furthermore, the strategy will set out what actions the committee will take to fulfil its ambitions and what specific outcomes can be used to measure the success of the committee.

The committee were asked to vote on whether they supported the strategy in principle. The committee voted in support of the strategy document.

- **Action:** The GPCE officer team will continue to refine the document before looking to publicise the strategy and share with the profession.

GPAS - General Practice Alert State - Nationwide Dashboard



The GPAS (General Practice Alert Status) system continues to evolve and has now been rolled out across LMCs nationwide. The next stage is a pilot scheme of the National Dashboard which we are pleased to say that Wessex LMCs has been asked to participate in.

The pilot scheme will run for four weeks to ensure that sufficient data is collected to test all parts of the system and to ultimately produce a national SITREP to support our BMA national negotiators in their ongoing contract negotiations with NHSEI.

Furthermore, the GPAS developers will be setting up steering group in late summer and Wessex LMCs will be participating in this group, providing feedback and suggestions from our practices.

Change to Survey Closing Time

We will continue to email you the link on a Tuesday morning, with a polite reminder on a Wednesday morning if the 50% quality marker for your region has not been reached. However, to allow enough time to process your responses and send to the National Dashboard **the closing time for responses will change from 4pm to 9am every Thursday**. Unfortunately, any responses received after 9am will not be included in the data.

This change started from this week - 13th February 2023. If you already complete the survey, thank you for taking the time to submit a return on behalf of your practice. If not, please get involved. Your responses are important and effective tool for Primary Care to finally be recognised in line with Secondary Care.

Use of Gender Identity Development Service (GIDS) referral proforma; for children and young people's gender dysphoria services

The following article is based on excellent work by Surrey and Sussex LMCs and BBO LMC and we at Wessex LMCs endorse this approach.

In July 2022 NHS England announced plans to move to a regional model of care for children and young people experiencing gender dysphoria and bringing the current provision at the Tavistock and Portman NHS Foundation Trust to a close. New services are due to be opening from Spring 2023 although no definite plans are yet available. This was foreshadowed by the interim report of the Cass Review, in February 2022.

As part of these arrangements NHS England has commissioned the Referral Management Service at NHS Arden and Greater East Midland to manage all referrals for Children and Young Peoples GIDS. Referrals can be made by GPs, or by other organisations, such as Paediatric Services, Social Care, and Children and Young Peoples Mental Health Services. Self-referral is not permissible.

The BMA affirms the rights of all transgender and non-binary individuals to access healthcare and live their lives with dignity, including having their identity respected. Doctors should work collaboratively with their trans and non-binary patients as they do with any patient: in a respectful, open and sensitive way, free from discrimination or bias.

GPs should understand gender incongruence and the issues involved to ensure quality care is provided. However, we also need to balance what can be expected of GPs and the expertise which should rightly remain with specialist services.

In common with other referral proforma, Wessex LMCs does not support the use of proforma as a prerequisite for the acceptance by a provider of any referral. Referral proformas can be useful where their use is optional, they are simple to complete and facilitated by auto self populating from the patient clinical record. The GIDS proforma is unusually long and complex and may take GPs or administrative colleagues a significant amount of time to complete. Most if not all the information can be obtained from accompanying specialist letters (which the LMC recommends are sent with the GIDS referral). Alternatively, a direct discussion could be arranged by administrative staff at the Referral Management Service with clinical staff at the accepting provider, who will clearly be aware of what they want to know in order to undertake an initial screening or management of the patient and their family, and can use a remote consultation to do so.

A number of other LMCs have raised concerns about the GIDS proforma. BBO LMCs (Berkshire, Buckingham and Oxfordshire) have suggested the following approach. If your practice receives a rejection email from the GIDS service due to non-use of, or missing information in a referral proforma, the LMC recommends you respond by:

- **Acknowledging receipt of the GIDS service letter dated xxx**
- **Note that it relates to your referral of [Patient Identifier] on xxx**
- **Note that as the GP you are being asked to complete a proforma before the referral is accepted**
- **State that your original referral letter / proforma contains all the necessary available clinical and other information needed to ensure a safe transfer of care and for the GIDS service to assess and manage the referral**
- **State that you will not complete the requested referral proforma as it is neither professionally or from a regulatory perspective a requirement to do so , or where you have chosen to use the proforma state that you have completed it to the best of your ability.**
- **Say that the GIDS service may contact the patient and/or their family, who are aware of the referral, to obtain any further information they believe is necessary to appropriately process and manage the referral (note: this refers to children and young patients: adult patients should not include a reference to contacting the patient's family)**
- **Note that whilst you as the patient's GP are happy to continue to deliver primary medical services to the patient, this does not imply:**
 - **A willingness to prescribe any medications under the direction of the GIDS medical team**
 - **A willingness to monitor or interpret any diagnostic investigations recommended by the GIDS clinical team**
- **Conclude by saying you have appropriately referred the patient who should be placed on the**

waiting list, and you cannot be responsible for any delays caused by the GIDS referral management service

The LMC recommends you keep a copy of this letter: if the GIDS referral management service continue to refuse your referral without the completion of a proforma, please contact NHS England Specialised Commissioning team and the LMC.

Colleagues should also note the LMC does not support the inclusion of referral proforma as a prerequisite for any referral process; this represents a workload burden upon practices and diverts General Practice clinical and administrative time from more appropriate priorities. It is also not required as part of either a GP's professional or regulatory responsibility, although it is important that sufficient information is included in any referral letter to ensure a safe transfer of care. Recipient providers can contact the patient (or in the case of children and young people, with consent their parent(s)/carer(s)) to obtain any further information they feel is necessary to appropriately assess, prioritise and manage referrals.

The LMC recommends only auto self-populating templates are requested from General Practice, and referrals should not be rejected if these are incomplete.

Talking Transgender - Podcast



Dr Cora Sargent, Educational Psychologist and a Senior Training Fellow at the University of Southampton, joins us to discuss the work she carries out as part of the gender research group.

Cora draws on her own experiences of being transgender to explain her journey with trans services and her GP. She also highlights the societal barriers that non-binary and transgender people face. [Listen to the podcast here](#)

Transgender guidance is available on the LMC website here: [Care of Transgender and Non-Binary Patients in Primary Care](#)

Trans Awareness Session: What's it like to be Transgender, and how can I support those who are?

Are you supportive of trans people, but worry that you may offend a trans person by saying the wrong thing?

Are you confused by everything trans?

Would you like to feel confident in communicating with trans patients?

If so, our trans training is for you....

Dr Laura Edwards, (GP & Wessex LMCs Joint CEO) will host this webinar for GPs and AHPs as well as all other staff working in primary care.

Our guest speaker Katie Neeves came out publicly as being transgender after living for 48 years as a man. Katie formed [Cool2BTrans](#) to support and inspire other trans people and also to educate everyone else about trans people.

This presentation uses powerful elements from Katie Neeves' story and gives the delegates a very real appreciation for what life is like for trans people. Katie describes her story as: "My Long Walk to Womanhood", a raw, emotional, educational and humorous story of my transgender journey, mixed with explanations of all things trans.

We are running this training on the following dates, click the links to book:

[Thursday 27 April 2023 14:30 - 16:00](#)

OR

[Thursday 19 October 2023 14:00 - 15:30](#)

Wessex LMC Members £50pp

Please note we are not recording these webinars

FOLLOW-UP Trans Awareness Session: ONLY for those who attended an initial session

This follow up session equips participants with the knowledge to really understand the transition process and the vocabulary necessary to prevent them from inadvertently offending trans people. It is designed for small groups of no more than 15 people. The follow up session will focus on:

- Why is trans-awareness training needed?
- Trans terminology explained
- Typical stages of a transgender journey
- Q&A

We are running this training on the following dates, click the links to book:

[Thursday 25 May 2023 12:30 - 14:00](#) This training session is **ONLY** for those who attended the initial session on **[27th April](#)**

OR

[Tuesday 28 November 2023 12:30 - 14:00](#) This training session is **ONLY** for those who attended the initial session on **[19th October](#)**

Wessex LMC Members £95pp

Please note we are not recording these webinars

NHS Pensions Employer Contributions – Transitional Arrangements

The NHS Pension Scheme employer contribution rate increased on the 1 April 2019 from 14.3% to 20.6% plus the employer levy of 0.08%.

The Department of Health and Social Care's consultation response announcing the rise, published in March 2019, confirmed the available funding to meet the associated costs and that a transitional arrangement would operate in 2019/20 where employers in the Scheme would continue to pay 14.38%.

Although our initial expectation was that this transitional arrangement would only be in place for 2019/20, the approach continued in subsequent years, and we can now confirm that the transitional arrangement will continue again in 2023/24 in order to maximise stability for employers in the sector, particularly in light of the continuing recovery from the COVID-19 pandemic.

This means that for 2023/24, all employers should continue to pay 14.3% in employer contributions plus 0.08% employer levy under their normal monthly payment process to the NHS Pension Scheme. NHS England will continue to make payments to the Scheme for organisations covered by the commitment to the NHS.

Register with a GP Surgery Service Expansion

More than 100,000 successful registrations have now been submitted using the '[Register with a GP surgery online service](#)'. NHS England is working with almost 600 practices to refine the service, which reduces the admin workload for GP teams by up to 15 minutes per registration, whilst offering patients choice and convenience in how they register. A new-look paper form is also being trialled which aims to make it easier for patients to complete, whilst structured in a way to support more efficient processing by practices.

This [roadmap](#) has more information. Use the self-enrolment feature or contact the dedicated support team to begin using the registration service. Further information can be found on the [resource hub](#).

2022/23 Network Contract DES – New finance system code

[A new finance system code that PCNs and commissioners are required to use for PCN Core Funding payments has now been updated.](#) The 2022/23 DES guidance contains pay codes required to support payments in the Network Contract DES. Please contact england.gpcontracts@nhs.net with any questions.

GP Evidence Website

The [GP Evidence website](#) has been developed to make the scientific evidence underpinning guideline-recommended treatments easier to access and understand for practising GPs. It's helpful for having Shared Decision Making (SDM) conversations with people about the best evidence of the benefits and harms of medicines.

General Practice Team Public Assets – Translations

NHS England's range of [digital and print materials about the general practice team have now been translated into 12 different languages](#). The information supports practice and PCN teams to share information with patients about the different professionals working in their practice. Please use these within your practices to further support patient understanding of the wider roles working in general practice.

Free Resources for Nurses and Midwives

NHS Knowledge and Library Services has produced a [quick reference guide for nurses and midwives, in the community and in GP practice teams](#). There is support for nurses right through their career, offering support to develop, stay up to date, make decisions and give patients the best care possible.

Mental Health & Wellbeing



NHS Professionals Health and Wellbeing Hub will provide you with resources, ideas and guidance to help you manage your mental health and wellbeing.
www.nhsprofessionals.nhs.uk/health-and-wellbeing

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](#)

Wessex Education & Events

How To... PCNs - Everything you need to know

Tuesday 7th March 2023 09:30 – 12:30
Wessex LMC Members FREE
Book Online: www.wessexlmcs.com/events/14017

FULLY FUNDED for GPs, Senior Leaders and Partners in General Practice working in the Wessex area.

This webinar will be run by 3 experts in the field of PCNs:

- James Gransby, medical Accountant with RSM,
- Nils Christiansen, Solicitor from DR Medical Specialist Solicitors
- Dr Will Howard, Medical Director at Wessex LMCs and recent Clinical Director of a PCN.

The webinar will cover all areas from the basics to more advanced decision making, including discussion around the alternative forms that PCNs can take.

We will also do some problems solving with frequently asked questions that might arise, and the audience will have the opportunity to vote for areas they would like covered in a Q&A session



This module will cover:

- What is a PCN?
- PCN DES
- PCN Funding
- PCN Workforce - ARRS

We will be recording this session and it will be available to purchase afterwards [here](#)

Advanced Menopause Masterclass - For GPs & AHPs

Wednesday 17 May 2023 09:30 – 12:30

Wessex LMC Members £60pp

Book Online: <https://www.wessexlmcs.com/events/14490>

Aimed at HRT prescribers - GPs and Advanced Practitioners.

Dr Camilla Janssen talks to Dr Sarah Gray, a menopausal specialist, and they will delve into the world of menopause, discussing in more detail, some of the finer points around HRT and menopause, unpicking some of the latest evidence and guidelines, to ensure that we are up to date with our current prescribing and information in this area.

Building on the webinar '[Menopause Webinar – hints and tips for a successful consultation](#)' this session will provide more detailed practical help for those with some experience of prescribing HRT. It will use a case-based format to cover questions such as:

- HRT / Bleeding - when to Investigate?
- PMT and HRT?
- Progesterone intolerance and HRT
- PCOD and how this affects things?
- Starting HRT in ladies older than 60 – is this ever okay?
- The role of FSH
- Tibolone
- The Davina effect – prescribing testosterone



We will be recording this session and it will be available to purchase afterwards [here](#)

Introduction to Practice Management – 2-day virtual training



[Tuesday 16 May 2023 & Tuesday 23rd May 2023 10:00 – 15:00](#)

OR

[Tuesday 4th July 2023 & Thursday 13th July 2023 10:00 – 15:00](#)

OR

[Tuesday 21st November 2023 & Tuesday 28th November 2023 10:00 – 15:00](#)

Delegates must attend both days. Wessex LMC Members £405pp

This popular virtual course will suit recently appointed practice managers who are new to the NHS, deputy practice managers or those aspiring to be practice managers. It will provide information and support to understand the key areas which need to be addressed when managing a busy and successful practice.

Content:

- Workforce Management
- Partnerships
- Finance
- Business Planning and Processes
- Unlocking the potential of IT

- Health and Safety
- The future of primary care & ongoing support for the management of the practice
- Involving patients and service delivery

Previous delegate feedback: *"Excellent delivery. I now feel that I am supported fully in my future role"*

Please note this training is NOT being recorded

Regards

The LMC Team

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