



# Update from the Consortium of Lancashire & Cumbria LMCs

Tuesday 23<sup>rd</sup> April

## Help us grow our audience - LMC Distribution list

We would like to grow our LMC audience. If you know any GPs or PMs in your practice that don't receive this Brieflet and/or is not on our distribution list, please ask them to [get in touch with us!](#)

## Message from your LMC CEO - Workload Transfer

Dear Colleagues,

As a working GP myself I can see first hand the extreme pressures that General Practice finds itself under. It's hard enough completing our contracted workload without having a constant serving of "GP to kindly..." thrown in at regular intervals during the working day. This is becoming both infuriating and unmanageable. I have, therefore, taken the liberty of writing out to the CEO and Medical Director of each hospital trust in Lancashire and Cumbria to push for a resolution to this. The letters as you can see from the links below have slight variations within to account for the varying degree of progress made at local level.

Some of you may see the tone as being quite strong, but it's important to remember that we are talking about unpaid/noncontracted work being thrown at us daily with little respite from a system that is stacked against us. We are expected to see and deal with anything that presents to the practice despite reduced funding levels and the constant threat of staff burnout. Something needs to change – and change fast, or else we will go into a terminal decline without any hope of saving the job/profession we all love so much.

As always, I will keep you updated on any progress made on this front – but want to assure you that this is the beginning of a pushback strategy that will hopefully help to rebalance the system and improve our workload.

Dr Adam Janjua

## Letters to Trust CEOs & Medical Directors:

- [Fylde Coast](#)
- [Morecambe Bay](#)
- [North Cumbria](#)
- [Lancashire Pennine](#)
- [Central Lancashire](#)
- [West Lancashire](#)

## General Practice Alert State (GPAS)

You can see the the latest SitRep results below. Results can also be found [on our website](#). You can see the [national GPAS SITREP here](#).

The data helps us gather a true picture of the pressure's practices are under. When completing the GPAS form please ensure that you are inputting the correct numbers to avoid incorrect data.

[Please let us know](#) if you are a Practice Manager and do not receive the GPAS input emails.





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### **BMA GPC England writes to NHS England and ICB leads**

The BMA GPC have [written to NHS England](#), confirming that they are in dispute regarding the 2024/25 general medical services contract for general practice, and warning that steps that may ultimately lead to GP action will follow, unless urgent improvements are made to the contract.

The decision by NHSE and the Government to impose the 2024/25 contract on the profession on 1 April, comes despite a unanimous rejection by the BMA GPs committee England, and by [99.2% of over 19,000 GPs and GP Registrars](#) across England who took part in our referendum. Of note, the turnout for BMA members who identify as GP principals, partners or contractors was almost 75%.

They have also [written to ICB chairs and CEOs](#), advising that the potential threat of GP action be placed on system risk registers if not already there, and inviting them to meet with the LMC to discuss the potential implications of such action, as well as better understanding local general practice pressures specific to individual systems.

Read more here: [GPs in England go into dispute with NHS England over contract](#)

### **PCSE Seniority Payment Reconciliation process**

Last Autumn many practices were contacted by PCSE, which was undertaking a reconciliation exercise for seniority payments made in financial years 2017/18, 2018/19 and 2019/20. Not all practices will be affected by this exercise.

This process was then delayed because of the need for further validation exercise. This has now been undertaken for all but a very small number of practices. As a result of the validation, the figure your practice (if affected) will now receive (which may be either positive or negative) may be different to the figure sent in October 2023.

The intention is to balance practice payments in the June contract payment run. Across England approximately 1,500 practices are due a deduction, and just under 1000 practices will receive a positive adjustment. PCSE are making special arrangements for practices who believe a one-off financial deduction in June would place their practice at risk of financial hardship. If this is the case, you should complete the request for a payment plan via the email you have received from PCSE. PCSE have confirmed they will not make a June deduction if a dispute has been raised.

There is further information regarding seniority payments via the PCSE website at [Seniority payments | PCSE\(england.nhs.uk\)](#)

[See full BMA GPC update here.](#)

### **Academy Matters - MLCSU IT Training Newsletter - April 2024**

Please see the most recent MLCSU IT training newsletter: [April 2024 - MLCSU Academy \(midlandsandlancashirecsu.nhs.uk\)](#)





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### Updated version of GMC Good Medical Practice

All colleagues should note the recent update to the GMC's Good Medical Practice (GMP), which sets out expected standards for all doctors in the UK; this came into effect on 30 January 2024 and replaces the 2013 version.

The GMP update is designed to rephrase some of the guidance to achieve the following five aims:

- Creating respectful, fair and compassionate workplaces for colleagues and patient
- Promoting patient-centred care
- Tackling discrimination
- Championing fair and inclusive leadership
- Supporting continuity of care and safe delegation

These aims are described in more details at: [Key changes to Good medical practice 2024](#)

There is also a helpful side by side comparison of the GMP 2013 guidance and the updated 2024 version, with a commentary about these changes, available [here](#).

### Update: Medical Examiner Arrangements

As colleagues will recall, the original date for implementing Medical Examiner [ME] system arrangements was April 2023, after many concerns were raised, this was ultimately postponed until April 2024, but as this date approached it became clear that reliable arrangements to ensure all community deaths were covered by local Medical Examiner Units were not in place.

The Health Minister has now announced that the statutory introduction of these changes will be delayed until 9 September, to allow "time to prepare for implementation". This means the use of the Medical Examiner system by GP practices will not be universal, and the current unsatisfactory hybrid process will continue. If your practice has been "on-boarded" by local ME Units, you can continue to refer draft MCCDs and accompanying information about the deceased to the Unit.

If your practice continues to refer all, or a proportion, of deaths to local Medical Referees, then colleagues can continue to do so over the coming months. ME units should be contacting practices not linked to their service to set up arrangements for GP referral of deaths within the community.

GPC England has contacted the National Medical Examiner, and is hoping to be able to pass on a further update shortly.





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### Update on CQC registration and portal

Due to issues with CQC's new provider portal, some providers are still unable to use it to undertake notification and registration activity. CQC is working to resolve these issues and will provide an update as soon as they are in place.

Until fixes to the portal are in place, CQC is implementing a temporary process for providers who urgently need to undertake registration activity and cannot use the portal.

Providers can continue to submit notifications via [email](#) if you are unable to use the portal.

See more information here:

<https://content.govdelivery.com/accounts/UKCQC/bulletins/396c1fa>

### Cumbria Sexual Health Service (Cumbria only)

The LMC have recently been made aware that there has been no uplift to funding regarding Cumbria Sexual Health Services for practices in 20 years. When getting in touch with Cumberland Council we have been told that they are facing financial challenges brought about by years of reducing levels of funding. Whilst they have managed to avoid any reduction in the sexual health budget, the funds will be kept at the historical tariff for the commencement of this years Framework.

The LMC have written to the Council to inform that whilst we recognise their precarious financial position, General Practice should not be bearing the brunt of this cost.

We would, therefore, encourage you to investigate whether this work is financially viable for you to continue undertaking. If it is not, we would recommend your practice to not sign up to the Framework going forward.

Please do not hesitate to [get in touch](#) should you have any questions.

### LMC Vacancies

2 out of our 5 Committees have seats available for GP representation:

- Lancashire Coastal - 5 seats available
- North Cumbria - 2 seats available

We are keen to hear from GPs, including GP Registrars/ Trainees, who may wish to get involved to represent your constituents. Please let us know if you are interested in being a LMC member or would like to find out more.

