



1. Firearms licensing

We have been told this week that Bedfordshire, Hertfordshire and Cambridgeshire constabularies will be introducing a new procedure and medical form for firearms licensing from 1st February 2020.

Applicants for a firearms licence will be asked to get a form filled in by their GP. They will be told that the GP may charge for filling in this form.

You may refuse to fill in this form under conscientious grounds. The BMA advises that you issue a signed letter if this is the GP's stance. If the practice as a whole has decided to refuse to fill in such forms under conscientious grounds, then you might want to consider having a letter to this effect signed by all the partners. BMA advice is that you should also make patients aware of GP or practice objections, e.g. by including this information on your website.

If you refuse to fill the form in under conscientious grounds, the BMA advice is that you are NOT required to find another GP who will fill in the form.

If you do undertake this work and charge for it, we would advise that you calculate the time involved in doing this work, and who is doing it, and work out a reasonable charge on that basis.

We will consult formally with LMC members on this initiative from the police and this may result in our meeting with the police if LMC members feel that this could be useful.

The BMA website has general information about firearms licensing and a number of template letters that practices could use. <https://www.bma.org.uk/advice/employment/ethics/ethics-a-to-z/firearms>.

2. UK Conference of LMCs

The UK Conference of LMCs will be on 6 & 7 May. The Conference allows LMCs to propose and debate motions which form GPC policy for negotiation on matters affecting GPs and practices.

We are calling for your ideas for motions for conference. In order for us to be able to meet the deadline for submission of motions, we need motions from you by 17 February at the latest.

A list of topics which are suitable for the UK-wide Conference, as opposed to those which are suitable for the England-only conference is available [here](#). If you have an issue for the England conference, this will be in November.

3. PCN DES Update

Following the feedback NHS England has received from practices, LMCs and CCGs, an emergency GPC committee meeting will take place on 6th Feb 2020. It is likely that the GPC negotiating team will present a revised DES specification at this meeting which the GPC members will debate and vote on. Following this meeting it is likely that a special conference of LMCs will take place, where LMC reps from across England will debate the specification, although neither the date nor format of the meeting has been agreed at this point. In between the GPC meeting on 6th Feb and the special conference we will be speaking to practices to understand their specific views on the specification and working with other LMCs to capture views more broadly via an online survey tool.

You can read NHSE's summary of the feedback [here](#).

4. BMA briefing – Impact of pension taxation on the NHS

As part of the BMA's ongoing campaign to address the current pension taxation crisis impacting doctors across the country, they have produced a briefing paper which highlights the current situation, background to the issue and consideration of possible solutions. This includes an overview of the BMA's preferred solution removing the annual allowance in defined benefit schemes, such as the NHS pension scheme. Read the briefing [here](#).

5. QOF Personalised Care Adjustments

Following the concerns raised by practices about the loss of opportunistic prompts following the roll out of the QOF changes in 2019, TPP have confirmed to NHS Digital that they will add a status flag to the patient record which will alert practices to the fact these patients may be missing QOF care as part of their roll out of v44 of the QOF business rules. This will be implemented in the next two weeks. NHS Digital will explore whether additional functionality can be added to v45 of the QOF business rules to ensure that the two invitation PCA will only come into force at the end of the reporting period i.e. 31st March.

6. New FP10 and prescriber endorsement

NHSE/I have published a new FP10 NHS prescription form with the new prescriber endorsement 'FS' for free supply of sexual health treatment – guidance toolkit [here](#). The new FP10 form is being rolled out at the end of January. Existing stocks of the old form already in the system, such as in GP practices and pharmacies, should be used up prior to use of the new form. Both forms will be accepted for processing during the transition to the new form.

The new prescriber endorsement will become live from 1 February 2020. Until the necessary changes have been made to prescribing systems, prescribers should revert to issuing paper prescriptions with 'FS' manually endorsed next to each item intended for the treatment of an STI. Where 'FS' has been added as a handwritten endorsement, for example, on a computer-generated form, this should be counter-signed in the usual way. Dispensing doctors will continue to use paper prescriptions with a handwritten endorsement. More information is available [here](#).

7. Physician-assisted dying briefing

In February, for the first time, the BMA will be surveying their members to inform a debate at the annual representative meeting (ARM) on physician-assisted dying. To make sure you don't miss out, please check that your contact details with BMA (if you are a member) are up to date (including your preferred e-mail address) and that you have 'opted-in' to receive membership updates from the BMA. To find out more about what we're doing and why, and to download the briefing pack before you take part, visit www.bma.org.uk/PAD.

8. DWP end of life survey (UK)

The Department of Work and Pension is undertaking an evaluation looking at how the benefits system supports those nearing the end of their lives, as part of this they have published a survey to collect information from clinicians on this issue. A similar change has already occurred in Scotland – these impacts on GPs and any hospital doctors involved in terminally ill patients. The results from this survey will help support DWP in making decisions around how best to support claimants nearing the end of their life and provide valuable insight into how clinicians across the UK feel about the current system and where they think it can be improved. Take the survey [here](#).

For up to date news, information and events, please visit our website www.bedshertslmcs.org.uk