



## Beds & Herts LMC Ltd: Weekly Update for Practices, Monday 26<sup>th</sup> July 2021

### 1. DDRB pay uplift

Richard Vautrey, Chair of GPC writes: "The BMA is hugely disappointed by the [Government's announced 3% pay uplift for doctors](#). As we have come to expect from this Government, this announcement is not all that it seems. For salaried GPs, a 3% uplift is more than the 1% the Government recommended at the beginning of the year and is the highest uplift they have received in many years. However, 3% does not compensate for the years of pay erosion experienced by all doctors. Moreover, the government has said that practices in England will not be given additional funding on top of the 2.1% for staff already allocated for this year which means GP partners could be faced with deciding between service cuts or being able to pay the full amount to salaried GPs. It is therefore not acceptable and disingenuous to speak of an uplift while refusing to provide the necessary funding. We have made our grave concerns known directly to the Secretary of State for Health and Social Care.

In their evidence DHSC highlighted the 'vital role' that general practice had played in the pandemic response and the DDRB underlined the critical importance of general practice and primary care more generally. In acknowledging the contribution of all doctors in the pandemic response, the DDRB also urged ministers to consider additional recognition for groups outside of their remit for this year, including GP contractors. Salaried GPs were roundly praised for their work throughout the pandemic and their adaptation to ensure the continued success in their role, including the utilisation of technology. It is worth also noting the announcement that GP trainer grants will increase from £8,584 to £8,842 and GP appraiser fees will increase from £543 to £559. These will be backdated to 1 April 2021.

What's clear is the government in England have completely and shamefully ignored the incredible response made by GP partners and their teams during the pandemic, suggesting that this year's pay award was to recognise the role played by other NHS workers. This will further damage GP morale and demonstrates that the Government does not value general practice as it should. The Government chose to ignore the DDRB's clear statement that pay awards needed to be appropriately funded in order to avoid 'a negative impact on service provision'.

Read more in my joint [blog](#) with the Sessional GPs committee chair Ben Molyneux about what this means for GPs."

Read the BMA statement [here](#)

### 2. Easing of COVID restrictions and infection control

From 19 July, the [COVID-19 restrictions in England have been eased](#) in line with the government's roadmap.

Following this announcement, NHSE/I has published a [letter](#) that confirms that the existing COVID-19 [Infection Protection and Control guidance](#) continues to apply in healthcare

settings, and that contractors will continue to have NHSE/I's support in enforcing the IPC guidance.

The following provisions will continue under the [Pandemic Regulations](#) until 30 September 2021:

- A suspension of the requirement for practices to report about the Friends and Family Tests.
- A temporary suspension of the requirement for individual patient consent in certain circumstances, to encourage increased use of electronic repeat dispensing (eRD).
- A continuation of the temporary increase in the number of appointment slots that practices make available for direct booking by 111, up to one slot per 500 patients per day, although we believe that for most practices 1 per 3000 in line with the core contract should be sufficient.

NHSE/I also confirm that the [Standard Operating Procedure for general practice](#) that has been in place since March 2020, has been withdrawn from 19 July 2021. This is something that GPC had been calling for, on the basis that it is for practices to determine how they manage their working arrangements, access and consultation delivery and each practice will know what works best for them.

Practices can download the GPC [poster](#) to display about the continued use of face coverings for healthcare settings. See more information and guidance on PPE for practices in the GPC's [COVID-19 GP toolkit](#).

The BMA is supporting NHS Confederation's new campaign [#NotTooMuchToMask](#), encouraging people to continue to consider both their own and the safety of others as the restrictions lift by continuing to take sensible precautionary measures. Read their [tweet](#)

### **3. Releasing NHS staff from isolation to work**

The [Government has announced](#) that double vaccinated frontline NHS and social care staff who have been told to self-isolate will now be permitted to return to work ahead of the self-isolation period - if there is a risk that staff absence would lead to potential patient harm, and following the completion of a local risk assessment and a number of safeguards are implemented.

The LMC is seeking to work with our local CCGs to see how this can be safely and appropriately implemented. Practices are reminded that this is voluntary and should only be used in exceptional circumstances. Any staff who decline to return should not be adversely impacted financially and there should also be a focus on better provision of remote working alternatives wherever possible.

Maintaining staffing levels when many have to self-isolate is having a big impact on some practices so there does need to be some sensible local flexibility in the way this is applied across an area, and practices need quick answers when seeking to apply it.

Read the [NHSE/I guidance for allowing essential frontline staff to return to work](#).

Read the [BMA's response to the staff isolation exemptions](#)

#### **4. GDPR delay – joint statement and letter to GPs**

The Parliamentary Under Secretary of State for Health, Jo Churchill, has [written](#) to all GPs in England, setting out plans for the next steps for the [GDPR](#) (GP Data for Planning and Research) programme and extending the timeframe indefinitely beyond 1st September.

The BMA and RCGP (Royal College of General Practitioners) have been closely involved in discussions over the steps that are necessary before any data collection can commence under GDPR, and welcome the commitments made in these latest plans.

The BMA has always recognised the crucial role that GP data has to play in research and planning which can improve public health but has made it clear that it is important for patients and the public that this data is only made available for appropriate purposes, and in a secure and trusted manner and with minimal administrative burden on the profession.

Read the full joint statement [here](#)

Read the press statement by Farah Jameel, GPC England executive team IT lead, [here](#)

#### **5. GP Payments and pensions system provided by PCSE**

GPC wrote to NHS England last month to raise their concerns about the new system and demand urgent action to ensure that GPs and practices are able to use the system as intended. They have now received this [response](#) which maintains the line that the issues raised are merely expected 'teething problems'. PCSE say that they are gradually putting 'fixes' in place for many of these issues, most of which GPC would consider to be solutions to problems that would not have arisen if user testing had been more thorough.

GPC continues to engage with PCSE in pursuit of solutions to outstanding issues as well as relevant data to allow performance to be measured. GPC says that it will continue to do so for as long as is necessary. In addition to the survey for GPs currently running (see below) GPC is looking to survey practices in early September to capture your experiences of using the system in August, the third month of its use. GPC believe that both surveys will be invaluable in helping them to hold PCSE to account.

[Tell GPC your views on the new PCSE pensions portal](#)

If you are a GP working primarily in England, please [fill in the GPC survey](#) on the new system so that the GPC has further evidence of the full extent of the issues and can hold PCSE to account. Please note that this survey is not a forum for individual issues – please [raise these with PCSE directly](#).

**Updates** - If you have missed any of our regular bulletins for practices, please visit the [Weekly Updates](#) section of our website.

**BHLMC Job Board** - Advertise your practice vacancies with us on our Job Board on the website [here](#). If you are interested in posting an advert please contact [lmcadmin@bhlmc.co.uk](mailto:lmcadmin@bhlmc.co.uk) for more information.

**Locums** - If you are a Locum and would like to receive mailings and updates from Beds & Herts LMC Ltd please register via the [online form](#) and we can add you to our database.

**Wellbeing for GPs:** [Visit our webpage](#).

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