

CLMC Bulletin 409 – 17.12.19

Legal Action Against NHS Property Services

[This letter](#) from Gaurav Gupta, GPC Premises policy lead, provides an update regarding the BMA's legal action against NHS Property Services.

Annual Allowance Tax Charge

The BMA has now fully considered the proposals from NHS England and Improvement to provide emergency mitigation for clinicians that incur annual allowance tax charges in 2019/20 and welcome their short-term plans to tackle the NHS pensions crisis, but have made it clear that further assurances must be made for GPs.

It is essential that doctors working in primary care are covered by these proposals. NHSEI has committed to ensure that is the case and the BMA will work with it to ensure a solution is found to provide similar guarantees for GPs. Read the [BMA statement](#) and the NHSEI FAQs [here](#).

Final Pay Control Regulations for Pensions

The [final pay control regulations](#) were introduced from 1 April 2014 to protect the pension scheme from the costs that arise where an employer awards an exceptionally high pay rise to a member of the 1995 section of the NHS Pension Scheme, to achieve an inflated pension benefit. Under the 1995 Section of the NHS Pension Scheme, a scheme member's pension is calculated using their highest salary in their final three years of pensionable service. As a consequence, a member who has a significant pay increase in their final three years will receive a substantially larger pension than they would have received without the pay increase. Practice partnerships, as employers, can receive final pay control charges if they award a pay increase that exceeds the allowable amount.

Since the introduction of the regulations, a number of exemptions have been introduced to stop employers receiving a final pay control charge for awarding significant pay increases for genuine reasons. These recent exemptions include:

- pay increases that are necessary to comply with the national minimum wage and living wage
- nationally agreed annual pay awards for Agenda for Change employees

The BMA has been working with other trade unions, NHS Employers and Department of Health and Social Care to ease these regulations and allow for a far less strict interpretation of the regulations. As a result they hope to see developments in the near future that will increase the allowable amount, add further exemptions to the final pay control regulations, and allow more discretion in the regulations and restricting the payment of charges to being pursued above a certain minimum level. Practices should discuss the issue with their accountants. Please note that this does not relate to GP partners but to final salary scheme doctors.

Updated Additional Roles Reimbursement Scheme Guidance

GPC have been encouraging practices to transfer Clinical Pharmacists from previous schemes to the new PCN ARRS scheme, as this will be to the benefit both of those practices and their PCN in the long term. As there are still some practices yet to take the necessary action, they have requested that the deadline to make this change be changed and we are pleased, therefore, to have agreed with NHS England that this will be extended to 31 March 2020. In order to reduce future risk (of including these Clinical Pharmacists in the baseline) for all members of PCNs, GPC advise that practices seriously consider transferring any CPs on the previous national schemes.

This extension to the deadline, and the information about funding for covering management fees for subcontracts for Social Prescriber Link Workers have been included in the latest update to the [ARRS guidance](#) and can be found at para 2.3.6 page 9 and 2.3.1 page 5 respectively.

PCSE Online Update

The new [PCSE online service](#) for submitting Performer List (PL) applications and changes is now live and replaces the old paper forms. Every doctor on the PL will receive an email requesting that they set up their own PCSE online account and it is expected that all GPs to have received their invitation by Christmas 2019. This will enable GPs to check their details are correct and provide access to the new online system to make changes.

The email will be sent to the same email address used for professional communications with the GMC - any amendments to this email needs to be made via GMC online. However, the vast majority of GPs should receive an invitation from PCSE.

All GP practices will be sent a letter to their CQC manager, detailing how to register the practice for PCSE online. Only 20% of practices have so far registered; it is vital for the majority to register, as otherwise the system will not work efficiently. Historically we have seen significant problems arising by such delays, particularly affecting appropriate pension deductions and prescribing numbers, so it is worth checking that your practice has registered.

It is prudent to remind individual GPs that regulations require that a performer informs NHS England of change of status and details. Changes to contractual status also requires notification by the GP and confirmation from the practice and finally contract changes by NHS England, so both practices and individual doctors should sign up to PCSE online.

The new system will allow all GPs to check their details are correct, so it is worthwhile to log in to check the details, given the inaccuracies in the present list. There will inevitably be teething problems, but GPC is in regular contact with PCSE, so please do highlight any issues to GPC by emailing info.gpc@bma.org.uk so they are aware and can work with PCSE to resolve problems.

PCSE have provided us with the following links to comms that should have reached you or will be in your inbox shortly:

[Communication sent out to all GP practices](#)

[Welcome email sent to the next group of GPs](#) (this is being done in stages):

NHS 111 Data Sharing Agreements

GPC have had queries from practices regarding NHS 111 asking practices to sign Data Sharing Agreements in order to gain full access to patient health records via GP connect. As you are aware under the 2019/20 GP contract, practices are obliged to make available one [appointment per 3,000 patients per day for NHS 111](#) (1 per 2000 in the GP LIS in our area) to book directly into practice appointments. This is provided that the functionality and governance exist. GPC have been informed that some practices have been sent DSAs by NHS 111 providers to enable direct booking. GPC understanding is that a DSA is not necessary for the purposes of assigning an appointment only as it does not require access to the patient's medical record and NHS 111 appointment booking contract agreement is not an agreement for NHS 111 to access medical records.

Furthermore, DSA is not required when one independent data controller (i.e. NHS 111) is sharing personal data with another independent data controller (i.e. the GP practice). This also reflects usual practice in the health service when data are continuously shared between primary and secondary care for direct care purposes, such as referrals, without the requirement for a DSA. GPC have raised these concerns on a national level and once they have further clarity will share this with practices.

BMA Letter to the Prime Minister

Following the general election, BMA council chair, Chaand Nagpaul, has written to the Prime Minister calling for decisive action from the new Government to tackle the NHS pressures and deliver real change for staff, patients and services. Read the letter to Boris Johnson and BMA comments [here](#).

GP Shortages

An [analysis by the TUC](#) has shown that the number of GPs has fallen by nearly 1,000 since 2015 despite rise in demand. In response to this Richard Vautrey, GPC, said: "There are simply not enough GPs to meet demand and guarantee safe, quality care. Despite pledges to increase numbers, we've seen the exact opposite." Read the full statement [here](#).

Primary Care-Based Opioid and Pain Review Service

A small study published in the [British Journal of General Practice](#) has shown that one-to-one pain service in general practice was successful in reducing opioid use in 40% of patients, cutting GP consultations and improving health and wellbeing. In response to this, Krishna Kasaraneni, GPC England Executive team member said: 'It's important that patients affected by prescribed drug dependence have access to the care and support they need, and the BMA has been working with stakeholders for some time now to identify ways to do this. As part of this, we welcomed Public Health England's review earlier this year, which recommended the need for a national helpline and commissioned support, as well as evaluations of existing services of the type examined in this study.'

GP Pressures

General practice is facing a larger than ever burden of appointments from an increasingly complex patient population, with resources and workforce levels not keeping pace with demand. This is impacting on GPs, other members of the practice team and on patients and has been one of the central debates in the general election campaign. [BMA analysis](#) of the latest data highlights how appointment and patient numbers, GP appointment wait times and workforce numbers are faring in the face of increasing pressures across the health system.

BMA Presidential Essay Competition

As part of the President's project this year, the BMA has launched an [essay competition](#) on the theme of 'justice and fairness in medical practice and policy', with a £4000 prize. The competition is open to all UK residents who are not representatives or staff members of BMA or BMJ. Entrants are asked to submit a 100 word abstract, and those shortlisted will be invited to write a 5000 essay. The deadline for submitting abstracts is 30 January 2020. Read more in a [blog](#) by the BMA president, Professor Raanan Gillon.

Disability Survey

What is it like to train and work as a GP when you have a disability or long term physical or mental health condition? What are the key challenges you face, and how could you be better supported? Disabled doctors and medical students are a valuable part of a diverse medical workforce. The BMA is committed to improving the support that it provides to doctors at all stages of their careers. They particularly want to hear from GPs on this important issue to help them better represent you. Please fill in this short, anonymous [survey](#) and tell the BMA your views.

Committee Visitors Scheme for GPC Meetings

The BMA committee visitors scheme allows interested parties to participate as non-voting committee member of GPC, with the opportunity to attend meetings and take part in discussions. If you have not participated in BMA work before the scheme is an excellent opportunity to gain experience of what it is like to serve on a committee and contribute to the future of your profession. For further details, please visit the [BMA website](#)

GPC Newsletter

Read the latest GPC newsletter [here](#).