

## **CLMC Bulletin 419 – 17.03.20**

### **Pensions**

For over 18 months the BMA has been raising significant concerns over the impact of punitive annual allowance tax charges facing senior doctors across the NHS. The announcement from the Chancellor in the Budget Statement of an increase in the threshold income of all workers to £200,000 (or £240,000 adjusted income) demonstrates that the Government has listened to their compelling evidence. However, it is not everything the GPC have asked for; they fundamentally believe that the annual allowance is unsuited to defined benefit schemes such as the NHS and many doctors with incomes far below the new threshold income will face tax bills as a result of exceeding the standard annual allowance, which remains set at £40,000. However, the fact that Government has committed to significant taxation reform demonstrates that the campaigning on behalf of members has been effective and delivered an outcome that will help the majority of doctors.

Separately NHSE/I have, after persistent pressure from GPC England, written to all GP contract holders and performers of primary medical services under GMS, PMS and APMS contracts (including Type 1 and Type 2 Medical Practitioners and Freelance GP Locums). [This letter](#) gives eligible clinicians assurance that they can undertake any combination of clinical roles for the NHS during the 2019/20 tax year without suffering any financial loss as a result of the annual allowance pensions tax, subject to using the Scheme Pays mechanism. This includes any additional work related to the response to coronavirus. It is important that you understand how pension taxation affects you. You can find information and guidance on the [BMA website](#).

In the coming days GPC will be considering their full response to the Government's announcement and raising those issues on your behalf that remain unresolved. For GPs it is essential that information about their pension is provided in a much timelier manner so they have the confidence that they will not be penalised for doing more work.

### **Submission of Estimates of Pensionable Earnings**

NHS England have advised that a proportion of practices have still to submit the mandatory 'NHS Pensions - Estimate of GP and non-GP Provider NHS Pensionable Profits/Pay: 2020/21' forms. As the 1 March 2020 deadline for submission has passed, practices are advised to complete this as soon as possible. PCSE have been advised by NHS Pensions from April 2020 to deduct the contributions at the 14.5% maximum tiered rate regardless of previous contribution rates if they do not have the estimate. This will impact on practices resulting in the higher deductions being made. Forms are available from the NHSBSA [website](#) and via PCSE [online](#)

### **PCN Guidance**

An updated version of the [PCN handbook](#), taking into account the 2020/21 contract agreement, has now been published, as has the first PCN scenario, based on a four practice PCN in the South West, [here](#) (in the PCN section). Further real-life PCN scenarios will be published in the coming weeks.

### **Special Conference of English LMCs**

The special conference of English LMCs was held last week to discuss the outcome of negotiations and the contract agreement. The motions at the special conference focused on a wide range of contract related issues, including pay transparency, partnership incentives, fellowships, premises, vaccination payments, continuity of care, out of hours care, care home premiums and the future development of PCNs. There was also an important themed debate on the ARRS with motions being passed by the special conference on this area. An emergency motion was also agreed on the response required to support practices during the developing covid-19 pandemic. GPC England will consider how to take the resolutions forward. The conference resolved that a survey of the profession should be done to get feedback on whether practices intended to sign the PCN DES, and this is something GPCE will be trying to do as soon as practical. Read the resolutions [here](#), and access the agenda [here](#) (in 'Conference' tab). A recording of the event is available using this [link](#).

### **NHSmail for Locums in England**

We are pleased to announce that [NHSmail for locums in England](#) was launched on last week after lengthy lobbying by the GPC and Sessional GPs committee. Benefits of having an NHSmail include being able to share patient data with NHS colleagues and allowing locum GPs to be added to local distribution lists such as those run by CCGs. This will enable locum GPs to keep up to date on local, regional and national issues. If you are a GP locum in England, you can now apply for an NHSmail account by completing this [form](#).

### **Serious Shortage Protocol for Fluoxetine 10mg Tablet**

A Serious Shortage Protocol (SSP) for fluoxetine 10mg tablets came into effect today, with an expiry date of Friday 12 June 2020. The SSP will enable community pharmacists in England, Wales and Northern Ireland to supply patients with fluoxetine 10mg capsules. Read more [here](#)

### **Patient Liaison Group Vacancy**

The BMA's Patient Liaison Group (PLG) is looking to recruit one new doctor member on a voluntary basis for a 3-year term commencing in July 2020 and would welcome applications from a diverse range of backgrounds. The individual will have an active interest in influencing health policy and working to improve patient care. Please note, the new doctor member can't be an existing member of a BMA committee. If you are interested in applying, read more on the [BMA website](#)

### **GPC GP Bulletin**

See the last GPC bulletin [here](#)