

CLMC Bulletin 381 – 02.04.19

GP Contract & Roadshow Slides

The 19/20 GMS Directions have now been published alongside a suite of other material. You can find the details via the links below. CLMC also hosted a well-received GPC/LMC Roadshow on Thursday 28 March. The feedback has been incredibly positive so we hope to repeat this in future years. There were a number of questions and answers on the evening and we are currently collating these to be circulated shortly. In the meantime, please see the [slides](#) from the presentation for your reference.

[Contract Directions and SFEs](#)

[Direct Enhanced services and QOF](#)

PCN Documentation and Clinical Director Forum

As promised a suite of documents relating to the PCN element of contract changes were published on 29 March. The BMA (GPC) and NHS E have worked together to draft these documents which include guidance, DES service specification and PCN agreement, alongside other key documents which can then be found via the links below:

- [Network Contract Directed Enhanced Service \(DES\) Specification 2019/20](#)
- [Network Contract Directed Enhanced Service \(DES\) Guidance 2019/20](#)
- [Network Contract Directed Enhanced Service \(DES\) Registration Form](#)
- [The Network Contract DES and VAT Information Note](#)
- [Mandatory Network Agreement](#)
- [Network Agreement Schedules](#)

To further support emerging PCNs, GPC has set up a forum to support GPs who are considering becoming Clinical Directors in primary care networks. We would encourage all GPs doing this to join the BMA's PCN forum where you can engage with others in the same situation to share ideas and suggestions as well as to help resolve emerging issues. Register to join the forum [here](#)

From a local perspective, all practices/PCNs who wished to access the CCG early incentive payment submitted their forms by the 31 March. As you will see, this jumps us to clause 2.6 of the specification; the point at which the commissioners confirm and approve all Network Areas in a single process. The specification allows for a 2 week period for this to happen. We anticipate this to be the process that the CCGs will undertake for the next 2 weeks given the early submissions from practices.

The specification very clearly states that it is anticipated this will take longer where 100% coverage is not achieved and clause 2.10 and 2.11 are very clear that commissioners and LMCs will work closely to resolve any issues. We will request a meeting with both CCGs to move this forward as quickly as possible for practices, where required, but it would be incredibly helpful if all PCNs could provide CLMC a copy of the form they submitted in advance of any discussions in order to assist us in supporting you. Please email your forms to janice.foster@nhs.net.

State Indemnity

On Monday, 1 April 2019, following successful negotiations by the BMA, the Clinical Negligence Scheme for GPs (CNSGP) will be launched, meaning that GPs in England and Wales will finally be released from the burden of rising indemnity costs, gaining equality with their hospital colleagues and removing a major barrier to recruitment and retention. Read the blog by Mark Sanford-Wood, GPC England deputy chair and indemnity lead, containing the latest information [here](#).

Revised Primary Care Allocations

NHS England has published a [letter outlining revised CCG allocations](#) 2019/20 to 2023/24 as part of the funding changes to the GP contract, due to the introduction of the new centrally-funded Clinical Negligence Scheme for General Practice which will start from April 2019.

Tier 2 Visa Sponsorship

As you will be aware, a few years ago CLMC tried to assist practices in getting ahead by providing training in and CLMC funding for Tier 2 Sponsorship applications to assist with the recruitment difficulties we faced and in anticipation of the national need to intervene with international recruitment. Some of these sponsor 'licences' will now be drawing to a close but we are delighted to say that NHS E are picking up the mantle to financially support the practices in become sponsoring organisations and more information is available [here](#).

Further to this, GPC England has been supporting NHS England and HEE in adding general practice to the Shortage Occupation List. The number of international graduates working in the NHS continue to drop and there are colleagues who have to return to their country of origin if there is no appropriate sponsoring organisation to support them, so the more practices that can get involved in the process, the better. Trainees are covered for their time in training via HEE who act as the sponsoring body.

Public Health Funding

The BMA published [a report](#) this week urging the Government to end the squeeze on public health spending, calling for a more comprehensive approach to improving the population's health in the upcoming Green Paper on preventative healthcare. Commenting on this to GP online, Richard Vautrey, GPC Chairman, said: "GPs across the country have had to contend with the reduction in public health commissioned services and this has had both an impact in practice workload as well as leaving many patients with poorer access to the services they need. This has been particularly the case for smoking cessation, sexual health and drug and alcohol services. The reduction in services and limited capacity can only mean more costs for the NHS in the long term and more health problems for individuals that could have been avoided."

Return to Practice

NHS England and Health Education England (HEE) have launched a new campaign, backed by the BMA, to encourage GPs to return to practice, with [a new web portal](#) for any GPs looking to express their interest in returning. The campaign will promote the Induction and Refresher (I&R) scheme through a digital, social media and print advertising campaign detailing the improvements that the NHS Long Term Plan promises to deliver for general practice. The scheme has so far attracted almost 800 GPs into coming out of retirement, returning to the profession after taking a break or working in another occupation, or moving from overseas.

NHS E Primary Care Website Closure

The NHS England primary care website www.primarycare.nhs.uk closed as of 31st March 2019 and all practices registered with them have been notified. The message advised practices where they need to re-register to new websites where services will continue to be provided as from 1 April. There will be no changes to the data indicators/methodologies or data collections, it is only a move to a new technical system.

General Practice Indicators (GPI) – is moving to a new website: www.primarycareindicators.nhs.uk where practices can register to use from 1 of April, and the GPI indicators will be visible within from 1 May 2019.

LMC UK Conference

The conference resolutions have now been published and are available, along with the webcast and speeches, on the LMC Conference [webpage](#).

Sessional GP Subcommittee Elections 2019 – Nominations Open until 18 April

Elections for all sixteen seats of the Sessional GP Subcommittee are taking place online for the 2019-22 subcommittee. Nominations are open now and will close at 12pm Thursday 18 April 2019. Please encourage sessional GPs in your practice to stand for election and get involved in the work of this important committee. To participate in the election, please login to the BMA's elections [webpage](#). Find out more [here](#).

Gender Pay Gap

An update from the Government's review into equal pay in the health service found that male GPs in the NHS earn 33% more than female GPs despite the fact that 54% of GPs are women. The findings also revealed that across the health service, male doctors were paid £1.17 for every £1 female doctors earned while men dominated the highest-paid specialties like urology and surgery. Helena McKeown, GPC member and BMA representative body acting chair, said it was "fantastic" that women were choosing medicine as a career but that more must be done to achieve equal pay. Zoe Norris, Sessional GPs subcommittee chair, also said "Assuming that the review is comparing like for like, I think is surprising and shocking and really disappointing. There is no excuse for that gap, a GP is a GP, and from the day we qualify we are doing that job. Gender should not make a difference, and if it is then I just think that is inexcusable. I would encourage all colleagues to look at what they are earning and talk openly about it with their colleagues, and make sure this is not happening."

Calling GP academics

Following concerns expressed about the pay progression of GP academics, especially post-CCT, the BMA's research team is keen to have an exploratory meeting with those interested in the issue. If you would like to take part, please email info.masc@bma.org.uk

GPC Newsletter

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

GPC Sessional GP Newsletter

Read the latest Sessional GP newsletter [here](#).