

Dear Colleagues

### **PCN development**

You will be aware that most of the nearly 7000 GP practices in England have taken up the PCN DES. This wouldn't have been possible without the LMCs supporting practices locally to forge relationships and facilitate some very tricky conversations between practices. So, firstly, thank you to the LMC officers and staff for making it happen.

Acknowledging that this is the first step in this process, and that PCNs will continue to develop over time with Clinical Directors' leadership, the BMA has been developing a package of support for Clinical Directors and PCNs. Prior to launch later this month, we wanted to provide LMCs with some information about what it will include, to support PCNs in choosing their support for their own development.

The package will consist of:

- **Learning and Development** tailored to the role of PCN Clinical Directors: Three half day face-to-face masterclasses on strategic planning, workforce planning and leadership; two e-learning modules focusing on leadership and management and quality improvement (plus access to >25 other modules); 15 webinars including 'hot topic' themes chosen by clinical directors; career coaching
- **PCN App**: a space for all PCN Clinical Directors to have discussions in different groupings (by LMC, CCG, region and also a national group), free of charge. LMCs can also opt to join the App
- **National PCN Conference**: content will be developed based on what clinical directors tell us what their needs are and what they want to hear
- **HR support and advice**: added to the current BMA membership offer tailored to the new PCN landscape
- **Legal advice from BMA Law** at preferential rates for BMA members
- **Insurance and indemnity, audit and advice** at preferential rates for BMA members from Lloyd & Whyte

### **BMA briefing paper on no-deal Brexit**

The BMA published a briefing paper this week, entitled "[A health service on the brink: the dangers of a 'no deal' Brexit](#)", where we outline how a departure from the EU without an agreement could ravage the NHS, leaving no area of healthcare untouched. The report warns that the NHS faces the double whammy of the impact of a 'no deal' Brexit as well as coping with the expected winter crisis. The BMA Chair of Council, Chaand Nagpaul, said: "Cancelled operations, missed cancer treatment targets and patients in corridors waiting for hours on end to be seen; recent winters have seen unprecedented scenes unfold in our hospitals, GP surgeries and across the NHS, with patients suffering and staff under increasing pressure as resources and capacity struggle to keep up with rocketing demand. Add to that chaos a 'no deal' Brexit, and the disintegration of the health service becomes an ever more real prospect."

Read his full statement [here](#).

This was reported by [Mail Online](#), Daily Mail (print), Times (print), the Daily Telegraph (print), [ITV News](#), [Metro](#), Mirror (print), [the BMJ](#), [Pulse](#), [Huffington Post](#), [Al Jazeera](#), [GP Online](#), [Practice Business](#), [Medscape](#), the [Scotsman](#), and the [National](#). David Bailey, GPC member and BMA Wales council chair, was interviewed by ITV News about medicine supply and shortages – watch it [here](#) (7 mins in).

## GP pressures

Following on from the [BMA's analysis of the pressures on the NHS](#) in England, we are presenting more detailed figures specifically relating to GP pressures on a monthly basis. The key figures for July are (based on [NHS Digital data](#)):

- The total number of appointments at GP surgeries in England was 27,010,000 in July 2019, a 7.7% rise on the previous July.
- The total number of patients rose by 732,000 from last July to 59,911,000, which leaves each fully qualified GP responsible for an average of 2120 patients. An extra 68 patients each compared to last July.
- Despite delivering an extra 771,000 same day appointments this July, 17.4% of appointments recorded involved a wait of over 2 weeks, up from 15.6% last July. The number of appointments involving a wait of over 28 days were up 25% on last July to 1,216,000, and 31.2% of appointments involved a wait of over a week
- The 2019 [GP patient survey](#) found that only 3.8% of respondents wanted an appointment with a week or more wait.

The latest data on appointments in general practice shows the continuing trend of rising demand, with patient numbers and appointment numbers up. This pressure is worsened by the loss of 576 fully qualified GPs as compared to last year, leaving each GP with a greater workload.

The workforce pressures were also reflected in the [annual GP earnings and expenses report 17/18](#), published last week, to which I commented "These figures suggest that years of repeated, real-terms pay cuts for GPs are starting to be reversed. However, while earnings may have gone up, the number of doctors continues to fall, with the NHS in England losing more than 800 partners alone over the same period. As patient demand rises and the workforce gets smaller, GPs are taking on more work – often in excess of their contracted hours. This places a huge amount of strain on GPs, who are putting their own health and wellbeing at risk to ensure their patients get the best care possible."

## Healthcare insurance needed in EU after Brexit

The Department of Health and Social Care has updated their guidance '[Healthcare after Brexit: visiting the EU, Norway, Iceland, Liechtenstein and Switzerland](#)', which warns anyone travelling to EU countries that they will need travel insurance, and informs patients with pre-existing health conditions to 'speak to your GP and insurer about how to get the right cover and how this affects your travel'. In response to this, Farah Jameel, GPC England Executive team member commented to GPonline that the government advice was another example of poor planning around Brexit, and that "it was not right that the government should expect GPs already working under significant pressure to bear the brunt of poor planning - and warned it was simply not the role of a GP to provide advice on appropriate travel insurance." Read the full story in [GPonline](#) and [Pulse](#) (subscription required)

## Prescription drug dependency - online pharmacies

[The Sunday Times](#) reported on the easy availability of strong prescription-only medications on fraudulent online pharmacies run by overseas criminal gangs. Other drugs were not licensed for use in the UK, and many were counterfeits. Undercover reporters were able to order five types of medicines that should not be dispensed without a prescription, including versions of tramadol and Xanax for about 80p per pill. Responding to this, Farah Jameel, GPC England Executive team lead for prescribing commented: "That people are able to get hold of such potent — and potentially dangerous — medications so easily from unregulated websites is extremely disturbing. In some cases, the drugs are not licensed for sale in the UK, and, even worse, others are completely fake, meaning those taking them have no idea what they are putting into their bodies."

Read the story in [The Sunday Times](#) (subscription required)

### **LMC Conference England – submitting motions**

A reminder that the deadline for inputting motions for the LMC England Conference is **Friday 20 September 2019 – submit** via [this link](#). Before inputting your motions you will need to ensure that you have the correct email address registered on the database and know your username and/or password. If you have any questions about this, please contact Karen Day ([Kday@bma.org.uk](mailto:Kday@bma.org.uk)).

The chair of the Conference Rachel McMahon, and Nimish Shah of the Sessional GP Committee, have written a blog from a sessional GP perspective on writing motions for the LMC conference. Read the blog [here](#).

The [registration form](#) for representatives by **11 October 2019**. More information is available on the [LMC Conference webpage](#).

### **The Primary Care (GP) Digital Services Operating Model 2019-21**

NHS England has published [Securing Excellence in Primary Care \(GP\) Digital Services](#), which outlines the Primary Care (GP) Digital Services Operating Model for 2019-21, setting out the commissioning framework for the provision of high-quality general practice digital services. The model embeds the GP IT Futures Framework, nationally commissioned digital solutions and Primary Care Networks, addresses the challenges for digitally enabled general practice and will be supported by a new CCG Practice Agreement. Read more [here](#)

### **New Medical Director for Primary Care in England**

I would like to congratulate Nikki Kanani, who has been appointed the new Medical Director for Primary Care for NHS England and NHS Improvement, after having held the role as Acting Director since last summer.

### **Survey of CCGs on PCN service specification development**

NHSE are planning a short survey of CCGs in the next couple of weeks on the services they may have locally commissioned which are in the same territory as the five PCN service specifications due to go live next year. The aim is to get some further examples of local good practice that can help inform national service specification development over the coming weeks. This should not involve LMCs or PCNs and the data is gathered directly from the CCGs.

### **Wellbeing campaign conference**

The BMA is holding a wellbeing day conference on 8 November 2019. The event is an opportunity to acquire tools to support your personal wellbeing and professional fulfilment, as well as that of your colleagues. It will provide an opportunity to learn, in supportive interactive sessions, the five steps to mental wellbeing as recommended by the NHS – *connect; be active; keep learning; give to others; be mindful*. Note that this event is for BMA members only. Read more about the event [here](#).

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

Have a good weekend

Krishna