



March 2020 Edition



Keeping the nasties at bay!

**Editorial by Dr Nick Rogers,
Vice-Chair at Kernow Local Medical Committee**

Spring is almost upon us, thank goodness we are almost out of flu season.....

I personally have never seen more media interest in any flu epidemic before and I guess that's because COVID-19 is new and we don't know really what to expect, apart from its coming, but we just don't know how deadly! Best to be prepared – in Falmouth we have dug a moat and filled it with lime to keep the nasties at bay.

Speaking of which, you will all be aware of the new specifications agreed for the PCN DES for 2020-21. The draft specifications went down as well as the proverbial fart in a spacesuit and were roundly and

correctly rejected by Cornish GPs and throughout England. This gave the General Practitioners' Committee (GPC) negotiators a real mandate to go back and fight for a workable deal. It is truly one of the oldest negotiating tactics in the world to offer something ridiculous and then to 'back down' and let the other side feel as if they have made real gains. We wouldn't be that naïve surely? At first sight, the revised specifications seem much more reasonable, with some of the real sticking points removed (GP ward rounds in care homes).

But a more in-depth [analysis](#) by Berkshire, Buckinghamshire and Oxfordshire LMCs shows the financial risk that PCNs are placing themselves in. I, for one, will be having a long chat with the other practices in my PCN before we commit!

I and Dr Trevail – aka Dr Trivial – and Emma our CEO will be heading up to London town for a Special Conference of England LMCs to debate the agreed new contract and DES for PCNs on Wednesday, 11 March. It should be a lively debate – if you have anything you wish us to discuss while we are up there please email me via admin@kenowlmc.co.uk

General Practitioners Committee (GPC) Roadshow in Cornwall – final chance to register

Places are filling up fast for this month's General Practitioners Committee (GPC) Roadshow in Cornwall outlining the reformed GP contract – around 70 local GPs and Practice Managers have already registered.

The event will take place at [St Austell Conference Centre](#) on Monday, 16 March, from



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7-9pm, with Dr Mark Sanford-Wood, Deputy Chair of GPC England, presenting. There will be opportunities to ask questions. The agenda will be circulated shortly.

GPs and Practice Managers are asked to confirm their attendance to rich@kernowlmc.co.uk by noon on Tuesday, 10 March, for logistical reasons – 100 places are available on a first come first served basis.

Thanks to those who have already registered – your place has been reserved.

The LMC is grateful to Dr Bruce Hughes, GPC Representative for the Cornwall and South West Devon regional seat, and Dr Mark Sanford-Wood for helping to secure this event in Cornwall.

More information about the GP Contract Agreement is available [here](#).

Plea from the Coroner

The daily moving virus goalposts are keeping us all entertained and already two practices Up Country have been “closed” for a 14-day period due to potential staff exposure. This is a rather extraordinary situation, which is difficult to place in a contractual or professional context. Clearly if Public Health tells you to stay at home then, them’s the rules, although you will presumably still be being paid to provide general medical services. However, it does present some obvious problems for your patients and the function of normal general practice. One specific concern that has been raised with the LMC by the Coroner is when a patient of a closed practice dies and there is no one for the Coroner’s Officer to contact. Who is going to sign the death certificates and other paperwork? This may become quite a pressing issue if there is an associated increase in mortality rate.

If we move out of the containment and delay phases this will be less of a problem, but it might be worth having a think as a partnership (and network) about how you could provide some form of remote assistance to the System and your patients if you were told to shut up shop and self-isolate tomorrow. It does not harm to be prepared.

An old chestnut

The LMC is regularly asked to try and iron out some wrinkles in the system. Sometimes it would seem a simple thing; until it’s not. One such ask was to try and prevent those annoying obstetric ultrasound reports that come down the pathlinks saying “this is a report that contains no information, see the report that does” or similar. Clearly, we do not need to see this and it takes up pointless click-time to file. It has been a real struggle to discover why this happens, who is responsible and who can change it. We have finally made some progress and with Simon Thorogood’s kind permission there is a brief explanation and ray of hope to be found [here](#) in the secure area of the GP Knowledge Base on the LMC’s website, for those who have registered. Otherwise, sign up [here](#) to access it.

‘Hard reset’ at University Hospital Plymouth

University Hospital Plymouth will be undertaking a system ‘Hard Reset’ from 16-29 March, 2020. Hard Reset is a term used to describe the focussed period of collective effort to de-escalate the local health and social care system. The aim is to reduce the number of people being cared for in hospital and community settings who could be cared for in a less acute setting of care.



Increased capacity will be provided in the short term by a massive focus on inpatient care, reducing the time for inpatient investigations and clinical review.

Kernow and Devon Local Medical Committees are reassured to learn that there are no plans to discharge patients who are not medically fit for discharge into the community.

We are also reassured that there is not expected to be an increased workload for General Practice. We recommend that any issues are reported by local GP surgeries via the PITCH process.

Sign up to access Kernow LMC's new website

A reminder to sign up to Kernow Local Medical Committee's (LMC) new website – which is packed with dedicated general practice guidance for GPs, sessional GPs and Practice Managers.

The website offers information about the latest job vacancies and events in local general practice – and is an alternative route to access pastoral support.

It also includes more information about the LMC, our role and work – and how you can get involved or raise issues with us.

The website is easy to navigate and view on all devices, such as smartphones and tablets. It is available at: www.kernowlmc.co.uk

Everyone on our LMC database should have received an email inviting them to sign up to access the new website and its secure areas. Registering is quick and simple and the benefits include:

- View any restricted guidance.
- Place job adverts for your practice. We are happy to post adverts for Kernow GP practices free of charge. Just complete the vacancy form.
- Upload a training event.
- Link with the LMC – if you haven't already – so we have up to date contact details for you.

You can register [here](#). Thanks to the 260 GPs, Practice Managers and stakeholders who have already signed up.

The website will evolve and we will continue to add new features as it beds down. If you have any content suggestions, or wider feedback about the website, please email rich@kernowlmc.co.uk

Practice Managers Learning Event – save the date

The LMC will be holding a Practice Managers Learning Event on Tuesday, 10 November – so please save the date.

This will be a fun and informative day to help boost your professional development, whilst taking some headspace out of practice.

If you have any topics which you are particularly keen to be covered on the day, please email Nicky Sherry at admin@kernowlmc.co.uk by noon on Wednesday, 8 April, who will take them forward for consideration. We will also be involving our two Practice Manager representatives – Ali Butterill and Neil Parsons – in planning the event to ensure it meets your needs.



More information – including the venue (set to be Mid Cornwall), the agenda and how to register – will be communicated in due course.

This is a smaller bi-annual event, sandwiched between the larger bi-annual Practice Manager Conferences.

Practice Staff Training Workshops

Places are still available on two of the LCM's workshops running in April.

- 15 April, 2020 – Appraisal Skills. All Day. £60
- 29 April, 2020 – Assistant Practice Managers – Stepping Up. Half-day course, held in the morning. £40

They are being held at Victoria and if you have any members of staff that you would like booked onto either, or both, of these please email admin@kernowlmc.co.uk

Finance workshops

The LMC is offering two workshops delivered by Moore Scarrott Healthcare. These will take the following form:

- GP Practices – Finances and Business Strategy – What Your Partners Want. This will run on Thursday, 14 May, 2020, starting with registration at 9am and a finish around 12.30pm. Lunch will be included and will follow on after 12.30pm.
- PCNs – Getting the Finances Right. This will be held on Wednesday, 20 May with the same timings as above. Further details and booking forms can be obtained from our office by emailing: admin@kernowlmc.co.uk

The ERICA Trial

By Dr Alex Burns, from Three Spires Surgery, Truro

There is a lot of great primary care research going on in the South West and it would be good for all practices to be aware of a large, locally based study that they might be interested in getting involved with.

The ERICA Trial, based at Exeter University, is investigating the use of a novel tool with the hope of improving cancer diagnoses from primary care.

The ERICA tool is inserted into EMIS and Vision (and shortly into SystemOne) and flags up patients who meet, or might be near meeting, the two week wait criteria. It is designed to bring information buried in the patient record to your attention as a clinician. It gets a computer to do what they are good at: finding information. And lets you as a clinician do what you are good at: making decisions.

Practices will be remunerated for being in the study, more if they are randomised into using the tool (but will even be paid if they are in the control arm: ie do nothing different!).

Intervention practices will receive £470.55p and control practices will receive £204.40p.

Although the final Primary Care Network (PCN) contract has not been published, the improvement of referrals for suspected cancer was a significant part of the draft – and involvement in this trial may be timely.

If you are interested in learning more then you can watch the [introductory videos](#) or visit the trial [website](#).

If you are keen to sign up, or ask anything else, then email erica@exeter.ac.uk or phone 01392 726555.



The lowdown on the Macmillan Primary Care Team

By Judy Clapp, Macmillan Primary Care Nurse

Cancer as a part of GPs' workloads is changing: it's on the increase and will no longer be a rare occurrence in our working lives. 50% of patients born in 1960 will develop cancer in their lifetime and by 2030 there will be four million people living with cancer in the UK. Despite our wonderful NHS, we lag behind countries of similar wealth for our cancer outcomes – we have among the highest levels of cancer mortality among rich countries, particularly in one-year survival, which is likely to represent late diagnosis. For those who survive, many will suffer long-term consequences from their treatment and are at increased risk of developing a second cancer in the future. For those who die, we have work to do to improve quality of care at End of Life for everyone.

Our roles are not clinical, but focused on improving pathways, processes and communication, to help you to improve care for your cancer patients throughout this journey. We facilitate educational events and are happy to visit you in practice to support you and your practice team in the changing landscape of cancer care. We work across the whole of Cornwall and we are funded by Macmillan and hosted by the Royal Cornwall Hospital Trust (RCHT).

Update from Kernow Health/Training Hub

*The Training Hub has purchased a limited number of online advertising spaces for vacancies with both GP Pulse and the Nursing Times to enable practices to advertise their vacancies nationally.

This started on 1 March, 2020, and we are trialling it for three months initially to see how much take up there is from practices and to monitor any applications or successful recruitment as a result.

We will be contacting those practices with existing GP or nursing vacancies on the Kernow Health webpage initially, but if you have an existing or upcoming vacancy which you would like to place, or a vacancy which you have been struggling to recruit to, please email kernowhealthcic.workforce@nhs.net for further details.

*The Better Together Conference will be held on 1 July, 2020, at Wadebridge Show Ground. This is for all primary care staff across Cornwall and will be focused on collaboration, working together and will be inspiring. There will be keynote speakers as well as opportunity for specific workshops on a range of topics, sharing approaches to practice issues and networking. As the programme firms up we will keep you informed.

Watch out for the booking information in the next few weeks.

*A reminder that you can view the Training Hub's bulletins [here](#).

Launch of GP faecal calprotectin pathway

Royal Cornwall Hospitals Trust's (RCHT) gastroenterology department has launched a new pathway to help GPs identify the difference between irritable bowel syndrome (IBS) and inflammatory bowel disease (IBD).

Working together with NHS Kernow Clinical Commissioning Group, the department has developed an innovative and sensitive pathway based around a diagnostic test. The pathway uses the electronic ordering system ICE, which helps to decide whether a referral to RCHT is required. This pathway has been in development over the past six months and is now

available for GPs to use.

Calprotectin is a protein released from neutrophils in the intestinal mucosa in response to inflammation. It is a useful risk assessment tool when considering if chronic abdominal symptoms are functional in nature (IBS) or could be because of inflammatory bowel disease in those aged 18-60 years and not suspected of having cancer.

If the level is less than 100mcg/g then IBS is very likely, if it is higher than that then repeat in two weeks, actions depend on level of the second sample.

For full details, visit the Referral Management Service [here](#).

Reducing parental conflict: E-learning licence opportunity for practices

There are currently 37 e-learning licences to enable GPs and their staff to be able to undertake four online modules on Reducing Parental Conflict. The modules will explore the following:

- Module 1: Introduction to the Reducing Parental Conflict training programme.
- Module 2: Course Description – Recognising and Supporting Parents in Parental Conflict: Applying knowledge, skills and techniques.
- Module 3: Course Description – Working with Parents in Conflict: How do I support, refer or intervene?
- Module 4 Course Description – Reducing Parental Conflict: The Role of Supervisors and Managers: How can I support my frontline practitioners?

In order to access the e-learning, you will first need to apply for a license by contacting Claire Penellum on claire.penellum@cornwall.gov.uk

Embrace Care update

Find out how Cornwall's health and social care systems are working together to improve services for older people. [Read more here](#)

The PCN clock is ticking: Your three-month plan

There is a useful generic three-month plan template outlining the next steps for Primary Care Networks (PCNs) – dependent on their individual circumstances – advocated by Ben Gowland, of Ockham Healthcare, in a [blog](#).

NHS England clarifies flexible funding arrangements for PCN additional roles

NHS England (NHSE) has clarified the changes to the additional roles reimbursement scheme (ARRS) for Primary Care Networks (PCNs), which were outlined in the GMS contract agreement.

A [letter](#) to clinical commissioning groups (CCGs) makes it clear that the six new roles announced in February will be eligible for 100% funding for salary and on costs from April. The four existing roles will also be fully funded from that date. Commissioners are encouraged to use any underspend in ARRS funding to enable PCNs to recruit before the end of the current financial year. NHSE has advised that reimbursement of staff already in post should not change, but that staff employed from 17 February should be paid at the maximum rate specified by the new contract so as to become eligible to funding from 1 April without having to change their terms and conditions. The letter also makes clear that PCNs

will be free to employ whatever mix of new roles best equips them to meet the terms of the new network contract DES.

Kernow LMC helped influence the expansion of the roles via a motion at the LMC England Conference and feedback to the national negotiating team when they visited Kernow.

General Medical Services (GMS) Ready Reckoner 2020/21

This [ready reckoner](#) has been produced by NHS England and NHS Improvement (NHSE&I) in partnership with the General Practitioners' Committee (GPC) and is intended to provide an indication of the changes in income streams that may affect a GMS practice and Primary Care Network (PCN) from 1 April, 2020.

CQRS – new participation only service offer for GP appointments in support of winter pressures

Practices should have received a [Data Provision Notice](#) outlining the appointment data collection.

The General Practitioners' Committee (GPC) has received the following steer from NHS Digital (NHSD) about the process:

- It remains mandatory for GPs to participate in the data collection for Appointments data (as currently).
- This updated DPN (in conjunction with the current Direction) provides a legal basis to collect the existing data fields plus additional fields covering service type and draft national categorisation, as and when they are allocated by individual General Practices. There are pilots going on currently testing these appointment categorisation.
- They will not be published at practice level until April 2021 as per contract agreement, and after professional sign-off of final categories. However, NHS Digital must publish all information which it obtains by complying with a direction under section 254 or a request under section 255 as per Section 260 of the Health and Social Care Act 2012.
- In order to maintain continuity of appointment data flow, the current collection will not be superseded by the 'collect with additional fields' until there is sufficient uptake by practices – so this is a transition process to minimise the risk of a 'data flow break'.

Pension contribution rate for NHS Pension Scheme

The employer contribution rate for the NHS Pension Scheme will remain at 20.6 per cent of pensionable pay, with an additional administration levy of 0.08 per cent, for the 2020/21 financial year.

As was the case for 2019/20, it has been confirmed that employers will be responsible for paying 14.38 per cent of this to the NHS Business Services Authority in 2020/21, with the remaining 6.3 per cent being funded centrally.

The employer contribution rate increased from 14.3 per cent to 20.6 per cent on 1 April, 2019. This increase followed a valuation process and was required to meet the cost of scheme benefits. The Government provided additional funding to cover this increase for

employers in 2019/20, and NHS England and NHS Improvement (NHSE&I) has confirmed that this funding will also be available in 2020/21.

These central payments will apply to employers receiving funding from NHSE&I budgets or from the NHS to deliver NHS services. Member contributions will remain unchanged until April 2021.

PCSE pension admin info for practices

It's time to submit your 'estimate of pensionable earnings' details for all GPs (excluding locums) and non-GP providers attached to your practice. This is for the upcoming period of 1 April 2020 to 31 March 2021. This will ensure that the right deductions are being taken from your practice and prevent large adjustments being made at the end of the year. [View more information here.](#)

Escalation of pension concerns

A reminder that Primary Care Support England (PCSE) has a Service Level Agreement (SLA) to respond to all pension queries within 10 working days – and high priority queries within two working days. If an individual has not received a response within this timeframe, the member can raise a complaint. PCSE will have 40 working days to respond. If they have not responded by within this time, an individual can escalate the issue to england.pensioescalations@nhs.net

Coronavirus guidance

The British Medical Association (BMA) has published a webpage highlighting key information and links to official guidance from Government agencies on coronavirus – including how to handle queries from patients and how to manage patients who contact or attend GP practices. Read more [here.](#)

Records of deceased patients

Primary Care Support England (PCSE) has issued a reminder about the management of the medical records of deceased patients as part of the ongoing work on the digitisation of records. For any deceased or deregistered patients whose medical records are moving into archive, the full complete medical record should be printed and placed in the medical record envelope, then sent to PCSE. This is in line with the Good Practice Guidelines for GP Electronic Patient Records. CDs and other portable media should not be used as there are issues with security of encryption, access to passwords and the long-term viability of the media. Any queries regarding the digitisation of medical records should be sent onto the NHSx's medical records digitisation team at: pcdt@nhsx.nhs.uk

Want to know how many of your patients are using the NHS App?

You can see the number of NHS App users your practice has by using a new dashboard, which shows uptake of the app across England.

The [NHS App](#) allows your patients to book GP practice appointments and order repeat prescriptions. Over 290,000 people across England now use the app.

[Find out how to use the dashboard.](#)

IR35 guidance for locum GPs

The General Practitioners' Committee (GPC) has updated all its employment status (IR35) guidance into one easy-to-read document so that locum GPs have all the information they need to be confident in determining their employment status. Read more in a [blog](#) by Dr Matt Mayer, Deputy Chair of the GPC's Sessional GP committee.

Almost a third of doctors may be burnt out and stressed, new study suggests

Doctors working in general practice and emergency medicine are most at risk of exhaustion, stress and compassion fatigue, researchers have found.

The study, published in the online journal BMJ Open, found that nearly one in three doctors (31.5%) had high levels of burnout, while one in four (26%) had high levels of stress. Read more [here](#).

Kernow Local Medical Committee's pastoral support service is available to any GP working in Cornwall. For more information, visit our new [website](#), which also offers an alternative route to access help.

If something has gone wrong, or you fear that something may have gone wrong, seek advice from the LMC and/or your medical defence organisation (MDO) before embarking on formal discussion with third parties.

Patient leaflet: what is an online consultation?

NHS England (NHSE) has published a [leaflet](#) to help patients understand the purpose and benefits of online consultations.

Removal of fax machines from general practice

NHS England (NHSE) has issued [guidance](#) on the removal of fax machines from general practice.

BMA Patient Liaison Group recruitment

Practices in Kernow are asked to flag the following opportunity to their Patient Participation Groups (PPGs).

The Patient Liaison Group (PLG) acts as an internal reference group and provides the British Medical Association (BMA) with an informed patient view on matters of interest to the medical profession and to patients. The group consists of both doctors and lay persons. The BMA is looking to recruit four new lay members on a voluntary basis commencing in July 2020 and would welcome applications from a diverse range of backgrounds.

The individuals will have an active interest in influencing health policy and working to improve patient care. Your experience may be lay or professional, as a carer or patient, as a member of a disease-interest group or as a member of a local or national patient-interest group.

The BMA is also looking to recruit a 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.



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The doctor member who has not served previously on BMA UK committees may serve on the PLG for a maximum term of five years: an initial term of three years and re-appointment for one year on two further occasions.

If you are interested in applying, the vacancies are advertised on the [BMA website](#)

This is a fantastic opportunity to join a very dynamic and productive group which works to inform BMA policy by ensuring that the patient voice is represented on matters being addressed by the BMA. The closing date for applications is 15 March.

Latest jobs in local general practice

The latest practice vacancies – including GP and practice manager roles – are available on the [jobs page](#) of the LMC's new website. Vacancies are also available on the [jobs page](#) of Kernow Health's website.

Kernow Health's Staff Bank is also now live for workers and practices to sign up. Please follow these links:

<https://cornwallcepn.co.uk/general-practice-staff-bank/>

[Bank Worker sign-up](#)

[Practice manager sign-up](#)

Lantum are supporting practices in key functions, including adding shifts and availability. If you or your practice teams would like any additional support in using the Bank, please contact kernowhealth.workforce@nhs.net

Events calendar

The LMC's [events calendar](#) provides an overview of what's taking place to support local general practice.

Produced by Kernow Local Medical Committee. Copy submissions for the April 2020 newsletter should be emailed to Richard Turner, Communications Lead at the LMC, at rich@kernowlmc.co.uk by Tuesday, 24 March, please.

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