



WEEKLY NEWSLETTER – 4th June 2021

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1. Nurses IBD (Inflammatory Bowel Disease) advice guidance

Following notification that the UHB IBD Helpline E-mail has been closed we have now been advised of the following:

That mailbox is still monitored, but a GPs reason for contact will usually warrant a more immediate response than this sporadic oversight would offer. You have the IBD answer phone facility 0121 371 5905 but if you prefer to convey queries/ information via email, the optimal address is via the IBD nurses group email IBDnurses@uhb.nhs.uk. This address has not been divulged to the public so there is less general traffic for your clinical queries to get lost amongst.



2. GP Data for Planning and Research

NHS Digital has published a [Data Provision Notice](#) (DPN) in order to begin extracting data as part of the [GP Data for Planning and Research \(GPDPR\)](#) programme, which is the successor to the GP Extract Service (GPES).

Your IT supplier will be in touch separately with instructions on how to comply, as these vary by system.

As this is a legal direction, responsibility for communicating these changes to the general public sits with NHS Digital and the Department of Health and Social Care. Should you wish to communicate it to your patients you may do so, but it is not an obligation. These are the next steps that practices need to take:

Comply with [DPN](#) ; Update your [Privacy notice](#) ; Consider whether to proactively contact patients to inform them of what is changing; and register [type 1 opt-outs](#) in a timely fashion.

If patients register a Type 1 Opt-out, practices must process this. Codes for opt-out can be found [here](#) and are copied below for ease

Opt-out - Dissent code

9Nu0 (827241000000103 |Dissent from secondary use of general practitioner patient identifiable data (finding))

Opt-in - Dissent withdrawal code

9Nu1 (827261000000102 |Dissent withdrawn for secondary use of general practitioner patient identifiable data (finding))

Further information, including a transparency notice and next step for GPs, is available [here](#)

The BMA is calling on NHS Digital and the Government to delay the introduction of its new data programme until patients and the public have had time to be aware of and understand the programme and choose to opt-out if they wish

A joint statement from BMA and RCGP can be found [here](#)

3. NHSBA plans to digitalise Personally Administered Medicines claim and payment process for general practice

In response to feedback about the administrative burden associated with the claim and payment processes for agreed items that GPs can administer (this includes high volume items such as the seasonal flu vaccine), the NHS Business Service Authority (NHSBSA) are exploring solutions to digitalise the forms and automate payments. Modernising this process is expected to bring benefits to GP practices and remove the time-consuming nature of manually submitting paper forms for reimbursement, as well as minimise the errors and problems that current working practices can generate in reconciling claims and payments.

NHSBSA would welcome the help of practice managers and other interested persons to help inform the solution design and its implementation. If you would like to be part of the working group, please contact: nicholas.walton@nhs.net.



4. New PCSE GP Payments and Pensions portal now live

The new online GP Payments and Pensions (GPPP) service from PCSE is now live. PCSE has advised that via this new portal, practices and GPs working in general practice will be able to access a range of new services to help manage their payments and pensions administration online.

PCSE has written to all practices to ensure they have the correct details on file for the correct contact who will control the access within their practice to the new system. We have been assured that this work is complete but if a practice believes that they have not had this correspondence or they are unsure who their assigned contact is they should email pcse.user-registration@nhs.net. A suite of guidance for using the new system can be found on the PCSE website [here](#).

The payments element of the new system should allow practices to submit payment claims, such as for premises or Locum cover, online. Monthly practice statements will also move to the portal. These will only be available via this route.

Practices should find it easier to submit pension information such as an Estimate of GP and Non-GP Provider NHS Pensionable Profits with the new system. Practices should also be able to provide updates on salary changes in real-time to ensure the correct pensions contributions are being deducted. Approving Locum A forms and other pensions administration work should also be easier.

Any GP who is a member of the NHS Pensions Scheme as a GP partner, salaried GP or locum GP will be able to access an improved service from PCSE to administer their pension account and access their pension records from 2014/15 onwards. Members will be able to do the following via PCSE online with the new service: Type 1 Annual Certificate of Pensionable Profit and Type 2 self-assessment forms; Estimates of Pensionable Profit/Pay form; Retirement, 24-hour retirement and death in service; GP Locum contributions; GP Solo contributions; opting members in or out of the NHS pension scheme; amending member's Additional Voluntary Contribution (AVC). Further information can be found [on the PCSE website](#)

Members of the scheme are encouraged to log onto the new portal. To access this functionality, you will need to have a verified PCSE Online account. If you do not have an account, or have yet to verify your existing account, please contact the PCSE User Registration team at pcse.user-registration@nhs.net. If you already have an account but have forgotten your log in details you can set up a new password on the [PCSE login page](#)

5. NHSEI review of urgent and emergency care standards

Based on the responses to their consultation, NHS England, and NHS Improvement (NHSEI) have announced on 26th May their intention to replace the four-hour A&E target by a bundle of new standards and an overall new approach to measuring performance in Urgent and Emergency Care (UEC) services. Any final proposals will however require government sign-off, which has not yet been given.

They are proposing to introduce 10 new standards which they say would provide system-wide information rather than focusing on one-part of the system. They argue that the current four-hour target focuses on only one part of a now much more complex range of urgent services for patients, including ambulance care, UTCs and NHS 111.

A summary of the proposed new metrics is attached (Enc.1).



6. Health inequalities toolkit – call for examples

The BMA is producing a toolkit for frontline clinicians, including those in general practice, who feel frustrated by the health inequalities they see in their work, and who wish to do something about it.

The initiative is part of a project by BMA president Sir Harry Burns, who is making inequalities the focus of his one-year term in office. The BMA also [published a paper](#) in March recommending actions UK governments could take to mitigate the effect of the pandemic on health inequalities and the social determinants of health.

They would like to hear from those who have seen or participated in schemes to address health inequalities in their local area and hope the final published toolkit will support clinicians to tackle health inequalities, either through direct action on behalf of their patients, through joint working with other local organisations, or indirectly through lobbying local, regional, or national government.

Please send any examples of projects or initiatives you have seen in your local area to reduce health inequalities, by filling in this [webform](#).

If you have any general feedback on what you would find useful in a toolkit, as a GP, please email Liv Clark at oclark@bma.org.uk

7. Locum doctors in the NHS: understanding and improving the quality and safety of care

Manchester University, funded by the Institute for Health Policy and Organisation, is conducting a research project which is examining how temporary or locum doctors work in the NHS, what they do, how their work is organised, and what effects that might have on the quality and safety of healthcare for patients. Their aim is to help find ways to improve the working arrangements for locum doctors and the quality and safety of patient care they provide. For more information, including how to take part, see [here](#)

8. Final Seniority Factors for 2017/18

The [Final Seniority Factors for 2017/18](#), for England, have now been published by NHS Digital.

9. Becoming a UK visa sponsoring practice

Gaining the right to be a UK visa sponsoring practice has many advantages and could form an important part of your general practice workforce planning. You need a sponsorship licence to employ someone to work for you from outside the UK. As the number of international medical graduates undertaking GP training in England continues to increase, with around 700 due to qualify in 2021 alone (around one in three) and higher proportions in years to come, there is a greater chance that you will need a sponsorship licence to give you the broadest choice of UK trained GP candidates.

The Home Office is running a webinar which will provide a step by step guide on visa sponsorship on 15 June at 5pm. [To attend, please register online](#)



10. Priorities for this year's Local GP Retention Fund

Funding for the Local GP Retention Fund continues this year with new national priorities for supporting doctors within an ICS. The fund, worth £12m nationally, is allocated to systems to create initiatives that provide GPs with the support they require to develop fulfilling careers in general practice. This could include coaching and mentoring, flexible working, and 'step-down' opportunities.

This year, the national priority targets are supporting GPs at points of transition in their career and supporting new ways of working and embedding flexibility. ICSs continue to have the flexibility to fund any other perceived gaps in local support. Any GP who wants to find out more about the fund should contact their ICS. For information about other schemes which may be of interest, visit the [GP Career Support Hub](#)

BSol Practices

1. Clinical system performance audit

Please see below request for information from the CCG. We would like to remind practices that participating in this system performance audit is NOT mandatory. However, we have discussed the audit with the CCG and can appreciate the long-term benefits for General Practice should you wish to participate.

The CCG is working with partners at Midlands and Lancashire CSU, as well as the other CCG; s they support, to undertake an audit of the performance of the clinical systems (EMIS, TPP SystemOne, VISION).

*As a result, the CCG would like practices to partake in a system performance audit exercise for a week, from 7 June to 11 June. During this time, practices are asked to complete a very simple online form each time issues are experienced with the main clinical system used. **The form should take less than 60 seconds to complete.** You can access the form [here](#).*

2. Birmingham & Solihull Digital Team - Cyber Security, Website

As part of the ongoing assurance around digital first and in light of recent world events such as those in Ireland. BSol CCG would like to request your permission to enrol your practice website into a service operated by the National Cyber Security Centre. The service will routinely check your website for any vulnerabilities of misconfigurations and notify us should any be found. This would allow the Digital Team to proactively support you in providing a safer clinical service to your patients. If you would like to opt into this arrangement, could you kindly confirm the address of your practice website or websites to bsol.digital@nhs.net and they will ensure that it is enrolled, and any findings are communicated to you.

PLEASE REPLY TO: Birmingham and Solihull Digital Team- bsol.digital@nhs.net



3. Joint CCG General Practice Peer Support Team & LMCs Practice Managers Engagement Sessions

Please see below an invite sent out to all Managers regarding future information sharing session workshops:

Back by popular demand is your practical information sharing workshops. Based on the feedback on the items you want to see, please see attached (Enc.2) the agendas for the workshops due to take place virtually on:

Thursday 17th June – 9.30am to 12.10pm – [Click here to join the meeting](#)

Thursday 1st July – 9.30am to 12.05pm – [Click here to join the meeting](#)

The first session on the Thursday 17th June will cover:

- * Digital Standards in General Practice
- * GP Team Net – New Features
- * Lantum – Flexible GP Staff Pool Scheme
- * Bluestream Academy Training New Features
- * CQC Update

The second session on the 1st July will cover:

- * QOF Update 2021/22
- * Universal Offer Update
- * PCN DES Contracting Update including Finance
- * PCSE
- * Financial Diagnostic Tool

The sessions will also provide an opportunity to virtually meet each other given the challenges of the past year.

Kind regards,

Ravy Gabrria-Nivas

Wendy Loveridge

Amanda Shakespeare

GP Peer Support Team Managers; Raj Dau, Stephen O'Halloran, Ahmad Jamil, Jennie Grant, Roy Sellarajah, Trev Kerr, Sobia Hussain



4. BP@Home – an NHSE&I Project to support primary care with remote Hypertension monitoring

During the COVID-19 pandemic, many patients with high-risk conditions for cardiovascular disease have not been able to access their usual reviews and treatment adjustment – a notable example is hypertension.

NHS England and NHS Improvement has procured blood pressure monitors for clinical teams to target patients with poorly controlled hypertension, prioritising those most at risk of becoming seriously ill with COVID, or suffering heart attacks and strokes. These are now available free for primary care to distribute amongst their practices.

Birmingham and Solihull have been allocated 21,000 BP monitors that meet ISO standards, are CE-marked and on the British & Irish Hypertension Society approved list. These will be distributed across Birmingham and Solihull on the basis of the Fair Shares weighted population. The CCG are keen that the most vulnerable patients are prioritised to have their hypertension managed closely. The machines will belong to the patients and there is no expectation that they would need to return them.

For more information on this, [click here](#).

NHSE are keen to ensure deliveries are kept to a minimum so we ask that one PCN receives delivery of the localities' allocation. If you would like to express an interest, or would like further details, please contact bernadettefaulkner@nhs.net

Please note that the LMC are unable to accept calls or hold communications with patients, we are GP representatives, and we would respectfully ask that Practices do not advise patients to contact us. Could we also remind Practices that any copies of patient related correspondence MUST be anonymised as the LMC cannot accept patient identifiable data.

Please note our office contact times remain 10:00-16:00 and any queries on the day should be directed to birmingham.lmc@nhs.net as we are currently remote working so would be grateful if all contact were made via the nhs.net email.

Helpful Links:

BMA COVID-19: toolkit for GPs and GP practices <https://www.bma.org.uk/advice-and-support/covid-19/gp-practices/covid-19-toolkit-for-gps-and-gp-practices> Comprehensive guidance for GPs, partners, and practice managers to manage employment and contractual issues and service provision during the coronavirus pandemic.

GOVERNMENT WEBSITE: <https://www.gov.uk/coronavirus> for recent and upcoming changes, guidance & support.

NHS ENGLAND: <https://www.england.nhs.uk/publication/implementing-phase-3-of-the-nhs-response-to-the-covid-19-pandemic/>

As you will already appreciate Guidance is continually changing at a fast pace, therefore Birmingham LMC will be unable to update any links on a regular basis and would respectfully ask that any practice who wish to continue to use this information ensure that these links are updated and validated against the most recent advice.