

Weekly update 13.7.18

Dear Colleagues,

New Secretary of State for Health and Social Care in England

Following the cabinet reshuffle, former culture secretary Matt Hancock MP has been announced as the new minister for Health and Social Care in England, replacing Jeremy Hunt. Commenting on the appointment, Dr Chaand Nagpaul, BMA council chair, congratulated him on his appointment, whilst at the same time, reminding him of the need for a properly resourced health service to enable high quality patient care. The BMA has also written to the new Health Secretary where we amongst other things urge NHS England to address the unrelenting workload pressures facing GPs and the unfair and unsustainable burden of indemnity costs as we move towards establishing a state back indemnity scheme. Read the BMA press statement [here](#).

Articles about the new health secretary were also published in [The Sun](#), [iNews](#) and the [Mail](#)

Funding undergraduate GP placements

I wrote to the previous Secretary of State for Health and Social Care, Jeremy Hunt, last week to call for an increase in the funding of undergraduate placements in primary care. I said “The BMA remains concerned that the government’s plans to increase the number of GPs will not be realised until an end to the long-term underfunding of undergraduate placements is addressed to attract and secure the future GP workforce. General practice is experiencing one of the most severe recruitment and retention crises in decades, with too few doctors choosing general practice as a career - it is therefore vital that the government urgently provides the necessary funds to enable practices to continue to train and therefore attract the next generation of GPs.” Read the letter [here](#).

Read more about this in [Pulse](#) and [GP online](#).

GPs face deportation over sponsorship failings

It has been reported that NHS England has reached out to GP practices in a bid to find sponsors for 400 international GPs due to complete their training this month. Unless the non-EEA students are matched with GP practices that hold sponsorship licenses, they face having to leave England when their visas expire. Dr Krishna Kasaraneni, GPC England executive team member, said: “At a time when we need to do all we can to recruit more GPs, it’s bizarre the government’s own policies are hampering this. NHS England and the Home Office must sort this issue as quickly as possible or more practices will struggle to maintain their services to their patients. While plans to recruit more qualified GPs from overseas will help short-term recruitment problems, this setback shows how the lack of a

sustainable long-term plan to solve workforce problems means primary care services are struggling.”

Read the full story in the [Mail](#) and [Pulse](#).

Parliamentary questions about Babylon and GP at Hand

During yesterday’s [business questions](#) Labour MP Andy Slaughter referenced the BMA and concerns regarding Babylon and called for a debate on private sector involvement in the NHS. Leader of the House Andrea Leadsom responded by encouraging Slaughter to apply for an adjournment debate on this topic.

Andy Slaughter (Hammersmith) (Lab): *GP at Hand, a partnership between GP surgeries and Babylon, a private company, is distorting the primary care system not only in my constituency, but across London, according to the British Medical Association, by using a loophole to sign up tens of thousands of mainly young and elderly people from across the region for online medical services, thus leaving other GPs to deal with more complex and expensive conditions. May we have a debate on private sector involvement in the NHS where this puts profit above patient care?*

Andrea Leadsom: *The hon. Gentleman raises what sounds like a very concerning case, and he is right to do so. I encourage him to seek an Adjournment debate so that he can raise his specific concerns directly with Health Ministers.*

As I highlighted last week, NHS England is currently consulting on payment arrangements for what they term digital-first primary care providers, such as GP at Hand. Please encourage your practices and contacts to respond to the consultation and in particular use the opportunity that Q1 gives to express views on the out of area registration regulations. The consultation can be found here <https://www.engage.england.nhs.uk/survey/digital-first-primary-care/>

Low value appraisal guidance

A new guidance on supporting doctors who undertake a low volume of NHS general practice clinical work has been launched by NHS England and is available [here](#). Mark Sanford-Wood, GPC England deputy chair, has also written a blog about the new guidance, which can be accessed [here](#).

Long waits for mental health therapy

In my role with Leeds LMC, I have written to Leeds City Council warning the IAPT (Improving Access to Psychological Therapies) service is not sufficiently responsive and leaves practices trying to manage patients as effectively. This is an issue that is mirrored in many other areas across the country. I said: “Long waiting times are having a huge impact on already distressed patients who are often having to wait months to attend talking therapy sessions.” Read about this in [The Yorkshire](#)

[Post.](#)

The partnership review – call for evidence

As has been reported previously, Dr Nigel Watson (Chief Executive Wessex LMC) is leading an independent review into the partnership model of general practice. As part of the review, commissioned by the Department of Health and Social Care, a [key lines of enquiry document](#) has been published calling for evidence to feed in to an interim report, which aims to make recommendations that will revitalise the partnership model and ensure that the views of GPs, other staff working in general practice, patients and the wider system have been considered.

If you would like to respond to the review, please email GPPartnershipReview@dh.gsi.gov.uk. Dr Watson will also be blogging about the review, which you can read [here](#). There will also be a series of regional partnership model review events, hosted by LMCs, which we would encourage you to visit, as listed below:

Nottinghamshire LMC 23 July

YOR LMC 24 July

Londonwide LMCs 30 July

Liverpool LMCs 19 September

Please contact the LMCs directly for further information – contact details available [here](#).

Do you have problems with your IT? We want to hear from you.

BMA focus groups on the state of IT in the NHS are taking place next week. We are particularly keen to hear about challenges you face on a daily basis (whether that be a lack of training, outdated systems or platforms, problems sharing data, or inadequate equipment), how they affect you and your patients, and what improvements you think must be made. The focus groups will be held in the following cities on these dates:

- Edinburgh 17 July 2018 from 12pm to 3pm
- Bristol 23 July 2018 from 12pm to 3pm
- Manchester 20 July 2018 from 12pm to 3pm
- London 2 August 2018 from 12pm to 3pm
- Cardiff 3 August 2018 from 12pm to 3pm

To register, or if you have any questions, please send your details and specify which session you would like to attend to info.phhd@bma.org.uk. A John Lewis voucher will be provided for taking part. Lunch will also be provided and reasonable travel costs covered.

New clinical roles

[A guide to new clinical roles](#) has been published on the BMA website. It has been designed to provide members with a broad outline of the new clinical roles that are emerging across the NHS, such as Physician Associates (PAs), Advanced Clinical Practitioners (ACPs) and Clinical Pharmacists. It also provides suggestions of further reading.

Nominations for the BMA's Committee of Medical Managers now open

Nominations for the Committee of Medical Managers are now open until 12pm Thursday 19 July. Voting opens 12pm Thursday 26 July and closes 12pm Thursday 9 August. There are places for **five medically qualified managers working in primary care, including those working in primary care organisations or within clinical commissioning groups**. This will include a minimum of one manager with medical director responsibilities at board level (2018-20); three medically qualified managers working in secondary care (2018-20); one medically qualified chief executive (only for 2018-19 session); one medically qualified manager in Community Care Practice (2018-20).

Note that the members of the committee would not need to be BMA members, however, the chair of the Committee would. Further information is available [here](#) and the Online Nomination and Election system can be accessed [here](#).

The Potentially Avoidable Appointment Audit tool

NHS England has launched the new fully automated Potentially Avoidable Appointment Audit tool, which is free for all practices in England. The audit is a simple tool for reviewing workload within practices and exploring how things might be managed differently in the future. So far, more than 1,000 GPs across 400 practices have audited their appointments. All practices can register for the audit by going to <https://pcfaudit.co.uk/login>. To find out more about why practices are using the audit, results so far, changes they have made, and case studies, see [here](#).

NHS England's relaunched General Practice Bulletin

NHS England has relaunched their [General Practice Bulletin](#). If you would like to sign up to subscribe, please click [here](#).

Varicella Zoster Immunoglobulin (VZIG) in pregnancy guidance

Guidance on the use of VZIG in pregnancy during current supply constraints has been published on the [Gov website](#) (towards the bottom of the page).

Read the latest GP UK newsletter [here](#)

Have a good weekend

Richard