

LMC Update Email

11 January 2019

Dear Colleagues,

NHS Long Term Plan

NHS England has launched its [long-term plan for the NHS](#) which sets out its vision for the future direction of the NHS. The plan lays out ambitious aims for the health service linked to an expansion in digital services and a focus on preventive care. The previously announced £3.5bn for primary medical care and community services has been increased to £4.5bn, in part as a result of our current contract negotiations. There is also an important and clear commitment to increase the proportion of NHS investment spent on primary medical and community services. This is described as an “NHS-first” and is a direct result of our campaigning in recent years.

There will be a focus on the development of [primary care networks](#) with a network contract built on the current GMS contract. We will provide more details about this shortly, once contract negotiations are completed. The intention is that practices should be able to lead and direct networks, which will enable an expansion of the workforce to include pharmacists, physiotherapists, social prescribers, paramedics and physician assistants, and to help rebuild and reconnect the primary healthcare team within an area.

The plan highlights a range of digital goals related to general practice, including a commitment to enable all practices to do video consultations, to offer more online booking and online repeat prescribing ordering. Whilst patients will continue to be able to choose to be registered with digital-first providers, the plan outlines that steps will be taken to address the financial issues related to this as well as committing to review the out of area registration arrangement.

We welcome the recommitment to a state backed indemnity scheme, to begin in April 2019, and the commitment to implement the premises review.

There is also a clear commitment to move away from the NHS Act's competition agenda, something again the BMA has been campaigning for and is pleased to see NHS England and the government acting on.

Please see attached a briefing on the *NHS Long Term plan - impact on general practice*. The BMA will also publish a full briefing next week.

Read the BMA statement by Dr Chaand Nagpaul, BMA Chair of Council, [here](#). Dr Nagpaul appeared on the BBC News Channel and on BBC Radio 2 Jeremy Vine at 12.20pm, and I was interviewed on BBC York and Radio Aire. There was further coverage in [the Mail](#), [Independent](#), [Guardian](#), [Huffington Post](#), [Financial Times](#), [Pulse](#), [Express](#), [Pulse Practice Business](#).

NHS property services owed millions

The [Financial Times](#) reported that NHS Property Services is owed more than £422m in unpaid fees, blaming tenants, including GPs, for not handing over money. However, the BMA said that this comes as practices face astronomical hikes in service charges and maintenance fees, amid the wider background of financial pressures. The article refers to a practice in Nottinghamshire that said it was forced to hand back its contract because of the large increase in service charges. Dr Krishna Kasaraneni, GPC England executive team premises lead, commented: “Recent years have seen GPs hit with astronomical increases in service charges and facility management fees from NHS Property Services, with little to no detail on the reasons behind them. At a time when GPs are facing extreme financial pressures, providing unlimited high-quality care to a rising, ageing population that is more

commonly presenting with a number of complex conditions, these unilateral price rises could lead to practices being forced to shut down.”

QOF registers and business rules coding issues

GPC England wrote to NHS England and NHS Digital after problems relating to the deployment of QOF business rules (v39). We have received a response to say that they are confident that the corrections in the data collection that will come into force with QOF business rules version 41 will resolve the problems identified to date. These [rules](#) are publicly available so that practices will be able to see the changes made prior to implementation by suppliers. They tell us that all four system suppliers will have appropriate resources and processes in place to ensure that version 41 will be implemented in January. In addition, EMIS have already deployed version 41 in their internal search engines and practices using this system will be able to view reports that will reflect the new set of business rules.

NHS England and NHS Digital are aware that as a result of the change to SNOMED coding and the concerns raised that there may be closer scrutiny to achievement at year end than usual and additional work for practices and commissioners. As a result, there may also be an increase in queries raised before practices and commissioners are happy to sign off achievement.

NHS England will contact local commissioners and NHS England local teams requesting that where possible they support practices in resolving any queries as quickly and efficiently as possible and ensuring workload is kept to a minimum. NHS Digital will ensure their customer service team are fully briefed on the issues raised and will anticipate the possibility of an increase in activity this year end. The support teams will be ready and able to support practices with their queries.

EU Exit operational readiness guidance

The Government have published '[EU Exit operational readiness guidance](#)' for the health and care system in England which identifies actions that GPs and commissioners should take to prepare for, and manage the risks of a no-deal exit scenario. A summary of the guidance is attached.

Most of this activity will be dependent on actions your CCG can take and we would therefore advise practices to clarify what work is underway locally in response to these instructions from government, together with how they are engaging with your LMC. Practices could request an update on any plans which have been or will be implemented.

The Department of Health and Social Care are engaging with the BMA along with other stakeholders as they build on their guidance in response to the situation. Further information about the BMA position on Brexit and all of our briefings are available [here](#).

New CQC Chief Inspector of Primary Medical Services and Integrated Care

It was announced this week that Dr Rosie Benneyworth will be appointed the next CQC Chief Inspector of Primary Medical Services and Integrated Care, and begins her work in March. She will take over from Professor Steve Field. Dr Benneyworth has been a GP for 15 years and is currently the Director of Strategic Clinical Services Transformation for Somerset CCG and Vice Chair of NICE.

Pensions Consultation

The Department of Health and Social Care has announced that it will be [consulting on proposals to change NHS pension scheme regulations](#). The proposed changes include introducing a new contribution rate of 20.6% for employers from 1 April 2019, and the Government has committed to providing additional funding to meet costs arising from the current actuarial valuation of the NHS Pension Scheme alongside the long-term funding settlement for the NHS.

Other proposed changes include renewing current member contribution rates so that the same rates continue to apply beyond 31 March 2019, providing civil partners and same sex spouses with the same survivor pension rights as widows and extending the current forfeiture of pension benefits rules.

Many understandable concerns have been raised by practices and GPs since the consultation was published as this clearly has serious implications. The GPC will be working to ensure this new cost is fully funded by government and will be responding to the consultation about the wider implications to GP pensions.

Changes to tax treatment of GP pensions

In an interview with [Pulse](#) magazine, Matt Hancock, the Secretary for Health and Social Care suggested that he was in discussions with the treasury over changing the tax treatment of GP pensions in an attempt to retain more GPs. I welcomed this commitment, which follows our lobbying on this issue, and said: “Hard-working GPs – and doctors of all kinds – have been unfairly hit in recent years by complex regulations and tax changes impacting their pension, meaning many are inadvertently facing huge bills at the end of the year.” This was also reported in the [Times](#).

Clexane 40mg Injection supply issue

Sanofi has informed NHS England and DHSC that there has been a quality issue with their most recent batch of Clexane 40mg injection that was due to arrive this week in the UK. It is anticipated that all wholesalers will be out of stock of Clexane 40mg injection by the end of the week with an anticipated resupply date of week commencing 18 February 2019. This date may be brought forward to end of January/early February if the current batch passes further QA testing.

Alternative options include Clexane (Sanofi) Imported stock – available from 23rd January 2019 – as Sanofi have imported Clexane 40mg stock from Italy to help cover an anticipated shortfall in stock. This product is imported under a batch specific variation to the UK and is therefore classed as licensed in the UK. The most important difference between the two preparations is the difference in the needle guard device. To deploy the Preventis needle shield on the Italian syringes, users need to firmly push the plunger after completing the injection. The user will hear an audible “click” to confirm the activation of the protective sleeve and the protective sleeve will automatically cover the needle. Patients and HCPs will need to be trained on this new device; instructions for use can also be found within the PIL. This product will NOT be over-labelled in English but an English PIL will be included in the pack.

DHSC have also been in contact with the suppliers of Enoxaparin biosimilar agents:

Inhixa 4,000 IU (40mg) in 0.4ml solution for injection pre-filled syringe (supplied by Techdow)

- Techdow supply Inhixa (enoxaparin) and have confirmed that they have sufficient stock of Inhixa 40mg injection to cover the additional demand:
www.medicines.org.uk/emc/product/784/smpc
- If you wish to switch Clexane 40mg to Inhixa please see attached support / training materials and link to online video: <https://www.youtube.com/watch?v=E8AytPojtVI>
- For further support and to arrange a visit with a field director who can provide training on how to use Inhixa please contact: selina.temperton@uk.techdow.com 07376280709 or jo.phillips@uk.techdow.com 07540979066. Orders for product can be placed via wholesalers.

Arovi 4,000 IU (40mg) in 0.4ml pre-filled syringe (supplied by Rovi Biotech)

- Rovi Biotech supply Arovi (enoxaparin) and have confirmed that they have sufficient Rovi 40mg injection to cover additional demand in primary care.
- If you wish to switch Clexane 40mg to Arovi please see attached supporting / educational material and link to further online material: <https://www.rovi.es/en/biosimilar-de-enoxaparina>
- For any queries or to order training material please contact: Blanca Esteban, besteban@rovi.com 0203 642 06 77. Orders for Arovi can be place via Alliance Healthcare.

Alternative Clexane presentations remain available however Sanofi cannot support increased ordering of any other presentations to support the shortfall in 40mg syringes. Pharmacies will be asked to continue to order all other strengths in line with historical demands and reminded that NHS Purchases will be monitored during this period.

Clinical academic trainees conference

Registration is still open for the Clinical Academic Trainees Conference on Saturday 2 February 2019 at BMA House. The conference is organised by and for clinical academic trainees and will provide a national forum in which to network, learn how to make the most of your academic training and develop your career. The conference would also encourage attendance from GP academics to provide an opportunity for them to outline their concerns and network. Highlights include:

- Keynote address from Professor Lucy Chappell of King's College London, considering the complexities of clinical academic career progression.
- Keynote presentation from Dr Amara Nwosu, reflecting on his career as an academic trainee and the challenges he has overcome.

To find out more about the day and register please visit the [webpage](#)

BMA Expert Witness Conference – 8 March 2019

The Annual [BMA Expert Witness Conference](#) will be held on 8 March 2019 at BMA House. This is a one-day conference, for all levels of experience, covering the essentials of working competently as an expert witness. If you are interested in working as a GP expert witness, register your interest by emailing confunit@bma.org.uk and further information is available [here](#)

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

Have a good weekend.

Richard