

LMC Update Email

13 March 2020

Dear colleagues

Coronavirus (Covid-19) update

The Prime Minister made an announcement yesterday regarding Covid-19 confirming that the UK has officially moved from containment into delay phase. The case definition has changed as of today:

- Anyone with a new persistent cough and/or fever should self-isolate for 7 days; do not call 111 or contact other healthcare providers.
- If symptoms deteriorate and they feel they need medical care - contact NHS 111.
- There is no need to identify/test every case – testing will only be done for those in hospitals with symptoms.
- There are no geographic limits.
- All school trips abroad will be banned.
- Those aged over 70 with pre-existing medical conditions are advised not to go on cruises.
- When we near the peak (potentially by the end of May) whole households will self-isolate if one member has symptoms. This will be enacted closer to the time.
- The Government is considering banning major events (but not yet in place).

However, we know people will likely contact NHS 111 and/or their practice. NHS 111 will increase capacity to deal with the inevitable increase in demand over the next few days until the new advice has bedded in. If patients call the practice concerned they might have Covid-19, they should be provided with the latest advice, which is to self-isolate for 7 days and if their symptoms worsen, they should contact NHS 111. If a patient presents with symptoms they should be advised to self-isolate for 7 days. The advice from Government is to go to [NHS 111 online](#) first and **not to call**.

[The BMA COVID-19 webpage](#) is updated daily with guidance and links to official information:

- [PHE guidance for primary care](#)
- [NHS England guidance for primary care](#) (including a [letter on preparedness](#) sent on Tuesday, previous [letter on preparedness](#) and [commissioning guidance](#) on suspension of online appointment bookings).
- [Health Protection Scotland guidance](#) for primary and secondary care
- [Public Health Wales updates](#)
- [Public Health Agency Northern Ireland latest information](#)

Read a joint statement from the Chief Medical Officers, GMC, and NHSE/about Supporting doctors in the event of a Covid-19 epidemic in the UK, [here](#)

Read [guidance on data protection and coronavirus](#), from the Information Commission Office.

NHS Scotland has published [information on their web site](#) about the use of PPE, which Scottish practices have received.

In Northern Ireland, it has been agreed to suspend QOF and enhanced services suspension indefinitely. We are in active discussion with NHSE/I about how best to support practices and information should be available about this shortly.

NHSE/I have written to CCGs asking them to extend the out-of-hours provider contracts in England to cover 24 hours, to support patients who have tested positive but who do not require immediate admission and are self-isolating.

I have written to the CQC requesting that all routine CQC inspections within primary care be halted. The CQC has responded to say that they are now making telephone contact with practices rated good and outstanding before an inspection to give the practice the opportunity to decide whether they want the inspection to take place or not, as some practices have expressed a preference for the inspection they have prepared for to go ahead. They have also stopped the provider information collection for all annual regulatory telephone reviews and postponed new registration inspections unless there is an indication of a safety concern. See the latest [CQC web page](#)

We continue to raise issues that need to be addressed with the relevant organisations, and will continue to disseminate information as it becomes available.

If BMA members have any specific concerns or issues related to COVID-19 please contact the BMA's advisers on 0300 123 1233 and support@bma.org.uk. If you have any concerns about employees who may be at risk, contact the [BMA's Employment Advisory Service](#)

I have been interviewed by the BBC, ITV and a number of radio stations including BBC Five Live, TalkRadio and LBC. On Wednesday, I said: "We do expect cases to rise rapidly and over the coming weeks. We will need to stop doing much of the routine work that we do week-by-week to enable us to focus on the sickest patients and prioritise those who most need us.... Routine checks will need to stop." This was also reported by the [BBC](#), [ITV](#), [Daily Mail](#), [Mirror](#), and [Express](#).

The BMA Chair of Council, Chaand Nagpaul, was interviewed by [Channel 4 News](#) where he said, "We have to be rational and being rational is rightly to be concerned and vigilant". He was also quoted in [the Guardian](#). Helena McKeown, BMA chair of RB spoke to [LBC](#), and said that medics, like everyone else, need reassurance at the moment, and that NHS staff need to know they are going to be supplied with the proper equipment over the coming weeks. She also appeared on [Newsnight](#).

Pensions

For over 18 months the BMA has been raising significant concerns over the impact of punitive annual allowance tax charges facing senior doctors across the NHS. The announcement from the Chancellor in the Budget Statement of an increase in the threshold income of all workers to £200,000 (or £240,000 adjusted income) demonstrates that the Government has listened to our compelling evidence. However, it is not everything that we have asked for. We fundamentally believe that the annual allowance is unsuited to defined benefit schemes such as the NHS and many doctors with incomes far below the new threshold income will face tax bills as a result of exceeding the standard annual allowance, which remains set at £40,000. However, the fact that Government has committed to significant taxation reform demonstrates that our campaigning on behalf of members has been effective and delivered an outcome that will help the majority of doctors.

Separately NHSE/I have, after persistent pressure from GPC England, written to all GP contract holders and performers of primary medical services under GMS, PMS and APMS contracts (including Type 1 and Type 2 Medical Practitioners and Freelance GP Locums). The letter gives eligible clinicians assurance that they can undertake any combination of clinical roles for the NHS during the 2019/20 tax year without suffering any financial loss as a result of the annual allowance pensions tax, subject to using the Scheme Pays mechanism. This includes any additional work related to the response to coronavirus. It is important that you understand how pension taxation affects you. You can find information and guidance on the [BMA website](#) and the letter to GPs is attached and please circulate

this widely.

In the coming days we will be considering our full response to the Government's announcement and raising those issues on your behalf that remain unresolved. For GPs it is essential that information about their pension is provided in a much timelier manner so they have the confidence that they will not be penalised for doing more work.

Submission of estimates of pensionable earnings

NHS England have advised that a proportion of practices have still to submit the mandatory 'NHS Pensions - Estimate of GP and non-GP Provider NHS Pensionable Profits/Pay: 2020/21' forms. As the 1 March 2020 deadline for submission has passed, practices are advised to complete this as soon as possible. PCSE have been advised by NHS Pensions from April 2020 to deduct the contributions at the 14.5% maximum tiered rate regardless of previous contribution rates if they do not have the estimate. This will impact on practices resulting in the higher deductions being made. Forms are available from the NHSBSA [website](#) and via PCSE [online](#)

PCN guidance (England)

An updated version of the [PCN handbook](#), taking into account the 2020/21 contract agreement, has now been published, as has the first PCN scenario, based on a four practice PCN in the South West, [here](#) (in the PCN section). Further real-life PCN scenarios will be published in the coming weeks.

GP contract Roadshows (England)

The GPC England executive team have now presented [GP contract details for 20-21](#) at a number of contract roadshow events across England. Most of the others that were planned have been cancelled due to the developing Covid-19 situation. As an alternative to attending an event you can now access the roadshow presentation, with a commentary from me, on the [contract page of our website](#).

Special Conference of English LMCs

The special conference of English LMCs was held this week to discuss the outcome of negotiations and the contract agreement. The motions at the special conference focused on a wide range of contract related issues, including pay transparency, partnership incentives, fellowships, premises, vaccination payments, continuity of care, out of hours care, care home premiums and the future development of PCNs. There was also an important themed debate on the ARRS with motions being passed by the special conference on this area. An emergency motion was also agreed on the response required to support practices during the developing covid-19 pandemic. GPC England will consider how to take the resolutions forward. The conference resolved that a survey of the profession should be done to get feedback on whether practices intended to sign the PCN DES, and this is something GPCE will be trying to do as soon as practical. Read the resolutions [here](#), and access the agenda [here](#) (in 'Conference' tab). A recording of the event is available using this [link](#).

NHSmail for locums in England

We are pleased to announce that [NHSmail for locums in England](#) was launched on Monday after lengthy lobbying by the GPs committee and Sessional GPs committee. Benefits of having an NHSmail include being able to share patient data with NHS colleagues and allowing locum GPs to be added to local distribution lists such as those run by CCGs. This will enable locum GPs to keep up to date on local, regional and national issues. If you are a GP locum in England, you can now apply for an NHSmail account by completing this [form](#).

Serious Shortage Protocol for fluoxetine 10mg tablet

A Serious Shortage Protocol (SSP) for fluoxetine 10mg tablets came into effect today, with an expiry

date of Friday 12 June 2020. The SSP will enable community pharmacists in England, Wales and Northern Ireland to supply patients with fluoxetine 10mg capsules. Read more [here](#)

BMA meetings and conferences

Please be aware that BMA council has agreed that from Monday, 16 March, all face-to-face BMA meetings and conferences of 20 members or more will be rearranged as virtual (or part-virtual) meetings where possible, or cancelled for a period of six weeks initially (and potentially until the annual representative meeting in June) as the NHS works to contain the spread of COVID-19. Importantly this means our members can be where they need and want to be: on the front line supporting their colleagues and patients, and prioritising what spare time they have to rest or spend as they wish, as the spread of the virus continues to escalate. This is not a decision that has been taken lightly and comes following extensive discussion at BMA council.

LMC UK Conference 2020

As of today we have no indication that the LMC UK Conference will be cancelled and can only proceed on the basis that it *is* going ahead. Of course, this situation is very fluid at the moment and may change within days. Can we remind you that currently, the deadline to register to attend the conference and dinner, is **Friday 27 March**, using this link: <https://events.bma.org.uk/uk-lmc-conference-2020/registration>

GPC UK Regional elections

Please be reminded that elections for the following regions will close at noon, 16 March:

- Gloucestershire and Avon
- Leicestershire, Rutland and Northamptonshire

To submit your vote please go to: <https://elections.bma.org.uk/>. If you have any queries, please contact elections@bma.org.uk

Patient Liaison Group vacancy

The BMA's Patient Liaison Group (PLG) is looking to recruit one 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. The individual will have an active interest in influencing health policy and working to improve patient care. Please note, the new doctor member can't be an existing member of a BMA committee. If you are interested in applying, read more on the [BMA website](#)

See the last GPC bulletin [here](#)

Have a good weekend

Richard