



## GLASGOW LOCAL MEDICAL COMMITTEE LIMITED

14<sup>th</sup> October 2022

To All GPs and GP Practices

Please note important stop press at foot of this comms

Welcome to our October newsletter. We hope you are well and are managing despite the increasing pressures on general practice at the current time. A number of you will be taking a well earned break for the school October week. Time off to recharge and spend time with loved ones is vital but it does leave practices with fewer staff members and this undoubtedly adds to the challenges on GP practices. We know that the recruitment of GPs, clinical and admin staff has been difficult in recent times. In this newsletter we will be outlining some of the work we are doing to help practices with sustainability and workload.

### GP Practice Sustainability

General Practices are facing unprecedented demand on their services. Reported workloads in practices are up by 10-15% compared to pre-pandemic times. The ongoing challenges in recruitment of GPs and other practice staff are adding to the pressures on practices. We know that a significant factor in the rising workload in general practice is due to the long waiting times in secondary care for outpatient appointments, for procedures and scans, and for operations. We have said to the Board that secondary care services need a system to actively manage their waiting lists and to provide information and assistance to patients without the need to go back to the GP while on waiting lists for secondary care services.

We also know that timely access to Mental Health services needs to improve. The service needs to provide responsive help and treatment to patients who have been referred by their GPs. We continue to work with mental health to improve patient referral pathways.

We have heard that abuse to GPs and practice staff continues, and this is not acceptable. The GMS Regulations allows for patients who have had a warning within 12 months to be removed from the practice list. The Challenging Behaviours Rehabilitation Scheme is operating across GGC for people who have been violent or threatening in a practice setting which has required the police to be called.

The coming winter looks set to be the most difficult time yet for the NHS- the pressure on services and staff are across the whole of the health and care system is extreme and unprecedented. Funding and investment for services is not keeping pace with inflation nor demand. General Practice may need to “batten down the hatches” to sustain it through the current situation but we know that that may not be easy.

The board level updated Practice Escalation Framework is in the final stages of development and will provide a stepwise response for practices in difficulty as well as a reporting mechanism that will highlight the problems facing GP practices. We continue to work with the Board and national groups on other supports for practices. This includes looking at the activity data from practices, options for practices to actively manage their work and pushing back on

inappropriate workload, and other support such as managing document workflow and signposting. These documents will be shared with practices as soon as they are approved and available.

### **BMA Survey**

A letter from SGPC was circulated by the LMC office on Wednesday regarding BMA Scotland's vacancy survey, which is designed to provide a picture of the recruitment and capacity challenges currently facing general practice in Scotland. This is a key survey for SGPC and the results will be important and useful to SGPC when in discussion with Scottish Government on the challenges facing general practice and progress towards the additional GPs promised by Scottish Government by 2027. The national negotiators at SGPC will be directly informed of the current situation in General Practice in Scotland by this survey.

The survey takes around four minutes and the BMA Scotland is looking for one response per practice. If you require the link to be re-sent, please contact the LMC office.

### **PCIF Funding**

We reported in our [last newsletter](#) that we were deeply disappointed in the Scottish Government's announcement that HSCPs' reserves of PCIF (£53.4m) would be used to make up the total funding of £170m for 2022/23. This is a cut in the investment for the implementation of the 2018 Contract. It hits our PCIPs particularly hard because most, if not all, of the "underspends" had already been earmarked for investment in services and premises. It was not money left in the bank but funding that was vital for improving services to reduce GP practice workload and to allow shorter waits to see the GP.

The PCIF for 2022/23 is a real terms cut in funding with only £117m of new money. This compares with the PCIF in 2021/22, which was £115m, and in 2020/21 it was £110m. We have expressed our views directly to the Scottish Government about this and also reminded them of the promises made in the 2018 GP Contract.

Our medical director, Dr John Ip, was featured in The Times recently in an article on this. [Patients to wait longer to see GP after funding pledge withdrawn | Scotland | The Times](#)

### **GMS Pay Uplift**

We are awaiting an announcement from the Scottish Government regarding the GMS uplift for 2022/23. SGPC remain in negotiations with the Scottish Government on this. We are acutely aware of the financial pressures being faced by practices, including regarding queries on staff pay and energy costs.

### **List Closures**

Workload pressures may mean that practices are considering closing their lists to new patients. If GPs are considering this, the practice should contact Primary Care Support and their Clinical Director stating their intention to apply to close their practice's list. The Board and HSCP can usually schedule a meeting at fairly short notice to meet with the practice and discuss the application to close the list. A closure notice form requires to be completed as part of this process.

## Winter Vaccines

Covid and influenza vaccinations are being delivered by the board/HSCPs. The following link has information for if practices are looking to respond to enquiries from patients-[Winter vaccines | NHS inform](#).

## Working Health Services Scotland (WHSS)

Working Health Services Scotland (WHSS) is a Scottish Government funded NHS service that provides free and confidential advice and health support for people who are self-employed or working in companies with 250 or less employees and have a health condition or injury which they feel is impacting on their work. More information can be found at [Working Health Services Scotland \(WHSS\) - Health and Well-being \(nhsinform.scot\)](#)

## Wellbeing Resources

The cumulative stress of the pandemic, the workload pressures, and patient demand is undoubtedly affecting people's mental health. We know that practice leadership, and a supportive and valuing culture in general practices is vital in maintaining the wellbeing of the practice team. These are some of the wellbeing resources available to GPs, PMs and practice staff-

National Wellbeing Hub- [www.promis.scot](http://www.promis.scot)

NHS GGC Occupational Health Service-

<https://www.nhsggc.org.uk/working-with-us/hr-connect/occupational-health/covid-19/>

[Covid-19 Staff Support Line](#)- 0141 303 8968

The Workforce Specialist Service-

<https://www.practitionerhealth.nhs.uk/accessing-the-service-in-scotland>

BMA Wellbeing Resource-

<https://www.bma.org.uk/advice-and-support/your-wellbeing/wellbeing-support-services/sources-of-support-for-your-wellbeing>

## STOP PRESS

[Immediately before issuing this newsletter an important development to bring to practices attention](#)

## GP IT Re-Provisioning Update

We were informed on 13<sup>th</sup> October that EMIS has confirmed to NSS that they are withdrawing from the Scottish Framework Agreement.

A Termination of Framework Agreement was co-signed by NSS and EMIS on 6 October 2022. Therefore, EMIS is no longer developing a new clinical system for use in GP practices in Scotland. EMIS has confirmed that the company will be maintaining EMIS PCS support until 2026 to allow practices to migrate to another system.

The position of the Board, which is supported by the LMC, is to move to a Direct Award for the Vision system. The plan would be to wait until Vision Anywhere (VA) is fully accredited (by summer 2023) and to migrate EMIS PCS practices to VA. NSS have produced an FAQ related to EMIS' withdrawal which will be circulated to all GP practices along the with NSS GP IT RP newsletter.

The national GP IT Service Management Board is due to meet on Tuesday 26th October and further information about the re-provisioning process will come from NSS. Engagement with individual practices will begin after that and all practices will receive communication directly from the eHealth department about this.

Yours sincerely,

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Chair

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