## CLMC Bulletin 368 - 23.10.18

### Pregabalin and Gabepentin

The has <u>Home Office announced</u> that pregabalin and gabapentin are to be reclassified as class C controlled substances from April 2019 amid concerns people are becoming addicted to them and misusing them. This is in line with what the BMA has been calling for following an ARM resolution to lobby the appropriate authorities to make pregabalin a controlled drug.

### Pension Changes

The Secretary of State has responded to GPC concerns about the impact of pension changes on GP retention in a <u>letter to the BMA</u>. Growing numbers of doctors are facing problems created by recent pension changes and this is having a real impact on workforce retention. One of these problems is that the Annual Allowance is currently set at £40,000 and tapers down to £10,000 for higher earners, and those who exceed the standard Annual Allowance limit or the reduced tapered Annual Allowance are subject to a tax charge. This can either be made by paying the tax from savings via the tax return (taxed at the marginal tax rate) or by applying to use "scheme pays".

Further to several approaches made by the BMA, including a recent letter to the Chancellor of the Exchequer, NHS BSA has now agreed to permit the use of "voluntary scheme pays" to those who may have exceeded their tapered limit, but not necessarily the standard limit. Additionally, the requirement to have a tax charge of £2,000 or more is no longer required. This will be available from 2017/18 onwards and more details can be found <u>here</u>

Whilst the BMA continues to challenge the application of annual allowance and other wider pensions issues, this change at least allows those members affected the option not to have to fund the charge from savings, investments or borrowings.

GPC have updated their <u>guide to annual pension allowance</u>, which provides examples of how to calculate your annual allowance growth.

### **TPP Data Sharing**

The Joint GP IT Committee (JGPITC), co-chaired by GPC and RCGP, had previously raised concerns regarding the sharing of patient records in TPP's SystemOne software. New functionalities were deployed and implemented earlier this year and are now fully embedded.

Consequently, the JGPITC is confident that GP Data Controllers using TPP SystemOne now have the tools they need to ensure that they comply with GDPR and DPA 2018, but which also support appropriate sharing of data for care. To that end the JGPCIT is of the view that the concerns it raised have been fully answered and considers the matter closed. This is the end result of significant collaborative work between the Office of the Information Commissioner, NHS England, NHS Digital, TPP, the RCGP and GPC over the last 2 years.

### NHS Standard Contract Tool for Primary and Secondary Care

NHS England has published a NHS standard contract <u>implementation toolkit</u> to improve working practices and patient experience between primary and secondary care. The toolkit contains a practical guide to support local systems to work together to implement these changes. The BMA, along with other stakeholders, was involved in the development of this resource, which is aimed at reducing some of the avoidable transactional processes between primary and secondary care.

The BMA has also produced <u>guidance and resources</u> to help improve the interface between primary and secondary care, including guidance on prescribing and referrals, and template letters to support GPs and CCGs.

### **Doctors Mental Health**

The BMA has published a <u>report on supporting doctors' health and wellbeing at work</u>. The report sets out the physical and mental health challenges faced by doctors, the benefits of a healthy workforce and makes recommendations for improvements.

NHS England also announced that a <u>new mental health support scheme</u> for all doctors working in the NHS would be launched. This builds on the existing <u>NHS GP Health Service</u>, which was rolled out across England last year in response to GPC England's campaigning, and which has now supported over 1500 GPs and trainees suffering from mental health concerns. This service is very valued by GPs, with a recent survey suggesting 93% were likely to recommend the service to others and 88% said it had a positive impact on their wellbeing.

The BMA has launched a survey to find out how doctors are feeling and coping, and whether you can get the support you need, so that they can lobby for the wellbeing doctors. Access the survey <u>here</u>

The BMA also provides a confidential, 24/7 counselling service and a peer support service, which can be accessed by calling 0330 123 1245. Visit <u>bma.org.uk/yourwellbeing</u> for more info.

### Locum Protocol FAQs

Following a number of queries about the way CCGs across the country are interpreting the practice entitlements under the SFE, the GPC has been engaging with NHS England to clarify the specific clauses relating to payments for locum covering sick leave and phased return to work. NHS England has now released some <u>FAQs</u> to clarify to both practices and CCGs.

### **GP Retention Scheme**

As of June 2018, around 295 GPs across England had joined the <u>GP Retention scheme</u> to give them the flexible working options they need to enable them to remain in practice. From having time to care for your family, wanting to reduce your hours as you approach retirement or to receive educational and development support after a period of absence, all GPs who are considering leaving General Practice and their employers should seriously consider applying to their CCG and joining this scheme. Watch the GPC <u>video</u> interview with two GPs explaining how the scheme has helped them to continue practising.

### Vision for Digital, Data & Technology in Health Care

The Secretary of State, Matt Hancock, has published his <u>vision for digital, data and technology in</u> <u>health and care</u> along with a <u>draft framework for technology standards by NHS Digital</u>. The vision document focuses on improving tech, on interoperability and data-sharing, on supporting the professionals who work in the NHS and on building the right culture. The Department of Health and Social Care and NHS Digital would welcome views and feedback on both of these documents.

General practice has always been at the forefront of IT innovation and adoption in the NHS. We have already highlighted to the Secretary of State for Health and Social Care the needs for investment and development in IT infrastructure and capabilities to enable us to use systems both for the benefit of patients but also to help manage workload pressures better. GPC will be looking closely at the plans and working with the government to take them forward in a way that delivers for general practice and our patients.

### **Investment in Public Mental Health**

The BMA has published a <u>report</u> calling for greater investment in public services to prevent poor mental health, in response to growing concerns from doctors about the sheer scale of the mental health problem in the UK. There is an urgent need for a bigger picture approach on the social causes of poor mental health to truly tackle the rising demand.

## Statutory Regulation for Physician Associates

The Secretary of State for Health and Social Care has announced the introduction of statutory regulation for <u>PAs (physician associates)</u> and physician assistants in anaesthesia. This follows a consultation on the regulation of the four MAPs (Medical Associate Professions) which concluded in December 2017, and <u>in response to which the BMA called for statutory regulation for PAs</u>.

GPC are yet to receive and written confirmation of the regulation decision. So far there has been no indication of when full regulation can be expected or which body will have responsibility for regulation of these roles. It also has not been confirmed whether the remaining two MAPs professions (Surgical Care Practitioners and Advanced Critical Care Practitioners) will be regulated and that this remains under 'active consideration'.

### Supplies of Hep B Vaccine Update

MSD has issued a customer letter advising that the adult presentation of the Hepatitis B vaccine, HBVAXPRO 10mcg, is likely to go out of stock very soon. Further deliveries are not expected until early 2020.

This is an ongoing issue and the DHSC has been working with GSK on to ensure they are able to support the market during this time. GSK have advised they have good supplies across all Hepatitis B vaccines. Providers should, therefore all be able to continue to access GSK stock (including the Engerix B adult presentations) in line with usual requirements.

### EpiPen supply issue and anaphylaxis packs

The Department of Health and Social Care has issued this <u>information</u> due to a number of queries received about anaphylaxis packs and issues with replenishing these due to the EpiPen supply issues. This communication has been produced to remind practices to help conserve adrenaline-auto-injectors. Note that similar communications have also been sent to dentists and schools.

In terms of adrenaline ampoule supply, please see current supply position:

Adrenaline 1:1000 1ml ampoules:

- Martindale temporarily out of stock until end of October, some stock still available at wholesales
- Hameln- supplies available and aware of Martindale's out of stock period. They are able to support additional usage in primary and secondary care during this time.

Martindale have all of the following adrenaline products available:

- Adrenaline Injection 1mg in 10ml (1 in 10,000) PRTC Pre-filled syringe
- Adrenaline Injection 1 in 10000 10 X 1ml ampoule
- Adrenaline Injection 1 in 10000 10 X 5ml ampoule
- Adrenaline Injection 1 in 10000 10 X 10ml ampoule
- Adrenaline Injection 1 in 1000 10 X 5ml ampoule
- Adrenaline Injection 1 in 1000 10 X 5ml ampoule
- Adrenaline Injection 1 in 1000 10 X 0.5ml ampoule

## CQC state of care report 2017/18

The CQC published its <u>State of Care report</u> yesterday, which is an annual assessment of health and social care in England. The report found that 91 % of GP practices were rated good in 2018, with a further 5 % rated outstanding, despite increased pressure on services.

Once again, general practice has been found to be delivering the highest standard of care compared with other sectors, despite the workload pressures CQC themselves focus on. This achievement is down to the hard work of GPs and their practice staff, and provides further evidence of the benefit of the partnership model of working. However we can't take this for granted and the review was right to point out the need for additional support and investment in general practice and community based services.

# **CQC Provider Information Collection**

The CQC has been engaging with the GPC on the development of its annual provider information collection (PIC), which is to replace routine two-yearly inspections for practices rated good or outstanding. More details are available in this CQC <u>communication</u>

## Infection Prevention & Control Bulletin

The <u>latest Bulletin</u> from the Community Infection Prevention and Control Team for General Practice focuses on the 'International Preventing Infection Week 14-20 October 2018'.

### **GPC Newsletter**

Read the latest GPC newsletter here.

## **GPC Sessional GP Newsletter**

Read the latest Sessional GPs newsletter here

### **GPC Trainee GP Newsletter**

Read the latest Trainee GPs newsletter here.