

New guidance for care providers on EU Settlement Scheme

The Care Provider Alliance (CPA) has published new guidance about the EU Settlement Scheme for social care providers. The guidance explains how care workers and service users who are EU citizens can apply to continue to live, work, and access funding and care services in the UK after 30 June 2021.

According to the CPA, EU citizens make up around 8% of the total social care workforce in England, meaning that the consequences for employers in the care sector are significant. The CPA guidance includes information about how to support care workers who may need to apply to the settlement scheme. In addition, it clarifies employers' legal obligations, for example the procedure for carrying out 'right to work' checks on new EU workers from 1 January 2021.

The guidance also recommends that care providers should inform

service users and their families about the settlement scheme. According to the CPA, local authorities will expect care providers to take steps to identify and support service users who are EU citizens, especially in cases where they lack the mental capacity to access the scheme without support.

Key recommendations covered in the guidance include assessing how many staff members and service users might need to apply, and review business continuity plans to ensure that they cover the impact that leaving the EU will have on their workforce. Care providers should also ensure that employees who are EU citizens are not subjected to discrimination or harassment.

To support service users, care providers should consider distributing information leaflets, holding meetings with service users and their families, or contacting

Citizens Advice, Age UK, and the Carers Trust to see if they are running local awareness campaigns. They should also identify staff members who can direct service users to sources of information about the EU Settlement Scheme. However, care providers should take steps to ensure that their staff do not act as formal advisers on the application process.

Resources provided in the guidance include links to an employer toolkit published by the Home Office, a template business continuity plan, translated leaflets in various languages, information about digital services to help care workers and service users apply to the scheme online, and contact details for organisations that may be able to help care providers.

Read more about the guidance at: <https://bit.ly/3iftJSn>



GP voluntary early retirement rate doubles

The number of GPs in the UK taking voluntary early retirement has risen significantly, according to figures revealed in the Doctors and Dentists Review Body (DDRB) report published in July 2020.

The report reveals that 3,349 GPs took voluntary early retirement in the five year period to 2018/19, when at least half the total number of GP retirements were voluntary. This is compared to 1,741 GPs who took voluntary early retirement in the five year period to 2011/12, which accounted for around a third or less of the total number of retirements each year.

The DDRB report also revealed that in 2017/18 to 2018/19, a combined total of 1,194 GPs took early retirement, compared with 463 in 2007/08 and 2008/09 combined. According to the BMA, early retirement among GPs is the result of underfunding and rapidly increasing workload pressures, which have become unsustainable over the last decade, mainly as a result of increasing bureaucracy and overregulation.

GP leaders have warned that there needs to be a focus on retaining experienced GPs, as despite record numbers of GP trainees being

recruited, more than 3,600 full-time equivalent GP partners have left the profession since March 2016.

The BMA has also warned that the government's decision not to consider pay increases for GPs beyond the five year GP contract introduced in 2019 was disappointing and could lead to more GPs taking early retirement. However, the government has accepted a recommendation from the DDRB that resulted in other doctors receiving a 2.8% pay rise.

Read more about the report at: <https://bit.ly/2FmszWB>

Minor surgery income protection payments to end

A decision by NHS England to discontinue minor surgery income protection payments means that GPs face a significant loss of income unless they restart providing minor procedures such as corticosteroid joint injections.

The income protection payments were introduced when GPs were unable to carry out a range of routine services, such as minor surgery, due to restrictions imposed as a result of coronavirus. In June 2020, NHS England announced that GPs will be required to resume many of these services, as part of the planned 'second phase' of the general practice response to coronavirus. As a result, income protection payments, which compensated GPs for the loss of income from providing surgical procedures such as injecting corticosteroids into joints, will come to an end.

However, medical guidance published in June 2020, which is supported by the Royal College of General Practitioners, the British Orthopaedic Association and the British Society of Rheumatology,

warns that GPs should exercise 'extreme caution' about providing corticosteroid joint injections. This is because steroids suppress the immune system and put patients at greater risk of becoming seriously ill if they contract coronavirus.

According to the guidance, GPs should carefully explain the risk to patients and provide the

injection only where symptoms are severe and there is no alternative.

GP partners believe they are being asked to make a decision to take a significant cut in income or start minor surgery at the patient's risk. GP partners also feel like they are being asked to 'make things up as they go along' despite guidance being published.

Read more about income protection payments at: <https://bit.ly/2GIVc18>



In brief...

Consultation on pension age discrimination

HM Treasury is consulting on changes to the transitional pension protection arrangements that were introduced in 2015 as part of reforms to public service pension schemes. The consultation was announced after the Government admitted the protection arrangements for older GPs resulted in unlawful age discrimination. This is because GPs, who were closest to retirement age had the choice to remain in legacy pension schemes and not transition onto the reformed schemes. The consultation sets out two proposed options for addressing age discrimination between scheme members. Each option would allow eligible members to choose whether to transition to the new scheme or remain in their legacy pension for the period from 1 April 2015 to 31 March 2022. <https://bit.ly/35jj0Tr>

GP practices will take at least 12 months to return to full capacity

The BMA 'COVID-19 Tracker Survey' has revealed that a third of GPs believe it will take at least a year for their practice to return to pre-COVID-19 levels of capacity if there are no additional spikes of the virus. Around 26% of GPs think it will take between 3 and 12 months to return to normal capacity, while 7% said it could take longer than a year or that they would never reach pre-pandemic levels. Social distancing, challenges clearing patient backlogs and maintaining spare capacity to manage local outbreaks are the main reasons why practices are struggling with capacity. <https://bit.ly/3jKflgn>

Calls for Government to support private dentistry

The British Dental Association (BDA) has warned that many dental practices are at risk of closure due to the rising costs of providing care under coronavirus restrictions. A fall in the number of patients who dentists are able to see due to social distancing and the high cost of personal protective equipment (PPE) are significant challenges. Dental practices that treat NHS patients have been particularly affected, as they cannot charge patients a surcharge to cover PPE costs. The BDA has urged the Government to provide more financial support for private practices to remain open and reduce the pressure on NHS practices. <https://bit.ly/2FfEDt7>

Patients favour pharmacies during COVID-19

Almost a third of people are more likely to visit a pharmacy first before seeking medical advice elsewhere than they were before the coronavirus pandemic, according to a survey by the Pharmaceutical Services Negotiation Committee. In addition, 69% of people are more likely to consider self care as their first option, while 32% said the pandemic has made them reconsider how they use NHS services. Overall, 86% of survey respondents said A&E and GP appointments should only be used if essential. The research has also indicated that the rise in people choosing self care instead of visiting their GP practice or A&E could save the NHS around £780 million per year. <https://bit.ly/2ZkkRnc>

New Pharmacy Quality Scheme to manage COVID-19 risks

The Pharmaceutical Services Negotiation Committee has announced a new Pharmacy Quality Scheme (PQS) to help pharmacists in England protect staff and patients during the coronavirus pandemic. Under the scheme, pharmacists will be able to claim £1,630 if they satisfy 14 criteria to protect people from COVID-19. The criteria includes carrying out COVID-19 risk assessments, implementing a system to refer staff with COVID-19 symptoms for testing, and carrying out infection control risk assessments. <https://bit.ly/3he57YQ>

PCNs improve collaborative working

Primary Care Networks (PCN) have significantly improved relationships between general practices since their introduction in 2019, according to a report from the NHS Confederation. PCNs are groups of general practices that work together with local providers across primary care, social care, community services and voluntary care. The report has revealed that before PCNs were introduced there was limited interaction between general practice and other local providers. The use of new digital platforms has also helped facilitate collaborative working and communication between healthcare organisations involved in PCNs. The coronavirus pandemic has accelerated the adoption of new digital platforms. <https://bit.ly/2Fhc0fm>



Covid-19 pay rise for NHS dentists

The British Dental Association (BDA) has defended the inclusion of dentists in a public sector pay award related to Covid-19, even though dental practices were forced to close during the lockdown.

In July 2020, the Chancellor announced pay rises for 900,000 public sector workers in recognition of their work during the pandemic. This includes doctors and dentists who will receive a pay rise of 2.8% backdated to 1 April 2020. However, the BDA points out that many dentists continued to work during

lockdown in urgent dental care centres and in hospital Covid-19 wards and general anaesthesia departments. In addition, funding cuts for dentistry mean dentists have not received an above inflation pay rise for many years.

The BDA has also described the pay rise for dentists, which applies to NHS funded work only, as a step in the right direction for the sustainability of dental practices.

The Government has provided no financial support for private dentistry, which the BDA has warned jeopardises the future of

'mixed' practices. These practices provide NHS funded work and treat patients paying privately, either directly or through a dental insurance policy or cash plan. Mixed practices are often reliant on income from private work to survive.

According to the BDA, the cost of making dental practices Covid secure and the drop in income from private dentistry, due to reduced capacity, means that many mixed practices are in danger of going out of business.

Read more about this story at: <https://bit.ly/2FfEDt7>



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Additional funding to help GPs return to practice

NHS England has provided additional funding to help GPs with caring responsibilities return to the profession.

The funding is being made available through the NHS Induction and Refresher scheme, which provides a direct route for qualified GPs returning to the NHS after a career break or time spent practising overseas.

Qualified GPs joining the scheme are able to access up to £2,000 to pay for the cost of caring for family members or children if it prevents them from completing any necessary training. GPs can claim for caring costs retrospectively up to April 2020.

The British Medical Association (BMA) has welcomed the extra funding and believes that childcare and other caring responsibilities should not be a barrier for those GPs who want to offer their valuable and much needed skills to the NHS.



More than 500 GPs have returned to general practice through the NHS Induction and Refresher scheme since it was set up in 2016. Other scheme benefits include a £3,500 bursary and reimbursement of up to £18,500 for relocation expenses, as well as access to a national support team.

The number of full time or equivalent GPs in England has remained at around 34,000 since 2015. However, the actual number of GPs (the head count) has risen by approximately 5,000.

Read more about the additional funding at: <https://bit.ly/3lcv0uw>