



Welcome Back to Work

Tips and Resources for GPs returning
due to COVID-19 after Career Breaks

April 2020

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Introduction

The general public and existing GP workforce are incredibly grateful to all returning practitioners for their instrumental contribution during the COVID-19 crisis. Their input and experience will be invaluable to the workforce in these uncertain times.

It is however well recognised that this may be a very challenging and quick transition for many to make. It may feel daunting and overwhelming with a constant stream of new information in a rapidly evolving situation. Bear in mind the majority of existing practitioners are also having to adapt quickly picking up new skills such as remote consulting. There is a huge amount of camaraderie and support out there and with the aid of this document we aim to help make your transition back into practice as smooth as possible.

This document was designed originally to help GPs returning from career breaks but has been adapted specifically for practitioners returning to help with the COVID-19 crisis. It provides local contacts within Nottingham and Nottinghamshire but also has information on the logistics of getting back up and running for all.

For any further queries or comments please don't hesitate to contact us at info@phoenixprogramme.co.uk

Back to Work: Four Key Areas

There is a lot to think about on returning to work after time away. A useful approach is to break down return to practice into the following areas:

1. Practice/Workplace
 - a. Induction checklist
 - b. IT/computer tips
2. Staying in the Loop: Clinical resources, local updates/guidance/pathways
3. Personal Wellbeing: Sources of practitioner support
4. Professional Administration
 - a. GMC - registration and regulatory standards
 - b. Performers list
 - c. DBS
 - d. Appraisal and revalidation
 - e. IR35
 - f. Indemnity
 - g. Pension

The above areas have been adapted to provide specific advice for those returning to help during the crisis, general and more detailed updates can be found in the Welcome back to Work Document on the [Phoenix Programme Website](#).

Practice/Workplace: Induction

NHS England states it is offering an induction process for returning practitioners however as GPs it is important to familiarise yourself with practice specific aspects to reduce queries and stay safe.

It may not be practical to do this in person under the current circumstances but a useful checklist to cover is listed below.

Building/out and about

- Key codes for doors/FOB/car park pass
- Satnav - ensure this is working to save time and stress
- Emergency bag/equipment - where to locate it and what is in it
- Emergency telephone number for the practice - e.g. if running late/off sick to avoid having to go through reception

Room

- Panic button
- List of internal and external phone numbers including acute care numbers and language line code
- Equipment - check the clinical equipment you have and need is working and PAT testing is up to date!
- See IT/computer tips for more specific advice

Policies, procedures and communication

- Every practice does things differently, and things change quickly. Ask for a locum pack, which you can refer to. If this is not available, try to familiarise yourself with the following:
- Repeat prescriptions, referrals- 2 week waits, routine advice and guidance, sick notes, letters, results, scripts, buddying, tasks
- How the practice communicates with each other - ensure you are on the mailing lists for appropriate e-mail/ notifications, many now have watsapp groups

COVID-19 specific information

A rapidly evolving area and each practice may be handling things differently so be clear before starting.

Assessment of COVID-19 patients:

- Where is the hot zone?
- By whom - specific shift for face to face assessment?

- How to bring patients safely in and out of the building
- PPE
- What to wear for work shifts (some practices using scrubs) and how to clean
- Cleaning of the clinical area after assessment
- Home visits - protocols for visiting at risk patients, how to dispose of PPE etc.
- Telephone consultations
- Video consultation tools/apps used by the practice
- Handling of prescriptions (many now electronic) and sick notes
- Other useful resources used by the practice - triage guide/telephone/video consultation guides, death cert process

Documents to consider having ready

For locums:

- ID - passport/driving licence, proof of address.
- Original GMC certificate
- Proof of recent DBS check (number if available)
- Letter of being on a Performers List
- Original Primary Degree Certificate and qualifications
- Proof of immunisations, including Hep B

For all:

- Indemnity Insurance
- Level 3 Safeguarding/ Adult Safeguarding
- Advanced Life Support Training
- Car insurance (for Business use) for home visit

Practice/Workplace: IT/Computer Tips

Taking a little time to have things set up in advance can save time in consultations and avoid unnecessary hold ups and glitches.

General

- Smart card - email your number to the practice to activate in advance
- Computer - have a run through computer (and printer) prior to seeing your first patient
- Printer paper – who is responsible for loading this (and where it is kept)

Logins

- Windows login, Clinical system login, ICE/test requesting, Intranet, Dictation, NHS e-mail, Blue Stream
- Consider logins for GP access, Notis
- Instant messaging system- familiarise yourself with this
- Ask to be included onto e-mail circulars/update lists

F12 Pathfinder

- SystmOne based practices are streamlining towards using F12 pathfinder for most referrals and guidelines. e.g. referrals, advice and guidance forms, guidelines for individual specialty, service restrictions, acute care numbers and protocols, 2WW referrals, community referrals and safeguarding.

Nottinghamshire APC (Area Prescribing Committee) website

- For local prescribing guidelines, formularies and shared care protocols.

Teamnet/Clarity website

- Useful website linked to clarity appraisal to directly record CPD who also send out weekly bulletins- see staying in the loop for further information.

Telephone/ video consulting

- How to install/set up AccuRx/video consulting tools
- Clarity TeamNet Hot Topics: [Top Tips for Telephone and Video Consulting Webinar](#).

Staying in the Loop

We are lucky to have access to a variety of digital resources that enable us to keep in touch with changes in the profession. Amidst the COVID-19 crisis be selective about what works best for you, as not to be overwhelmed by updates and repetitive information.

Clarity TeamNet

Recommended for one centralised website with a huge range of educational resources and local updates:

- Daily local COVID-19 updates
- Weekly round up of local changes and events
- Clinical resources - NICE and local guidelines/leaflets and webinars
- Updates and events - ICS, Alliance, CSI, CCG, area team, LMC
- Contacts - Useful telephone numbers for both clinical care linked to NUH and for non-clinical and support roles
- Many practices also use their calendar, check with your practice manager

Clinical guidelines

- NICE/CKS Website and GP notebook

Useful email lists

- Alison Wynne - alison.wynne84@gmail.com for local events and job opportunities for locums
- Appraisal and revalidation team updates - england.revalidation-support@nhs.net
- LMC weekly updates - office@nottslmc.co.uk
- RCGP updates - updates@rcgp-news.com
- Local RCGP Vale of Trent Faculty updates - janet.baily@rcgp.org.uk
- Teamnet/Clarity updates usually include a summary of the above - teamnet-admin@clarity.co.uk

E-learning

- Clinical - RCGP, doctors.org.uk, BMJ, appraisal providers - Clarity, e-learning for health (including online safeguarding), Red Whale, Teamnet
- Non-clinical – Blue Stream, indemnity providers, GMC and defence organisations all offer e-learning modules and bulletins.
- GP Technology – [e-GP Learning](#) supports clinicians with technology-enhanced primary care and learning.

Podcasts

A fantastic, time efficient way to learn on the go:

- Clinical - 2 Paeds in a Pod, RCGP Essential Knowledge, BMJ Podcast
- Non-Clinical - The GP Podcast by Ockham Healthcare for all the latest on changes in GP, BBC radio 4 Inside Health and You are not a Frog
- Acronyms of General Practice- with the GP Taskforce
<https://egplearning.co.uk/?s=acronyms>

Local Updates

The Health and Care Nottingham and Nottinghamshire Integrated Care System (ICS) website news and blogs section Dr Sonali Kinra (GP Retention Lead) brings together a monthly summary of key updates both centrally and from local forums.

<https://healthandcarenotts.co.uk>

NASGP and Locum chambers

- The [National Association for Sessional GPs](#) provides useful resources for sessional (locum and salaried) GPs.
- Local advice/support for details of the [Nottinghamshire Sessional GP Subcommittee](#).

Social media

Great for keeping up to date with current issues in GP often with a stream of cases posted by GPs with feedback and advice, a chance to reflect on how you would do things:

- Facebook groups - Resilient GP, Tiko's GP group, Physicians mums, First 5
- Twitter/Instagram – follow who you find inspirational

Webinars

A great way to learn interactively from the comfort of your own home, there are increasing numbers of these including:

- Red Whale, NB medical, Teamnet, Clarity, defence organisations

WhatsApp

There are many local COVID-19 based WhatsApp groups and many practices have their own version. Beware of information overload and rationalise what you can keep up with.

Wellbeing: Sources of Practitioner Support

GP wellbeing and stress management is increasingly being recognised as a vital for improving morale, resilience and ultimately optimising quality of care.

NHS Employers free apps

Free access to wellbeing apps for NHS employees until December 2020 including:

- Unmind - a mental health platform that empowers staff to proactively improve their mental wellbeing.
- Headspace - mindfulness and meditation app
- Sleepio - personalised sleep improvement programme
- Daylight- smartphone based app uses CBT voice and animation to help with worry and anxiety

To access these tools please visit the [NHS Employers website](#).

Practitioner Health

NHS Practitioner Health can help with any mental health or addiction issue, which may be affecting your working life.

Opening hours: Mon-Fri 8am-8pm and Sat 8am-2pm

Telephone: 0300 030 3300

Email: prac.health@nhs.net

Website: www.practitionerhealth.nhs.uk

LMC Pastoral Support Network

Made up of experienced advisors, mainly retired GPs to provide personal and confidential support for any local GP undergoing personal difficulty or crisis including domestic, professional and health problems.

office@nottslmc.co.uk

For further information on health and wellbeing please see the [Phoenix Programme website](#).

References

<https://php.nhs.uk>

<https://www.nottinghamshirelmc.co.uk/support/pastoral-support/>

Professional Administration

GMC Registration

As part of the coronavirus response the GMC has been granted emergency powers for temporary registration of practitioners who have left in the preceding three years returning to help with the crisis.

They have automatically given a licence to practise to all those doctors who haven't opted out. If they haven't contacted you and you'd like to be considered for temporary registration, please send your details to gmc@gmc-uk.org or call 0161 923 6602.

The GMC says, "doctors in this group would automatically be granted temporary registration for the duration of the emergency, they wouldn't be charged to re-join the medical register and they wouldn't need to revalidate during their temporary registration."

Full guide can be found at <https://www.gmc-uk.org/news/news-archive/coronavirus-information-and-advice/our-emergency-powers>

GMC Regulatory standards

The GMC have published a joint statement, with other statutory health and care regulators in the UK. The statement recognises the vital role that health and care professionals will play in responding to the pandemic. It says that:

- Healthcare professionals may need to depart from established procedures to care for patients in highly challenging circumstances
- Our guidance provides a framework for decision making in a wide range of situations
- Doctors need to use their judgement to apply the principles in our guidance to the situations they face

It also states that concerns about registered professionals will always be considered on the specific facts of the case, the situation in which the professional is working and any protocols in place at the time. The scale of the challenges to delivering safe care would also be relevant to a question about the clinical care provided by a doctor.

Further information- <https://www.gmc-uk.org/news/news-archive/coronavirus-information-and-advice/how-we-will-regulate>

Performers List: For Emergency Medical Practitioners returning to help with COVID-19 crisis

Your name must be included on the List during the time defined by the Government as an emergency. If you're a GP who has left in the preceding three years, NHS

England will be contacting you to invite you to be reincluded by filling in a short form. If you do not hear from NHS England and you wish to offer your services, please email england.erplists@nhs.net. Once forms have been received, NHS England will confirm your inclusion on the List as an ERP.

Reference: <https://www.england.nhs.uk/coronavirus/returning-clinicians/faqs-doctors/primary-care-performers-list/>

Primary Care Support England (PCSE) is responsible for administering entry and status changes to Performer Lists on behalf of NHS England. The service moved to PCSE online from 2 December 2019 meaning paper, electronic/word/pdf are no longer accepted.

If off work for short periods of time, your performers list status may not change but there are circumstances you do need to inform PCSE of changes by updating online:

- Movement to a different Area Team
- 24 Hour Retirement
- Change of Name, Home Address, Place of Work
- Change of Status/Role e.g. becoming a partner

You can change your details whenever you like. You can track your changes as they are made, and you'll receive an email notification when your change is complete. Full details on the new PCSE online service can be found on their [website](#) from new registration to changes in details/status:

Disclosure and Barring Service (DBS) Check: For Emergency Medical practitioners helping with COVID-19 Crisis

You will need a DBS check. If you have a recent DBS certificate or have maintained subscription to the DBS Update service then it may not be necessary to make a further application. An assessment will be undertaken by your employing organization to determine whether this is required.

If a new application is required the DBS are proposing to extend the scope of their services to include a new fast track check against adults and children's barred lists. Employers will be enabled to recruit in advance of receiving the full disclosure certificate where they have undertaken appropriate risk assessment and providing monitoring and supervision. There will be no charge to you for the DBS check.

Reference: <https://www.england.nhs.uk/coronavirus/returning-clinicians/faqs-doctors/disclosure-and-barring-service-dbs/28.3.20>

Appraisal and Revalidation

On 19.3.20, a letter from Professor Stephen Powis Medical Director for NHS England strongly recommended that appraisals are suspended from the date of the letter until further notice.

Until reinstated, Responsible Officers (ROs) should classify appraisals which are affected as 'approved missed' appraisals. For clarity, affected appraisals will be regarded as cancelled, not postponed.

Revalidation decisions

The GMC has now issued guidance that doctors who are due to revalidate before the end of September 2020 will have their revalidation date deferred for one year.

Source: <https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/letter-from-prof-powis-to-ros-and-mds-19-march-2020.pdf>

Any queries about your appraiser or the appraisal process locally can be directed to: england.revalidation-support@nhs.net

IR35 Rules: The off-payroll working rules

The off-payroll working rules can apply if a worker provides their services through an intermediary but would be an employee if contracting their services directly. The intermediary would usually be the worker's own personal service (limited) company, a partnership, a managed service company, or an individual. These rules are sometimes known as 'IR35' they apply to:

- a worker who provides their services through their intermediary
- a client who receives services from a worker through their intermediary
- an agency providing workers' services through their intermediary

If the rules apply, tax and National Insurance contributions must be deducted from fees and paid to HMRC.

When the rules apply

You can use the form on the [Gov.uk website](#) to help you decide if the off-payroll working rules apply.

For public sector clients, it's their responsibility to decide your employment status. For private sector clients, it's your intermediary's responsibility to decide your employment status. From April 2020 onwards medium and large sized private sector clients are responsible for deciding if the rules apply.

It is recommended for locums to check employment status for each new practice using the [HMRC form](#).

*Reference - <https://www.gov.uk/guidance/understanding-off-payroll-working-ir35>
(published 22.8.19)*

Indemnity Changes

In England, GPs, trainee GPs or locums under a medical services contract (GMS, PMS or APMS) receive indemnity for claims arising from incidents which took place on or after 1 April 2019 through the Clinical Negligence Scheme for GPs (CNSGP). This is administered by [NHS Resolution](#).

Additional Cover

CNSGP will provide cover **only for litigation by patients**. Activities and services not covered by CNSGP including complaints, inquests, regulatory and disciplinary proceedings, employment and contractual disputes, non-NHS or private work and non-clinical liabilities will need to be purchased separately.

Occurrence based cover vs claims-based cover

Most MDO indemnity products have been “occurrence based”. i.e. if you have paid for the year that MDO will support and if needed, settle a claim for any event regardless of when the claim is made (which could be many years later).

A claims based product pays only for a claim that comes in during the year the indemnity is bought. The doctor must purchase what is known as run-off cover to maintain insurance for incidents occurring in previous years.

[COVID-19 indemnity advice and cover for returning practitioners](#)

It is important that you have appropriate arrangements in place for all aspects of your clinical practice. If you are unsure then you should contact your existing indemnity provider or insurer to check.

NHSE advice on indemnity cover for remote working

In making the decision to consult and advise patients remotely, doctors must balance the risks and benefits and be satisfied that they can adequately clinically assess the patient remotely. Medical Defence Organisations advise doctors to make a record of the reasoning behind any decisions made and the information they give to patients in case they need to explain the approach they've taken later on.

*Reference- <https://www.england.nhs.uk/coronavirus/returning-clinicians/faqs-doctors/indemnity/#if-i-opt-to-see-patients-remotely-does-this-affect-my-indemnity>
(28.3.20)*

GP Pensioning: Pension arrangements for staff returning to help with the COVID-19 outbreak

The government is bringing forward emergency legislation in response to the COVID-19 outbreak that contains important information on pension arrangements for extra NHS staff. It provides for the suspension of the 16-hour rule which currently prevents staff who return to work after retirement from the 1995 NHS Pension Scheme from working more than 16 hours per week, in the first four weeks after retirement. It also provides for:

- The suspension of both the abatement for special class status holders in the 1995 Scheme
- The requirement for staff in the 2008 Section and 2015 NHS Pension Scheme to reduce their pensionable pay by 10% if they elect to 'draw down' a portion of their benefits and continue working

This allows recently retired NHS staff to return to work, and retired staff who have already returned to work to increase commitments, without having their pension benefits suspended.

Reference - <https://www.england.nhs.uk/coronavirus/returning-clinicians/faqs-doctors/pay-and-pensions/#what-are-the-pension-payment-arrangements-for-staff-returning-to-the-nhs-to-assist-in-the-response-to-the-covid-19-outbreak> (28.3.20)

The universal online enquiries form for any pension query can be found on the [PCSE website](#).

For Locums

GP locums pensioning for GMS, PMS, APMS or appraisal NHS work should:

- Complete part 1 of the GP Locum A form and send with invoice to the GP practice to sign and pay.
- Locums should also complete Locum B form and make the appropriate payment using the specified reference number (see link below)
- Submit A&B forms to the PCSE online enquiries form using appropriate reference number.
- Deadline is 10 weeks from the last day worked during a period of engagement to claim. Visit the [PCSE website](#) for more information.

Type 2 Medical Practitioners

Must be employed or engaged under a more permanent basis by the practice. As you would no longer complete forms A and B, the surgery would inform PCSE of your estimated income and collect scheme employee contributions directly from you. They would then forward these plus employer contributions directly to PCSE. At year end complete the Type 2 Medical Practitioner self-assessment form.

For everyone

Every year, GPs are required to submit either a Type 2 Medical Practitioner Self-Assessment of Tiered Contributions Form or Annual Certificate of Pensionable Profit Certificate. Practices are required to submit Estimate of GP (and non-GP) Providers.

The table below summarises what needs to be completed, by whom and the deadline for submission.

Form	To be completed and submitted to PCSE by	Deadline for submission to PCSE
Type 2 Medical Practitioner Self-Assessment of Tiered Contributions Form	Salaried/Assistant GPs (Type 2)	28 February
Annual Certificate of Pensionable Profit Certificate	GP Partners and non-GP (Type 1) Limited company/partnership/single hander	28 February
Estimate of GP (and non-GP) Providers NHS Pensionable Profits/Pay	GP Practices	1 March

These forms are required so that PCSE can make any necessary adjustments to ensure the correct pension deductions are made from your practice in the following financial year (from April).

NB - if off on maternity leave you may be asked to complete an additional maternity leave form. Once complete, please submit these forms via the online enquiries form or post to Primary Care Support England, PO Box 350, Darlington, DL1 9QN.

A full guide to the pensioning process can be found on the [NHSBA website](#).

The information in this document was sourced and every effort has been made to ensure it is correct at the time of researching (Nov19-Mar20) and publication (March 2020).

Please be aware this information may be subject to change over time. It is recommended to use the links and contacts provided to find most recent updates. Any further questions, queries or suggestions would be welcome at the Phoenix Programme.