

Newsletter – April 2018

LMC Meeting 9th April 2018

At our last LMC meeting we discussed a range of issues, including Breathing Space, Quality Contract 2018/19, CGL Shared Care Contract, and Wellness Contract.

Physio First

The LMC noted this was a good proposal, and can only benefit patients in the practice. Members of the LMC felt that access to physio first should not be linked into signing up to the Care Navigation scheme as it was felt that this was unnecessary for those practices who already had effective systems in place and therefore could be inequitable.

Quality Contract - Ardens Templates.

The LMC were concerned that practices may have to pay for these templates in their unfinished state. The CCG have confirmed this is not the case and that practices would not be required to pay until the templates are in place.

ANP Record Faxing.

ANP assessments have previously been faxed to GPs but it has been agreed that this is no longer considered a

safe method to transfer such information. Until a better solution can be found, it has been agreed that these would be emailed to a safe e-mail address at the practice.

Metered Dose Prescribing

Unless there is a clinical need for weekly supply of medications (for example overdose risk) the provision of metered dose systems such as NOMAD from pharmacies should not require practices to provide weekly prescriptions.

We are aware of a new system called "YOURmeds" which is becoming available from some local pharmacies. We are advised that, even where this system is used, practices should not issue weekly prescriptions unless clinically indicated.

General Data Protection Regulations (GDPR).

A hub page for GDPR information has now been launched on the BMA website. This provides information on the regulation and hosts a suite of resources and blogs to help guide members. This page will be updated regularly as new guidance is published and more GP focussed information and resources will be added to this page soon.

<https://www.bma.org.uk/advice/employment/ethics/confidentiality-and-health-records/general-data-protection-regulation-gdpr>

Paul Cundy, GPC IT policy lead, has written a series of personal blogs which GPs and practice managers may find very helpful, as they help demystify the jargon and give clear GP-oriented advice on such subjects as Subject Access Requests, Privacy Notices.

They can be accessed at:

https://www.dropbox.com/sh/h22ka k6pxlt8ily/AAB4gAuHKib_MZ44Xi3AbAf4a?dl=0

GP Premises Costs Directions Update - 2018 Premises Review

The BMA have reported that the 2018/19 GMS (and PMS) contract negotiations secured key changes to the much anticipated new Premises Costs Directions (PCD). The proposed changes are:

- All new terms will be prospective (i.e. they cannot be retrospectively applied)
- Rent reviews will not lead to varying lease terms
- Rent reviews will not require contractors to undertake their own valuation, just evidence of a negotiation with the landlord; if the negotiation is unsuccessful the DV will assess

- More formalised arrangements for third party use of premises, with no financial disadvantage to the contractor

Further details here:-

<https://www.bma.org.uk/collective-voice/committees/general-practitioners-committee/gpc-england/gp-contract-agreement-england/gp-contract-agreement-england-faqs>

GP Retention Scheme

NHS England has made minor revisions to the guidance for the GP retention scheme. The main change of significance for GPs and practices is that the wording in the Eligibility criteria for GP practices section around employing more than one retained GP (RGP) per practice has been improved, so that it now states

“Practices may employ more than one RGP where there is capacity for support and long term career opportunities with the prior approval of the designated HEE RGP Scheme Lead”.

Further details here:-

https://www.bma.org.uk/advice/employment/gp-practices/general-practice-forward-view/workforce/retained-doctor-scheme?utm_source=The%20British%20Medical%20Association&utm_medium=email&utm_campaign=9246242_NEW26A1%20GP%20NEWS%20LETTER%2007%2F03%2F18&dm_i=JVX,5I6G2,36IQY5,LCIGI,1

CQC fees for registered providers 2018/19

The Care Quality Commission (CQC) have written to practices regarding the confirmed fee changes

which are now published on their website. We would just like to remind practices that these fees are fully reimbursable, a contractual change negotiated last year and written into the SFEs.

<http://www.cqc.org.uk/get-involved/consultations/regulatory-fees-201819-%E2%80%93-consultation#accordion-1>

Reimbursement for phased return to work

Following GPC intervention, NHS England has now confirmed that practices must be reimbursed under the SFE for cover for GPs on phased return for sickness.

Reimbursement should include the cost of cover for all the sessions (up to the weekly ceiling) for which the GP is still absent, to maintain the normal GP cover. NHE England local teams should now be talking with CCGs where issues have been raised to rectify any misinterpretation of the SFE.

State-backed indemnity scheme

As you may be aware, Ipsos Mori (on behalf of the Department for Health and Social Care) is continuing to survey GPs to help inform the development of the new state-backed indemnity scheme, which is due to commence in April 2019.

While the survey has been undertaken by many GPs, additional responses are required to ensure the data collected accurately conveys the experience of frontline staff. If, in the coming days, GPs are contacted by Ipsos Mori and asked to complete

the survey, either online or by telephone, the GPC would encourage them to take part and appreciate the time GPs will give up to assist with this work.

LMC Meeting

GP constituents are reminded that they are always welcome to attend meetings of the LMC as observers. The Committee meets on the second Monday of every month in the Board Room at Rotherham General Hospital

NEXT
LMC MEETING
14th May 2018
COMMENCING
At 7.30 PM

OFFICERS OF THE LMC

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If you have any questions or agenda items, or wish to submit appropriate articles for this newsletter

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