

# SHEFFIELD LOCAL MEDICAL COMMITTEE

# Newsletter

# OCTOBER 2014

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## **CONTRACT NEGOTIATIONS 2015/16**

Negotiations between the General Practitioners Committee (GPC) and NHS Employers for the 2015/16 GP contract in England have concluded.

The GPC believes that the changes will provide some much-needed breathing space for practices, through a number of improvements and reductions in bureaucracy.

The key contract changes are in the following areas:

- Named GP for all patients;
- Online access to medical records;

- Online appointment booking;
- Assurance of Out of Hours provision;
- Quality and Outcomes Framework (QOF);
- Minor surgery;
- Armed Forces;
- Maternity and Paternity cover;
- Avoiding Unplanned Admissions;
- Patient participation;
- Alcohol enhanced service;
- Publication of GP earnings;
- Seniority.

Details of the contract changes can be found on the GPC website at: <http://bma.org.uk/working-for-change/negotiating-for-the-profession/bma-general-practitioners-committee/general-practice-contract/contract-changes-in-england-2015>

In addition, a set of FAQs have been published on the British Medical Association (BMA) website: <http://bma.org.uk/working-for-change/negotiating-for-the-profession/bma-general-practitioners-committee/general-practice-contract/contract-changes-in-england-2015/faq>

The changes to the contract will not in themselves solve the workforce crisis or address the exceptional strain affecting general practice. In order to tackle these wider issues, the GPC wrote to and met the Secretary of State of Health in July to propose a set of urgent measures designed to relieve the pressure on GP practices.

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### **OUT OF AREA REGISTERED PATIENTS**

At the beginning of September, the GPC wrote to NHS England expressing a number of concerns about how the urgent primary medical care services for out of area registered patients when at home would work in practice, making it clear that they had no confidence in an implementation date of 1 October 2014. They requested that the scheme's introduction was delayed until agreement could be reached between NHS England and its Area Teams and GP practices.

In its reply NHS England acknowledged that it had been unable to secure services for patients who register out of area, but who may need access to urgent care near or at home.

As a result, it was announced that it would not be practical to allow GP practices to proceed to register patients who live out of area without home visiting duties until **5 January 2015**.

The GPC remains concerned about a number of elements of the proposals. NHS England takes the view that at the point of registration, as the regulations require GP practices to determine whether it is clinically appropriate or practical to accept an application for inclusion in their list of patients without access to home visits etc (as set out in 26B of the GMS Regs), there is no basis on which to amend the regulations at this time.

Until services for patients that register out of area are in place nationally, the criteria to set aside home visits cannot be met. Although the regulations remain in place, a practice should only register patients without home visits knowing that

they have sought and obtained assurance themselves from Area Teams that such arrangements are in place for individual patients.

The GPC's view is that it would not be clinically appropriate or practical to register patients without home visits whilst there is no assurance that arrangements for their care outside of the practice area are in place, even though the regulations now technically allow it.

**Practices are therefore strongly advised that they should not currently register any patients under the new regulation.**

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### **DEPRIVATION OF LIBERTY SAFEGUARDING ORDERS**

*Article submitted by  
HM Senior Coroner  
C P Dorries*

The Coroner's and Justice Act 2009 (which came into effect in July 2013) makes it mandatory for a coroner to hold an inquest where the deceased was 'in state detention' at the time of their death, whatever the cause.

The Chief Coroner has indicated that a person subject to a Deprivation of Liberty Safeguarding (DoLS) order at the time of their death is to be regarded as being in state detention and this has been confirmed by recent case-law.

Experience suggests that not all GPs are aware of the coroner's need to hear promptly about the death of persons subject to a DoLS order, whether from natural causes or otherwise. Indeed, the GP may not even be aware of the DoLS order in some cases. This has led to a difficulty recently where a deceased patient had been cremated before the coroner became aware of the full circumstances.

The recent case-law is leading to a significant increase in the number of DoLS orders made.

Could you please avoid issuing a Medical Certificate of Cause of Death (MCCD) in cases where you are aware that the deceased was subject to a DoLS order at the time of

their death and ensure that the coroner's office is notified instead.

The coroner realises that this is an increase in workload but it is a clear requirement of the new law rather than anything of local invention.

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### **VACCINE UPDATE NEWSLETTER**

The GPC has issued a reminder to practices that they can subscribe, free of charge, to Public Health England's *Vaccine Update* newsletter.

The newsletter is published monthly and contains useful updates on the latest developments in vaccines, and vaccination policies and procedures in England.

The September issue, which contains details of how to subscribe, can be found at:

<https://www.gov.uk/government/publications/vaccine-update-issue-218-september-2014>

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### **GOOD MEDICAL PRACTICE: KNOWLEDGE OF ENGLISH**

Please note that the General Medical Council (GMC) guidance *Good Medical Practice* was updated earlier this year to include an explicit duty that doctors must have the necessary knowledge of English to provide a good standard of practice and care in the UK.

The latest version of the guidance can be found on the LMC's website at:

[http://www.sheffield-lmc.org.uk/OG13/GMP\\_2013.pdf\\_51447599.pdf](http://www.sheffield-lmc.org.uk/OG13/GMP_2013.pdf_51447599.pdf)

Please see paragraph 14.1, which sets out what is now expected of every doctor practising in the UK.

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### **PRESCRIPTION DIRECTION**

Prescription direction occurs where a patient is being directed by their GP practice to a certain pharmacy to

have their prescription dispensed, or where practices have preferential arrangements for certain pharmacies, which would be seen as a breach of good practice.

You may recall previous updates on this issue, the latest being in the October 2013 LMC Newsletter. However, concerns continue to be reported nationally and the GPC recently met with the Pharmaceutical Services Negotiating Committee (PSNC) and Pharmacy Voice to discuss this.

Joint guidance is still available at: <http://bma.org.uk/-/media/files/pdfs/practical%20advice%20at%20work/doctors%20as%20managers/prescriptiondirectionistatement.pdf>

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### **PRESCRIBING OF UNLICENSED MEDICINES**

The GMC has confirmed that under European law, it is unlawful to prescribe an unlicensed or off-license medication in preference to a licensed one on the grounds of cost.

Prescribers should ensure that when prescribing such a medication they are content that there are clinical rather than financial reasons for the prescribing decision.

Where unlicensed or off-license medicines appear in an agreed patient pathway, their position must be determined purely by their clinical properties, and licensed medicines should on no account be changed to unlicensed ones for financial reasons.

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### **NHS AVAILABILITY OF ERECTILE DYSFUNCTION TREATMENTS**

On 1 August 2014, amended regulations on erectile dysfunction (ED) treatments came in to force.

This means Sildenafil, Apomorphine Hydrochloride, Moxisylyte Hydrochloride and Thymoxamine Hydrochloride are no longer restricted for the treatment of ED.

In-patient and branded products for the treatment of ED will continue to be restricted, including the new addition of Avanafil.

The regulations are available at: <http://www.legislation.gov.uk/uksi/2014/1625/contents/made>

The consultation document and the formal response from the Department of Health (DH) are available at: <https://www.gov.uk/government/consultations/nhs-availability-of-erectile-dysfunction-drugs-proposed-changes>

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### **CARE QUALITY COMMISSION (CQC) MYTHBUSTERS**

Nigel Sparrow, CQC's Senior National GP Advisor, has drafted a number of guidance notes, which aim to tackle some of the common myths about CQC inspections of GP and out-of-hours services.

The topics include:

- Agreed principles for defibrillators, oxygen and oximeters;
- Who should have a disclosure and barring service (DBS) check?
- Significant Event Analysis (SEA)
- Clinical audits;
- Carpets in GP practices;
- Guidance about curtains;
- Hand washing signs;
- Gillick competency and Fraser guidelines;
- Emergency drugs for GP practices;
- GPs and the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards;
- Prescriptions in dispensing practices.

The guidance notes can be downloaded from the CQC website at:

<http://www.cqc.org.uk/content/gp-and-out-hours-mythbusters-nigel-sparrow>

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### **GP EARNINGS AND EXPENSES AND INVESTMENT REPORTS**

The Health and Social Care Information Centre (HSCIC) recently published the *GP Earnings and Expenses Enquiry Report 2012/13* and *Investment in General Practice 2009/10 to 2013/14*.

The reports can be found at:

<http://www.hscic.gov.uk/catalogue/PUB14924>

<http://www.hscic.gov.uk/catalogue/PUB14900>

The main figure used in the Earning and Expenses report is that of the average of combined GPs (contractor and salaried), rather than that for contractor GPs, which has been the case formerly.

The mean income before tax for combined GPs (contractor and salaried) in the UK in 2012/13 was £92,900 for those GPs working in either a General Medical Services (GMS) or Personal Medical Services (PMS) practice (compared to £94,200 in 2011/12, a decrease of 1.4% which is statistically significant).

The median income before tax for combined GPs in the UK in 2012/13 was £89,300 compared to £91,200 in 2011/12, a decrease of 2.0%.

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### **APPRAISAL AND REVALIDATION RESOURCES**

The Royal College of General Practitioners (RCGP) has recently developed a number of new revalidation resources and updated some of its existing resources.

These include:

- version 9 of Guide to the Revalidation of General Practitioners, referred to as the Guide;
- a number of mini-guides designed to augment the Guide;
- an updated version of The Principles of GP Appraisal for Revalidation;

- a revision to the Revalidation e-learning module.

The above resources are accessible via the RCGP's Revalidation Guidance for GPs web pages:

<http://www.rcgp.org.uk/revalidation-and-cpd/new-revalidation-guidance-for-gps.aspx>

The RCGP can answer revalidation queries via:

[revalidation@rcgp.org.uk](mailto:revalidation@rcgp.org.uk).

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### **GP ELECTRONIC ANNUAL PRACTICE DECLARATION**

All practices should have received a letter dated 24 September 2014 from the Primary Care Team, South Yorkshire and Bassetlaw Area Team, noting that the 2014/15 GP electronic Annual Practice Declaration (eDec) is open for submissions over a 5 week period from **Monday 6 October** to **Friday 7 November 2014**.

The letter included a set of FAQs.

All GP practices are required to submit their eDec electronically through the primary care website:

<https://www.primarycare.nhs.uk/>

76% of the eDec has been pre-populated with responses provided from last year's eDec submission, including the catchment area and any updates which practices have since made to it when in the GPOS module.

The remainder of the eDec is comprised of new questions which relate to recent changes to the GP contract.

It will be necessary for practices to check pre-populated responses, amending these where necessary, and also respond to the new questions in order to submit their eDEC.

An updated GP practice eDEC user manual has been published on the website. A link to this can be found on the website's introduction to eDEC web page.

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### **DISPENSING DOCTOR FEESCALE CHANGES 2014/15**

The dispensing doctor feescale, which includes an envelope of £174.2m for dispensing fees, has been published and came into effect from 1 October 2014 and onwards for England and Wales.

The feescale and further information is available on the BMA website at:

<http://bma.org.uk/practical-support-at-work/gp-practices/dispensing-doctors-feescale-change>

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### **GP CLINICAL IT SYSTEMS – DEED OF UNDERTAKING FOR DATA PROCESSING**

A Deed of Undertaking for Data Processing has been published by the HSCIC in order to clarify the relationship between practices and system suppliers.

General practices, as data controllers, are responsible for the data held within their GP clinical system, and for any decisions relating to accessing or processing these data.

System suppliers have been commissioned to process data held on practice systems on behalf of practices.

The Deed of Undertaking is a generic agreement covering all data processing undertaken by suppliers on behalf of practices.

A Deed has been signed by each general practice system supplier, and can be viewed and downloaded from the HSCIC website at:

<http://systems.hscic.gov.uk/infogov/confidentiality/deed/index.html>

The document has been agreed in principle by the Joint GP IT Committee of the BMA/RCGP, as well as the Information Commissioner's Office, with input from the Medical Defence Organisations.

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### **CHOICE OF GP CLINICAL SYSTEM**

The GPC has been made aware of instances of practices being put under undue pressure to choose a particular clinical IT system. The GPC has issued a reminder to practices that the GP Systems of Choice (GPSoC) framework and GMS contractual arrangement entitles them to a guaranteed choice of clinical system from a range of accredited options.

Any practice that is being placed under undue pressure is asked to inform:

- the GPC IT Subcommittee via Holly Trotman in the GPC Secretariat via: [htrotman@bma.org.uk](mailto:htrotman@bma.org.uk)
- the LMC office via: [manager@sheffieldlmc.org.uk](mailto:manager@sheffieldlmc.org.uk)

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### **CLINICAL REFERENCE GROUP (CRG)**

*Article submitted by  
Dr Mike Tomson*

The CRG is a virtual forum which looks at the development of pathways and clinical innovation in Sheffield. It is an important part of the decision making process of the CCG. Some people participate by writing lots, others read and monitor. We are keen to have widespread involvement from all groups in Primary Care locally.

If you would like to be on the forum contact:

[roni.foster-ash@nhs.net](mailto:roni.foster-ash@nhs.net).

If you want more information about the CRG contact:

[mike.tomson@nhs.net](mailto:mike.tomson@nhs.net).

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### **PRESS PORTAL**

*Article submitted by  
Dr Mike Tomson*

*What is the PRESS Portal?*

The Portal is a resource to assist in decision making and to support GPs



in the referral process. Specifically it contains:

- Numerous Clinical Pathways, Referral Forms and Clinical Guidance documents;
- Supporting information for referrers, practice staff and patients;
- An Education and Support section which provides information about planned (and past) PLIs including old delegate packs and presentations;
- Useful Websites box for links to other websites useful for clinicians and patients.

It is searchable using the search box at the top right hand of the site.

There is a recently added section containing the latest updated and new documents.

#### *How to access it*

The Portal can be accessed via the Sheffield CCG Intranet Site or at <http://www.sheffieldccgportal.co.uk/pressv2/> from any computer whether you are in the NHS or not. (You will need to create a password when you are not accessing from the CCG intranet.)

#### *Content update*

We are updating the content of the Portal and aim to have completed the review by the end of October. This is dependent upon the availability of clinicians to undertake the evaluation of clinical information.

Significant work has already been undertaken and completed around Children's, Mental Health and Long Term Conditions documents.

When a document is received it is uploaded to the Portal and the date published and date to review field is updated. Finally a link is sent back to the document owner so that they can review how the document is presented on the portal and sign it off.

There is still much work to do but we are progressing well.

#### *What's new on the Portal*

##### *Electronic referrals*

To support practice staff in the move to electronic referrals training has been undertaken for SystemOne users. All the documents supporting this process are on the Portal.

EMIS user training is being undertaken.

#### *Gastroenterology standard referral form*

A brief information sheet on Faecal Calprotectin has been placed on the Portal.

If you have any questions or feedback on the PRESS Portal please contact [steven.ashmore@nhs.net](mailto:steven.ashmore@nhs.net).

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### **SLEEP OUT FOR ROUNABOUT**

*Article submitted by Amy Casbolt,  
Fundraising Co-ordinator,  
Roundabout*

**Thursday 6 November 2014  
St Andrew's Church  
Psalter Lane**

Do you think you could 'rough it' for one night only to prevent this becoming a reality for young people in Sheffield? By signing up to our Sponsored Sleep Out you will be helping us to end youth homelessness.

The first half of the evening will feature fun, games, food, entertainment and live music, but from midnight the challenge begins! We are asking you to get sponsored to brave the cold winter night to help us raise money to provide a safe place to stay for young homeless people.

The event will begin at 8 pm and finish the following morning at 7 am. It costs £15 to register (or £10 per person if you enter a team of more than 3 people) and participants are encouraged to raise a minimum of £100 through sponsorship.

To register to take part, please click on the following link:  
[www.sleep-out.org.uk](http://www.sleep-out.org.uk).

If you have any questions please call Roundabout's Fundraising Co-ordinator Amy:

Tel: (0114) 2536753

Email [acasbolt@roundaboutltd.org](mailto:acasbolt@roundaboutltd.org).

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### **STAFFING CHANGES AT SHEFFIELD LMC**

As some of you will be aware, the LMC has seen a number of staffing changes in 2014.

On a positive note, we welcomed Amanda Murphy as Administrative Assistant, covering Emma Birtles' maternity leave. Amanda is settling in well and is proving to be an extremely valuable member of the team. Congratulations are due to Emma, whose twins arrived on 3 October. They are both healthy and keeping Emma busy!

Unfortunately, Denise Clarke has decided to seek employment closer to home and will leave the LMC next week. Therefore, a recruitment process has commenced, and we hope that we will be able to issue good news on this front shortly. In the meantime, please be reassured that the Administrator's email address ([administrator@sheffieldlmc.org.uk](mailto:administrator@sheffieldlmc.org.uk)) will continue to be accessed on a regular basis.

For up-to-date contact details, staff details, recruitment information etc, please see:

<http://www.sheffield-lmc.org.uk/secretariat.htm>

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### **SHEFFIELD GP PROVIDER STEERING GROUP (GPPSG): CITYWIDE GP MEETING**

*Article submitted by Chris Stocks,  
Chair & Julie Endacott, GP Clinical  
Lead, Sheffield GPPSG*

Following on from the article in the July LMC Newsletter, we would be grateful if all Sheffield GPs could note the following date for your dairies:

**Thursday 20 November 2014  
6 pm to 7.30 pm**

DoubleTree by Hilton Hotel,  
Chesterfield Road South, Sheffield

Citywide GP Meeting re the Aims,  
Role and Function of the  
Sheffield GPPSG

This is an important meeting regarding the development of General Practice Provision in Sheffield.

With the help of the LMC and Sheffield Clinical Commissioning Group (CCG), the GPPSG has called this meeting to discuss how GPs in Sheffield can protect themselves against these changes and would urge all practices to attend.

Further details regarding this meeting will follow in the near future.

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**SESSIONAL GP  
CONFERENCE**

**Friday 14 November 2014  
BMA House, London.**

The GPC Sessional GPs Subcommittee is holding a conference called *Sessional GPs - Future Proofing Your Career*.

The conference will offer expert advice, practical information and guidance to support all sessional GPs in making the most of their careers, now and in the future.

The conference programme includes topics such as:

- influencing your future as a sessional GP;
- appraisal and revalidation;
- employment rights;
- pensions;
- working as a locum GP.

Further information and a full programme can be found on the BMA website at:

<http://bma.org.uk/events/2014/november/future-proofing-your-career-for-sessional-gps>

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**CONFERENCE FOR PEOPLE  
CONSIDERING A CAREER IN  
GENERAL PRACTICE**

**Wednesday 19 November 2014  
BMA House, London.**

The GPC GP Trainees Subcommittee is organising a conference called *Thinking about a career in general practice?*

The conference will provide information and support to foundation trainees who are considering applying to GP specialty training programmes and will include:

- practical information and tips on the training application process;
- advice on how to get through assessments;
- valuable information on how to manage finances as a GP trainee;
- opinions and advice from speakers who have taken a variety of different career paths within general practice.

Further information and a full programme can be found on the BMA website at:

<http://bma.org.uk/events/2014/november/career-in-general-practice>

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**SOUTH YORKSHIRE MEDICO-  
LEGAL SOCIETY**

The LMC has recently been contacted by the South Yorkshire Medico-Legal Society, with a view to making GPs aware of how they can join the Society and access the programme of events.

Regular meetings are held at the Medico-Legal Centre at 6.30 pm, with a wide range of subjects that GPs might find of interest.

Further information about joining the Society can be found at:

<http://symls.co.uk/6.html>

The 2014/15 programme of events can be found at:

<http://symls.co.uk/10.html>

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Please forward any articles, comments etc for inclusion in the LMC newsletter to the LMC office via email to:

[manager@sheffieldlmc.org.uk](mailto:manager@sheffieldlmc.org.uk).

**Articles for the November  
edition to be received by  
Friday 7 November 2014**

**Further submission deadlines  
can be found at:**

[http://www.sheffield-lmc.org.uk/Newsletters14/VB\\_and\\_Newsletter\\_Deadlines.pdf](http://www.sheffield-lmc.org.uk/Newsletters14/VB_and_Newsletter_Deadlines.pdf)