

SHEFFIELD LOCAL MEDICAL COMMITTEE

Newsletter

September 2017

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ELECTED MEMBER VACANCY ON SHEFFIELD LMC

This month we accepted the resignation of Dr Ben Taylor from the LMC. Ben became our ST3 Representative in August 2015, was co-opted to a member vacancy in July 2016 and became an elected member in December 2016. We are sorry to see Ben leave and his contributions will be greatly missed, but we wish him every success and happiness in New Zealand.

As a result of this, there is an opportunity for Sheffield GPs to consider being co-opted to an elected member vacancy on the LMC.

The co-option will run for the remainder of the current electoral term, ie until 30 November 2020, although shorter term co-options can be arranged. All eligible GPs (on the Medical Performers List and contributing to the LMC's levies) are encouraged to consider joining the LMC.

Meetings of the full LMC are usually held on the second Monday of the month at 7.45 pm in the Lecture Theatre at Tapton Hall (occasionally dates are changed to avoid bank holidays, staff leave etc). In addition, members are encouraged to represent the LMC on other committees and this additional meeting attendance is funded by the organisers of the committees or the LMC.

Our primary function is to represent Sheffield GPs and, therefore, it is extremely important that local GPs have a means of debating the important topical issues and influencing or making policy in order to represent the breadth of general practice in Sheffield. The Committee is also a very useful forum for keeping up-to-date with all that is happening in Primary Care and a chance to meet colleagues with differing views and experience across the city.

Further details of our work can be found in *A Guide to Your Local Medical Committee*, which is available via:

[http://www.sheffield-lmc.org.uk/website/IGP217/files/A%20Guide%20to%20Your%20Local%20Medical%20Committee%20\(revised%20May17\).pdf](http://www.sheffield-lmc.org.uk/website/IGP217/files/A%20Guide%20to%20Your%20Local%20Medical%20Committee%20(revised%20May17).pdf)

If you are interested in joining, or would like more information about what being a Committee member involves, please do not hesitate to contact Margaret Wicks, LMC Manager via manager@sheffieldlmc.org.uk or (0114) 2588755.

Alternatively, if you would be interested in attending a number of meetings as an observer prior to making a decision as to whether or not to join, again, please contact Margaret to arrange this.

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RESULTS OF THE GP PRACTICE LIST CLOSURE SURVEY

As many of you are aware, the General Practitioners Committee (GPC) recently released the results of their survey of GP practices in England on their willingness to close practice lists.

The full results can be accessed via: <https://www.bma.org.uk/collective-voice/committees/general-practitioners-committee/gpc-current-issues/gp-practice-list-closure-survey>.

With a turnout of 23.9% (similar to previous surveys of the profession), the results show that a small majority of those responding would consider temporarily suspending new patient registration, but only a minority would be in favour of applying for a formal list closure.

Following discussion with the GPC England executive, policy leads and sessional GP executive members, at this stage the GPC will not be making a decision about moving to a formal industrial action ballot of the profession. They will be using the results to support their negotiations and to call on the government to deal with the current crisis with far greater urgency.

Key areas include:

- a swift resolution to the indemnity crisis;
- a limit to workload levels so that no patient or doctor is put at risk;
- a sustainable expansion of the general practice and community workforce (with an end to short term schemes with non-recurrent funding);
- surgery buildings that are fit for the 21st century.

Regardless of the results of this survey, the GPC is aware that many practices face real and unsustainable pressures and need to act now to protect their current patients. In such situations practices have always been able to temporarily suspend patient registration of their own accord, as long as they have reasonable grounds that are not related to the characteristics of the patient.

The BMA's guidance on temporarily suspending patient registrations can be found at:

<https://www.bma.org.uk/advice/employment/gp-practices/quality-first/manage-inappropriate-workload/list-management>.

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ONGOING CAPITA ISSUES: PCSE CLAIMS GUIDANCE

General Practitioners Committee (GPC) England is aware that practices and individual GPs continue to experience unacceptable incidents relating to Primary Care Support England, commissioned by NHS England (NHSE) and provided by Capita. The issues have been ongoing for some time and the GPC is aware of cases where practices have not received payments, or have received incorrect payments, as well as practices or individual doctors suffering losses due to the failing of these services.

The GPC's advice is to follow the process outlined at the link below, to ensure incorrect payments are corrected:

<https://www.bma.org.uk/collective-voice/committees/general-practitioners-committee/gpc-current-issues/capita-service-failure>.

If issues are not resolved through this process in a timely manner, please email info.gpc@bma.org.uk so that concerns can be taken up with NHSE.

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INCOME TAX – ANNUAL ALLOWANCE

Wessex LMC recently met with specialist Medical Accountants, Solicitors and Chartered Surveyors, in order to share information and discuss issues that face general practice. The Medical Accountants discussed the unexpected tax bills some GPs are going to face because of the change to the tapering of annual allowance and tax relief.

Information was produced for Wessex LMC to share with their GPs, and Wessex LMC has kindly made this available to other LMCs:

[http://www.sheffield-lmc.org.uk/website/IGP217/files/Income%20Tax%20Annual%20Allowance%20\(Sept17\).pdf](http://www.sheffield-lmc.org.uk/website/IGP217/files/Income%20Tax%20Annual%20Allowance%20(Sept17).pdf)

We would urge all GPs to read this update.

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NHS PROPERTY SERVICES (NHSPS) CHARGING POLICY 2017/18

NHSPS, in conjunction with NHS England and the Department of Health, has published a refreshed Charging Policy for 2017/18. It provides clarity to NHSPS' customers on the charges payable for occupation of NHSPS properties and is relevant to customers with signed leases in place, as well as those who are currently occupying premises on an undocumented basis.

Further information on charges and a full version of the policy can be found at:

<http://www.property.nhs.uk/charging-policy-2017-18/>

Further information on NHSPS' billing policies and an interactive charging schedule can be found at:

<http://billing.property.nhs.uk/>

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LARC FITTING POST TERMINATION OF PREGNANCY (TOP)

Sheffield Clinical Commissioning Group has requested our assistance in disseminating the following information to practices:

Both IUD/IUS and progestogen only implants can be fitted immediately post TOP. (FSRH Guideline *Contraception After Pregnancy* <https://www.fsrh.org/documents/contraception-after-pregnancy-guideline-january-2017>).

Some women are undecided regarding their contraceptive method or elect not to have their chosen method of contraception fitted immediately post abortion at Sheffield Teaching Hospitals NHS Foundation Trust.

If a patient attends their GP practice requesting LARC fitting they do not have to wait for a negative urine pregnancy test.

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SHEFFIELD CLINICAL COMMISSIONING GROUP (CCG) FEEDBACK FORM

Further to the article in the April newsletter reminding practices of Sheffield CCG's feedback email, this has now been replaced with a feedback e-form.

As reported in a recent CCG bulletin, some submissions via the email address did not provide key pieces of information and concerns have been expressed about the lack of feedback to practices. The e-form has been tested by a number of practices and is designed to capture the essential data required and provide the feedback practices require.

Further information can be found on the CCG's intranet (login required): <http://www.intranet.sheffieldccg.nhs.uk/gp-feedback.htm>.

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PROVISION OF INFORMATION ON GENERAL PRACTICE ACCESS DATA

The current bi-annual extended access collection opened for submissions from 1 September 2017 to 29 September 2017.

As set out in the 2016 regulations, every GP practice in England will be required to submit an online return twice a year through the Primary Care Web Tool. Practices can access the module of questions via: <https://www.primarycare.nhs.uk/>. This will set out what access to appointments the practice offers to patients over evenings and weekends.

In addition, the next workforce census workforce minimum dataset extraction will occur at the beginning of October 2017.

These are separate data collections in the primary care web tool and both will need completing by all practices.

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CARE QUALITY COMMISSION (CQC) TIPS AND MYTH BUSTERS FOR GP PRACTICES

As many of you will be aware, Professor Nigel Sparrow, CQC's Senior National GP Advisor, has produced a series of tips and myth busters regarding CQC inspections of GP and out-of-hours services, as well as sharing guidance to best practice.

These are listed under the 5 key questions that CQC asks about services during inspections - safe, effective, caring, responsive to people's needs, well-led: <http://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-tips-mythbusters-gp-practices#safe>.

These can be a useful resource generally, but particularly for practices preparing for an inspection or practices that have concerns about the inspection process and findings.

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PRINCIPLES UNDERPINNING PRIMARY CARE DEVELOPMENT WITHIN SUSTAINABILITY AND TRANSFORMATION PLANS (STPs)

North and South Essex LMCs have developed a set of principles for primary care development within STPs as part of their efforts to re-focus these plans to properly address primary care and general practice.

The document, which can be accessed via the link below, has generally been well received by CCG and STP colleagues, and North and South Essex LMCs have kindly agreed for it to be made available to other LMCs:

[http://www.sheffield-lmc.org.uk/website/IGP217/files/STP%20Principles%20\(North%20&%20South%20Essex%20LMCs%20Aug%202017\).pdf](http://www.sheffield-lmc.org.uk/website/IGP217/files/STP%20Principles%20(North%20&%20South%20Essex%20LMCs%20Aug%202017).pdf)

Sheffield LMC is in agreement with the principles and, having met with Sir Andrew Cash, Chief Executive, Sheffield Teaching Hospitals NHS Foundation Trust, Maddy Ruff, Accountable Officer, Sheffield Clinical Commissioning Group (CCG) and Tim Moorhead, Chair of Sheffield CCG, we are keen to ensure appropriate LMC engagement and general practice representation in our region. We hope to receive an update on proposed invitations to a number of steering groups and committees shortly.

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CHECKLIST FOR GPs WHO COVER HUB SESSIONS

Article submitted by Steven Haigh, Director, Primary Care Sheffield (PCS)

PCS wrote to practices in June asking for a checklist to be completed for GPs who provide sessions in the Extended Access Hubs.

This is important information for PCS to ensure that it has up-to-date records, but for GPs it is also an important reminder to ensure that you have adequate indemnity for sessions provided.

If you have any queries regarding completion of the checklist please contact Steven Haigh via stevenhaigh@nhs.net.

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Please forward any articles for inclusion in the LMC newsletter to
manager@sheffieldlmc.org.uk

Articles for the October edition to be received by Friday 6 October

Submission deadlines can be found at

<http://www.sheffield-lmc.org.uk/website/IGP217/files/VB%20and%20Newsletter%20Deadlines%202017.pdf>