SHEFFIELD LOCAL MEDICAL COMMITTEE NEWSLETTER AUGUST 2012

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SHEFFIELD LMC ELECTIONS 2012-2016

The current LMC's term of office ends on 30 November 2012, with a new committee being convened in December.

The elections for the new committee will commence in September.

All levy paying GPs on Sheffield Medical Performers List at the time of the election will be eligible to join the LMC. We hope to encourage both new members and the reelection of existing members in order to ensure the continuation of our current strong negotiating position and extensive support and representation of Sheffield practices. In addition, we wish to be as representative a body as possible and to encourage a breadth of opinion and experience.

The committee meets on a monthly basis, currently at 7.45 pm at Tapton Hall on the 2^{nd} Monday of the month.

The LMC deals with an enormous range of issues relating to primary care in Sheffield, and there are opportunities for representatives joining the committee to participate in various meetings and negotiations which shape health policy and direction in the city.

General information about the work of the LMC can be found at: <u>http://www.sheffield-</u> <u>lmc.org.uk/Downloads/LMC%20Gui</u> <u>de.pdf</u>

More detailed information about specific areas of work and negotiations can be found in our activity updates, which can be accessed via: http://www.sheffield-

lmc.org.uk/lmc reports.htm

If any GPs are interested in standing for election or would like further information prior to the ballot papers being distributed in September, please do not hesitate to contact David Savage, LMC Secretary or Margaret Wicks, LMC Manager, via:

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Tel: (0114) 2588755 or Email <u>manager@sheffieldlmc.org.uk</u>.

ACTIVITY UPDATE: APRIL TO JULY 2012

The LMC's latest Activity Update (April to July 2012) was recently emailed to all represented Sheffield GPs and Practice Managers.

Further copies can be downloaded from the *LMC Reports* section of our website at:

http://www.sheffieldlmc.org.uk/Reports/SLMC%20Activi ty%20Update%20Apr-Jull2.pdf

In addition, hard copies can be requested from the LMC office via email to: administrator@sheffieldlmc.org.uk.

We hope that GPs and Practice Managers find the updates interesting and helpful in knowing what role the LMC plays in local negotiations and how we can assist practices. We would, of course, be keen to receive any feedback or suggestions for future editions via email to: manager@sheffieldlmc.org.uk

Atos Healthcare: Requests for Medical Information

A number of concerns have been raised with the LMC regarding the wording of letters from Atos Healthcare to patients regarding submission of medical evidence in support of their benefit claims and appeals. Whilst the intention is for patients to submit medical evidence already in their possession, some patients have taken it upon themselves to request additional information from their GP.

Following negotiations with Atos Healthcare and the Department for Work and Pensions (DWP), the LMC's guidance *Requests for Medical Evidence in Support of Appeals against Benefit Withdrawal / Refusal* has been updated.

A copy of the amended guidance can be downloaded from the LMC website at: <u>http://www.sheffield-</u> <u>lmc.org.uk/lmc%20guidance/benefit</u> <u>appeals.pdf</u>

DNACPR Forms

The LMC office continues to receive reports of on-going variation in the interpretation of the agreement relating to original vs copies of DNACPR forms and Yorkshire Ambulance Service's (YAS) acceptance or refusal to act on an available form.

This has resulted in numerous examples of unsatisfactory situations for patients being reported to the office.

We have again clarified the issue with Richard Oliver and we have been assured that the current policy is as follows:

• The original signed form must be retained in the patient's house.

Ideally these should have a red border but, in the absence of a colour printer, a black and white, signed version is acceptable.

- Photocopies of the original are not acceptable and will not be acted upon by YAS.
- Practices may hold printed copies of the original, individually signed, for the benefit of the patient's record or for other organisations, eg Out of Hours providers. Again, photocopies are not advised.

It would be appreciated if any practices that continue to experience difficulties, despite their compliance with the above, could email details to Richard Oliver via <u>roliver1@nhs.net</u>, copying the concern to the LMC via <u>administrator@sheffieldlmc.org.uk</u>.

FOCUS ON HEPATITIS B IMMUNISATIONS

The General Practitioners Committee (GPC) has recently issued guidance entitled *Focus on hepatitis B immunisations*, which aims to clarify the circumstances where charges can be made and where active attempts to encourage hepatitis B immunisation ought to be made, in relation to:

- Travel
- Occupational health
- Lifestyle risk or medical conditions.

Of particular note is the clarification regarding Medical Schools being legally responsible for providing a full occupational health service to their students and applicants. The GPC has written to the Medical Schools Council, asking them to remind medical schools of their obligations. A copy of the GPC's letter can be downloaded from the LMC's website at: http://www.sheffield-

Imc.org.uk/Facts/GPC_letter_medica l_schools_re_Hep_B_imms_Aug12.p df

The guidance also contains a Q&A section and model letters that can be adapted and sent to patients or employers requesting immunisation for occupational health purposes. Please note that the occupational health section replaces and updates the former guidance *Hepatitis B* vaccination for employees at risk.

A copy of the guidance can be downloaded from the LMC website at:

http://www.sheffieldlmc.org.uk/OG12/Focus%20on%20H ep%20B.pdf

CCG CONSTITUTION: CHECKLIST FOR PRACTICES

The GPC has published a checklist to help practices to assess their Clinical Commissioning Group (CCG) constitution. The checklist includes the 'must haves' as well as things that definitely should not be in the constitution.

A copy of the checklist can be downloaded from the GPC website at:

http://bma.org.uk/-/media/Files/PDFs/Working%20for% 20change/Shaping%20healthcare/Co mmissioning/CCG%20constitutions %20checklist%20june%202012.pdf

GENERAL PRACTICE EXTRACTION SERVICE (GPES)

GPES is a new service, delivered by the Health and Social Care Information Centre (HSCIC).

From April 2013, GPES will make data available from GP clinical systems with the intention of improving the health and wellbeing of patients in England. The first request from GPES will be the data required for the Quality and Outcomes Framework for 2013/14. Each GP practice will be asked to consider whether to participate in the service.

The British Medical Association (BMA) has been involved in advising on GPES from the outset, particularly in relation to information governance and ensuring that the confidentiality of patient data is protected. This included agreeing GPES information governance (IG) principles which recognise the role of GPs as data controllers.

One fundamental IG principle is that general practices, as data controllers, decide whether data should be extracted. Another is that anonymised data will be extracted wherever possible. Identifiable data can only be extracted if there is a legal basis, for example with explicit patient consent or approval by the Ethics and Confidentiality Committee (ECC) of the National Information Governance Board. New Read codes have been developed to allow patients to opt out of appropriate identifiable data extracts.

Customers of GPES must be approved by the Department of Health (DH) and/or the NHS Commissioning Board (NCB). The GPES Independent Advisory Group (GPES IAG), which includes BMA representation, considers each data extract request, ensuring GPES IG principles are met and there are sufficient benefits for patients.

From January 2013, HSCIC will be asking all GP practices about their preferences for participation in GPES data requests. For effectively anonymised data requests, practices can either choose to automatically opt in to all requests, or make a decision on a case by case basis upon receiving details of each request. For identifiable data requests, practices will NOT be able to make a general choice to opt in to all requests but will be asked to opt in to each individual request.

The GPES software is being designed to minimise the workload for GP practice staff. Extractions of data will be undertaken by GP system suppliers and sent on to HSCIC. The data will be held in a secure environment and then sent to the customer in the required format. The data held in the HSCIC secure environment will then be destroyed.

The GPC view is that GPES strikes the right balance between a patient's right to privacy and the need to share for the greater good.

SESSIONAL GPS NEWSLETTER: AUGUST 2012

The Sessional GPs newsletter draws together information about new and on-going issues affecting sessional GPs and the work of the Sessional GPs Subcommittee and GPC on their behalf. The August 2012 issue covers the following topics:

- What is a Sessional GP?
- Locum Handbook
- NHS Pension arrangements for Sessional GPs
- Pensions: Industrial Action update
- Make your tax investigation less taxing
- Self-employed locum GPs and taxable expenses
- Retainer and Returner schemes
- Revalidation
- Information cascades
- Specialist BMA guidance for salaried and locum GPs
- Annual Conference of Local Medical Committees
- Annual Representative Meeting (ARM)
- Becoming involved with your LMC
- Devolved Administration Updates.

A copy of the newsletter can be downloaded from the GPC website at:

http://bma.org.uk/-/media/Files/PDFs/About%20the%20 BMA/How%20we%20work/General %20Practitioners%20Committee/Ses sional%20GP%20newsletter%20sum mer%202012.pdf

GP TRAINEES SUBCOMMITTEE Newsletter: July 2012

The GP Trainees Subcommittee is a subcommittee of the GPC that provides national representation for all doctors in GP training, whether they are members of the BMA or not.

The July 2012 edition of the subcommittee's newsletter contains article on:

- What is the GP Trainees Subcommittee?
- Enhanced GP training
- LMC Conference
- GP Trainee Maternity Leave To Do List
- Elections
- List of regional representatives.

A copy of the newsletter can be downloaded from the GPC website at:

https://bma.org.uk/-/media/Files/PDFs/About%20the%20 BMA/How%20we%20work/General %20Practitioners%20Committee/GP %20Trainees%20Newsletter%20July %202012.pdf

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AGENCY WORKERS REGULATIONS

The BMA has produced guidance on the Agency Workers Regulations. The guidance is aimed at locums who are engaged by agencies and practices who hire them. The main topics covered are:

- What rights have agency workers gained?
- Who does this affect?
- What are the potential penalties for the GP practice for non-compliance with the Regulations?
- Further guidance

A copy of the guidance can be downloaded from the LMC website at:

http://www.sheffieldlmc.org.uk/OG12/Agency_Workers_ Regulations-June2012.pdf

LOCUM GP HANDBOOK

The BMA has recently published a GP locum handbook on line. As the handbook is a benefit for BMA members, it can be accessed via the sessional GP section after logging in. The handbook includes information on a variety of topics, such as:

- starting out as a locum GP;
- setting up a business;
- agreeing contracts for services with different employers.

The official launch of the handbook will take place at the sessional GPs conference in October 2012.

GUIDE TO A SESSION FOR GP TRAINEES AND TRAINERS

The GP Trainees Subcommittee has published *Guide to a session for GP trainees and trainers*, in conjunction with the Committee of GP Education Directors (COGPED). As the guidance is a benefit for BMA members, it can be accessed via the Developing your career section of the BMA website after logging in.

The guidance covers issues such as:

• Duties and activities suited to clinical sessions;

- Clinical activities that may be considered educational;
- Non-clinical activities suited to educational sessions.

CONTINUING PROFESSIONAL DEVELOPMENT: GUIDANCE FOR ALL DOCTORS

The General Medical Council (GMC) has launched new guidance, which has been developed in co-operation with doctors, medical Royal Colleges, employers, patients and the public, and follows widespread public consultation earlier this year.

It is hoped that doctors will use it to reflect on how their learning and development improves the quality of care they provide to patients and for the service in which they work. The guidance describes:

- How doctors should plan, carry out and evaluate their Continuing Professional Development (CPD) activities.
- The importance of taking account of the needs of patients and of the healthcare team when doctors consider their own learning needs.
- How doctors should reflect on the *Good Medical Practice* domains when evaluating their CPD needs.
- The relationship between CPD and revalidation.
- The use of appraisal, job planning and personal development plans in managing CPD and how to record CPD activities.
- The responsibilities of others, such as employers and Colleges, in supporting doctors' CPD.

A copy of the guidance can be downloaded from the LMC website at:

http://www.sheffieldlmc.org.uk/OG12/CPD-July2012.pdf

PROTECTING CHILDREN AND YOUNG PEOPLE: THE RESPONSIBILITIES OF ALL DOCTORS

All doctors should have received a copy of the GMC guidance *Protecting Children and Young People: The Responsibilities of All Doctors*, which was produced by a

child protection working group led by Lord Thorpe (appeal court judge and head of international family justice for England and Wales). The BMA commented on earlier drafts of the guidance. The main topics covered are:

- Principles for protecting children and young people
- Identifying children and young people at risk of or suffering, abuse or neglect
- Communication and support
- Working in partnership
- Confidentiality and sharing information
- Keeping records
- Child protection examinations
- Training and development
- Doctors giving evidence in court
- Assessing the capacity of a child or young person
- Assessing best interests
- Definitions of children, young people and parents.

Key advice in the guidance is that doctors should:

- Be able to identify risk factors in the child's environment, such as chaotic lifestyles or substance misuse among parents;
- Get advice from named or designated professionals or lead clinicians or, if they are not available, experienced colleagues when unsure how to meet responsibilities to children and young people;
- Have a working knowledge of local procedures and know how to work in partnership with health visitors, nurses, social workers and the police.

A copy of the guidance, which comes into effect on 3 September 2012, can be downloaded from the LMC website at:

http://www.sheffieldlmc.org.uk/OG12/PC&YP-July2012.pdf

In addition, as noted in previous LMC newsletters, practices should also be aware of the following BMA guidance, available via the LMC website:

Child protection – a tool kit for doctors http://www.sheffieldlmc.org.uk/Child%20Protection%20 Tookkit%20May09.pdf Children and young people tool kit http://www.sheffieldlmc.org.uk/OG09/Children%20&%2 0Young%20People%20Toolkit.pdf

LOCUM GP FORUM

The online community for doctors, doc2doc, has recently launched a dedicated forum for GP locums. The forum provides an arena where locum GPs can discuss their experiences with colleagues from across the UK and gain insight from others in similar situations. Registering online to create an account is straightforward. More information about the forum and how to register can be found at:

http://doc2doc.bmj.com/forums/offduty_gp-locums.

SESSIONAL GPS: REDEFINING SUCCESS

Thursday 11 October 2012 BMA House

The 2012 Sessional GPs Conference will include talks and workshop sessions on a range of issues relevant to sessional GPs such as:

- Appraisal and revalidation;
- Working as a locum GP;
- Managing your pension;
- Common challenges of working as a salaried or locum GP.

Further information, including an event flyer can be downloaded from the BMA website at:

http://bma.org.uk/events/2012/octobe r/sessional-gps-redefining-success.

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

Email:

administrator@sheffieldlmc.org.uk

Post: Sheffield LMC, Media House, 63 Wostenholm Road, Sheffield S7 1LE

Articles for the September 2012 edition of the LMC newsletter to be received **by Friday 7 September** 2012.