

SHEFFIELD LOCAL MEDICAL COMMITTEE

Newsletter

November 2018

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GP PARTNERSHIP REVIEW

Further to the article in the October LMC Newsletter, our GP Partnership Review event took place on Monday 22 October. Nigel Watson, Independent Chair of the Partnership Review gave an informative presentation on his findings to date, as outlined in the Interim Report published on 2 October. This was followed by a Q&A session, which proved to be a useful opportunity for Sheffield GPs to feed back their concerns and suggestions.

The Interim Report is available at:

<http://www.sheffield-lmc.org.uk/website/IGP217/files/Interim%20report%20.pdf>.

Nigel's presentation can be downloaded from our website at:

<http://www.sheffield-lmc.org.uk/website/IGP217/files/GP%20Partnership%20Review%20Presentation%20Oct18.pdf>.

Views on the findings and suggestions contained in the Interim Report are being invited from individuals and organisations. As such, Sheffield LMC has submitted a formal response, a copy of which can be accessed via:

<http://www.sheffield-lmc.org.uk/website/IGP217/files/GP%20Partnership%20Review%20Nov18.pdf>.

We would urge practices to read the Interim Report and consider submitting a response via GPPartnershipReview@dh.gsi.gov.uk.

ACCESS TO HEALTH RECORDS

The British Medical Association (BMA) revised its guidance *Access to Health Records* in May 2018 to reflect the General Data Protection Regulation (GDPR), and again in October 2018. The latest version can be accessed via:

<http://www.sheffield-lmc.org.uk/website/IGP217/files/Access-to-health-records-October-2018.pdf>

The main updates in the October 2018 version are:

- Page 4, 4.3: What information should be provided to satisfy a subject access request?
- Page 6, 4.8: Can a fee be charged?
- Page 10, 8.4: Can a fee be charged?
- Addition of an updated BMA / Law Society template consent form for the disclosure of medical records to solicitors. The aim of the template is to help improve the process of seeking consent and to ensure that patients are well informed about disclosures.

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REQUEST FOR IDEAS: UK CONFERENCE OF LMCs MARCH 2019

Twice a year the General Practitioners Committee of the British Medical Association meet, once as an England Conference of LMCs and once as a UK-wide Conference of LMCs, to develop areas of policy negotiation with NHS England. Topics can range from workload and workforce issues to urgent care, Capita, prescribing, premises or list closure. Proposals are formulated by LMCs but need to reflect experiences in practice.

Therefore, we are requesting suggestions for Conference motions from GPs and Practice Managers for specific areas of concern that you consider are not being adequately addressed currently and would warrant a national debate. These may vary from suggestions for better implementation of certain policies to a vote of no confidence in a certain organisation.

Please submit details of the issue(s) you would like Sheffield LMC to consider submitting a Conference motion on via:

<https://www.surveymonkey.co.uk/r/UKConfMar19>.

The deadline for submission of motions for the March 2019 UK-wide Conference of LMCs is in December 2018. Therefore, we would appreciate completion of this survey **by Friday 30 November 2018**.

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FORMAT OF OUTPATIENT LETTERS

The LMC office has had several examples of Sheffield GPs complaining about the current format of outpatient correspondence generated by Sheffield Teaching Hospitals NHS Foundation Trust (STHFT). This was discussed at a recent meeting of Sheffield LMC, Sheffield Clinical Commissioning Group (CCG) and STHFT representatives.

Apparently, Lorenzo (the current STHFT IT system) has the functionality to format outpatient letters into a more primary care friendly layout. There is a working group leading on this, which includes Adrian Scott, Consultant in Diabetes and Endocrinology, who has discussed this letter format already with CCG GPs, but is keen for wider GP engagement.

Therefore, the LMC has been given the opportunity to help design a template that GPs would find more useful and easier to interpret. Several of the comments have been with regard to discharge medications, medication switches and duration of courses.

This is an opportunity for Sheffield GPs to help influence the template by emailing current concerns and suggestions for change to the LMC office via manager@sheffieldlmc.org.uk.

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HEPATITIS B IMMUNISATIONS

GPs are often requested to give hepatitis B immunisations covering 3 broad areas: (i) travel, (ii) occupational health and (iii) medical conditions. There remains some confusion in the understanding of the regulations, particularly in relation to responsibility and ability to charge a private fee.

As part of the 2018-19 contract deal, NHS England (NHSE) committed to work with specialised commissioning and secondary care colleagues to ensure that the responsibility to deliver hepatitis B vaccination to renal patients lies with the renal service and not with general practice. We have contacted the Clinical Director - Renal Services at Sheffield Teaching Hospitals to discuss progress with this locally.

The General Practitioners Committee (GPC), NHSE and Health Education England are working together to ensure all medical schools provide services for the provision of hepatitis B vaccines for medical students, to ensure that this burden does not fall to practices without appropriate funding arrangements being in place.

In view of the above, the GPC revised its guidance *Focus on hepatitis B immunisations* in September 2018. The revised guidance can be accessed via:

<http://www.sheffield-lmc.org.uk/website/IGP217/files/Focus-on-hepatitis-B-immunisations-updated-Sept-2018.pdf>

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SHEFFIELD GENERAL PRACTICE NURSE AND HEALTH CARE ASSISTANT AWARDS

We would like to encourage Sheffield GPs and Practice Managers to consider nominating a Practice Nurse or Health Care Assistant (HCA) who you feel deserves recognition. There are 6 award categories highlighting the differing impact Practice Nurses and HCAs can make in delivering high quality care. **Nominations are open until 4 December.**

In summary:

- Nominations will be judged by primary care nurses, including members of the Practice Nurse Forum, GPs and members of Sheffield Clinical Commissioning Group (CCG).
- Awards will be presented at an award ceremony on Wednesday 6 February 2019, in conjunction with the Practice Nurse PLI on that day.
- Nursing winners from Sheffield will be put forward for the wider Yorkshire Practice Nurse awards.

More information and a nomination form can be found on Sheffield CCG's intranet (login required):

<http://www.intranet.sheffieldccg.nhs.uk/general-practice-nurse-and-hca-awards.htm>

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ELECTRONIC REFERRAL SERVICE (ERS) EXCLUSIONS

Further to the LMC Newsflash issued in May 2018, the eRS exclusion lists for Sheffield Teaching Hospitals and Sheffield Children's Trust were both updated in October 2018. The latest versions can be accessed via the PRESS portal:

<https://sites.google.com/site/sheffieldccgportal/clinical-guidance/ers-exclusion-lists-for-routine-referrals-to-consultant-led-services>.

To ensure that the eRS Directory of Services is fully user friendly from a general practice perspective, it is important that practices feed back if they are experiencing any difficulties finding the service they need on the eRS system:

- For adults: Caroline Eady - caroline.eady@sth.nhs.uk / (0114) 271 4455;
- For children: Mark Talbot - mark.talbot@sch.nhs.uk / (0114) 271 7783.

REMINDER: Practices need to regularly check the Workflow tab in their practice GP system for any notifications that a paper referral has been rejected and details of what actions need to be taken. More information can be found at:

<https://sites.google.com/site/sheffieldccgportal/clinical-guidance/e-rs-rejected-referrals>.

For ease of future reference, this updated guidance can be found at:

[http://www.sheffield-lmc.org.uk/website/IGP217/files/eRS%20Exclusions%20\(Nov18\).pdf](http://www.sheffield-lmc.org.uk/website/IGP217/files/eRS%20Exclusions%20(Nov18).pdf)

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EXCEPTION REPORTING IN GENERAL PRACTICE SETTINGS

Guidance has been produced following consultation with the British Medical Association (BMA) and individual lead employers, which aims to support employers and hosts of GP trainees in general practice settings to manage the exception reporting process.

A copy of the guidance can be accessed via:

<http://www.nhsemployers.org/-/media/Employers/Documents/Need-to-know/Guidance-for-managing-exception-reporting-GP-setting.pdf?la=en&hash=41CBA6785BDEE5E5037150A8F613454A4F303933>

GP trainees should forward exception reports to their educational supervisor. In addition, trainees should copy in the guardian of safe working for issues related to safe working practices. For Sheffield GP trainees the guardian of safe working is Dr Guy Veall.

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GP PREMISES SURVEY

As noted in the August LMC newsletter, the General Practitioners Committee (GPC) is participating in a review of the GP premises system, which is being led by NHS England (NHSE) and the Department of Health and Social Care. Input has been sought from interested parties, with a wide range of proposals submitted for consideration, and detailed assessment of these proposals is currently underway.

In order to help inform this process and the continuing discussions with NHSE and others, and to build a fuller picture of the current landscape for GP premises, the GPC is running a premises survey. LMCs are being asked to encourage practices to respond to the survey, which will only require one response per practice and should take no more than 10 minutes to complete.

The online survey, which can be found at <https://www.research.net/r/BMApremisessurvey> will run until **Wednesday 21 November**.

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JUNIOR DOCTOR CONTRACT REVIEW SURVEY

The British Medical Association (BMA) has launched a survey for trainees either currently on or who have previously worked under the 2016 terms and conditions of service to inform the BMA's position during a review of the Junior Doctor Contract 2016.

The survey aims to give doctors a chance to highlight their thoughts and concerns around a wide variety of workplace issues relating to the contract, such as exception reporting, leave arrangements and working patterns. The BMA has remained in dispute with the Government since the 2016 contract was imposed, and the review process presents an opportunity to secure improvements and pursue contractual revisions.

The survey, which can be accessed via the link below, closes at **5 pm on Thursday 29 November**:

<https://www.research.net/r/juniorcontractsurvey>.

More information about the review can be found at:

<https://www.bma.org.uk/collective-voice/influence/key-negotiations/terms-and-conditions/junior-doctor-contract-negotiations/junior-doctor-contract-review-2018/junior-doctors-contract-review-survey>.

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PRESCRIBING CANNABIS-BASED MEDICINAL PRODUCTS

The new regulations to widen the availability of cannabis-based medicine within the NHS came into effect on 1 November 2018. Prescribing is restricted to a doctor on the General Medical Council (GMC) specialist register prescribing within their field of expertise where the cannabis-based product is an unlicensed 'special' medicinal product for use by a specific patient. Once a product receives a licence from the Medicines and Healthcare products Regulatory Agency (MHRA), it will be available for prescription in the same way as any other Schedule 2 drug.

The British Medical Association (BMA) has published some Q&As to explain what these changes mean:

<https://www.bma.org.uk/collective-voice/policy-and-research/public-and-population-health/cannabis-based-medicinal-products>.

NHS England has also published information for patients, which helpfully states *You cannot get cannabis-based medicine from your GP - it can only be prescribed by a specialist hospital doctor:*

<https://www.nhs.uk/conditions/medical-cannabis/>.

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FIREARMS LICENSING

Concerns have been raised with the General Practitioners Committee (GPC) regarding whether or not the British Medical Association (BMA) guidance on firearms licensing is still current following the introduction of the General Data Protection Regulations (GDPR), particularly as some areas appear to have moved from requesting factual reports to requesting a copy of the full medical history. The GPC sought clarification from the Information Commissioners Office (ICO) around police using Subject Access Requests (SARs). The ICO has offered the following clarification:

The ICO is aware that the access to medical records for the purposes of firearms licensing has raised concerns, given the more stringent provisions of the new data protection regime, but it is our view that the police have adequate powers and authority to deal with this as they have done hitherto, namely by approaching the GP direct for information they require. This would permit the GP to provide only information which, in their professional judgement, was pertinent to the application. Applicants would be asked to consent to the approach by the police to the GP. This would not constitute consent in data protection terms – we are satisfied that the police would not be obtaining and processing the data on the basis of consent - but would be closer perhaps to the sort of consent which the medical profession uses when treating a patient. It would represent a means of ensuring that the applicant was aware of, understood and accepted the need for obtaining medical data to support the decision whether or not to award a licence.

To summarise, therefore, it is the ICO's view that the previous means of obtaining medical information, which you have mentioned, is still permissible under the DPA and that therefore the 'enforced subject access' approach you describe is not only unnecessary, but could potentially constitute a breach of the DPA.

Therefore, we would like to remind practices of the BMA guidance available via the link below, which lays out 5 options with template letters to assist GPs in responding safely and professionally to requests for factual reports in relation to firearms licensing:

<https://www.bma.org.uk/advice/employment/ethics/ethics-a-to-z/firearms>.

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REMINDER:

TYPE 2 OBJECTIONS NO LONGER VALID

Practices should have received a letter from NHS Digital informing them that the codes for the 'type 2' opt-out have been retired and should no longer be used. A 'type 2' opt-out prevented a patient's confidential personal information from leaving NHS Digital for purposes beyond their direct care.

A new national data opt-out model, launched in May, replaces the 'type 2' opt-out. The new model provides an online facility for individuals to opt-out from the use of their confidential data for purposes other than direct care, ie for the purposes of research and health service planning. Patients who had previously registered a 'type 2' opt-out have had this converted into a national data opt-out. It is important that patients are aware of their right to opt-out. Despite efforts to raise public awareness as part of the Information Commissioner's Office 'your data matters' campaign recently published figures show that uptake of the national opt-out has been lower than expected.

Patients can set their opt-out preferences at: <https://www.nhs.uk/your-nhs-data-matters/>. They will need their NHS number and a valid email address or telephone number which is on the GP record or on the Personal Demographics Service database to register their decision to opt out. Patients who are unable to use the online facility can use a phone helpline to manage their choice - 0300 303 5678. A paper print-and-post form is also available: <https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/other-ways-to-manage-your-choice/>.

A patient poster and handout pack was sent to practices in June - these can be accessed at: <https://digital.nhs.uk/services/national-data-opt-out-programme/supporting-patients-information-and-resources>.

The new opt-out is provided in line with the recommendations of the National Data Guardian in her 2016 'Review of Data Security, Consent and Opt-Outs'. NHS Digital is applying patients' preferences but there is a longer timetable for implementation across the rest of the system by 2020. The national opt-out will not apply in the following circumstances:

- the patient has given consent to a specific project (eg a medical research project);
- statutory requirements to share data (eg Section 259 of the Health and Social Care Act 2012 which requires providers to share data with NHS Digital);
- where there is an overriding public interest for the opt-out not to apply;
- other specific circumstance - for a full list of exemptions see: <https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/where-opt-outs-dont-apply/>.

'Type 1' opt-outs will continue to apply and be respected. A 'type 1' opt-out prevents confidential patient information from leaving the GP practice for purposes other than direct care. Practices should continue to record 'type 1' opt-outs.

Further information can be found on NHS Digital's National data opt-out programme pages: <https://digital.nhs.uk/services/national-data-opt-out-programme>.

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PROMOTING PUBLIC MENTAL HEALTH AND INVESTING IN PREVENTION

The British Medical Association (BMA) has published a report calling for greater investment in public services to prevent poor mental health, in response to growing concerns from doctors about the sheer scale of the mental health problem in the UK. The report covers areas such as:

- The social determinants of mental health;
- Employment and unemployment;
- Social environment and relationships;
- The relationship between mental and physical health;
- Lifestyle risk factors;
- Public health and local services;
- National initiatives;
- Socioeconomic status and poverty;
- Education;
- Physical environment and housing;
- Long-term conditions;
- Current investment in public mental health;
- Schools and workplaces;
- Key areas for action.

A copy of the report can be accessed via:

<https://www.bma.org.uk/-/media/files/pdfs/collective%20voice/policy%20research/public%20and%20population%20health/mental%20health/tackling%20the%20causes%20promoting%20public%20mental%20health%20and%20investing%20in%20prevention%20bma%20oct%202018.pdf?la=en>.

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DISTRICT NURSING SURVEY

Dr Agnes Fanning, District Nurse and Queen's Nurse, has been commissioned by the Royal College of Nursing (RCN) and the Queen's Nursing Institute (QNI) to look at evidence-based models of outstanding district nursing that meet the needs of patients, families and carers and incorporate integration with the wider health and social care system.

Dr Fanning is looking for survey contributions to assist her with essential data required for her final report via a brief survey, which gives GPs the opportunity to comment on areas such as:

- How you rate the District Nursing Service working with your GP practice;
- How supportive the District Nursing service is to the registered practice population;
- What the key strengths of the District Nursing Service are;
- The value the District Nurses add to the care delivered to patients;
- Resourcing of the District Nursing Service;
- Main threats to the District Nursing service.

The views and comments of GPs are crucial and, as such, the British Medical Association (BMA) is urging GPs to support this work by completing the survey available at: <https://www.surveymonkey.co.uk/r/QFGGRXR>.

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**VISION FOR DIGITAL, DATA AND TECHNOLOGY
IN HEALTH AND CARE**

Matt Hancock, Secretary of State for Health and Social Care, recently published his vision for digital, data and technology in health and care, which can be accessed via: <https://www.gov.uk/government/publications/the-future-of-healthcare-our-vision-for-digital-data-and-technology-in-health-and-care/the-future-of-healthcare-our-vision-for-digital-data-and-technology-in-health-and-care>.

The vision document focuses on improving tech, on interoperability and data-sharing, on supporting the professionals who work in the NHS and on building the right culture. The Department of Health and Social Care and NHS Digital are requesting the following feedback:

- Do you agree with these priorities?
- What have we missed?
- What good work should we support and build on?
- What do we need to take into account when thinking about applying these principles to different parts of the health and care system?

A questionnaire has been set up for feeding back comments on the vision: <https://r1.surveysandforms.com/4c3zqo08-fa3ela24>.

In addition, a draft framework for technology standards by NHS Digital has been published, which is available via: <https://digital.nhs.uk/about-nhs-digital/our-work/nhs-digital-data-and-technology-standards/framework>.

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**ST LUKE'S HOSPICE
GP FORUM**

*Article submitted by Nick Hudson,
Chair, St Luke's GP Forum*

I am looking for new members for the St Luke's Hospice GP forum. It is an opportunity for GPs to discuss with the clinical and management team various aspects of the services that are provided at St Luke's Hospice and in the community.

It is not necessary to have an expertise in palliative care because we are looking at how palliative and end of life care is provided in everyday General Practice. We are looking for GPs whether partners, salaried, or locums.

We usually meet 2-3 times per year at St Luke's Hospice. The meeting currently starts at 7.00 pm (refreshments from 6.30 pm) for around 1 hour on a Tuesday evening. The next meeting will be in the New Year.

If interested in attending please contact me via nickhudson@doctors.org.uk.

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**PRIMARY CARE
WORKLOAD OBSERVATORY**

The Royal College of General Practitioners (RCGP) Research and Surveillance Centre (RSC) and Surrey Heartlands Health and Care Partnership are leading an NHS England funded project to create a new way to understand the demand on GPs.

The new national 'workload and case-mix observatory' will be created at the RCGP RSC secure data and analytics hub at the University of Surrey, and will collect and monitor data from a network of more than 350 practices across England.

They are looking to increase the number of practices that are currently part of the network. Further information about can be found at:

<http://www.rcgp.org.uk/clinical-and-research/about/clinical-news/2018/june/building-a-gp-workload-observatory-and-your-chance-to-be-involved.aspx>.

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**CLINICAL ACADEMIC
TRAINEES CONFERENCE**

The next British Medical Association (BMA) clinical academic trainees' conference will take place on **Saturday 2 February 2019** at BMA House, London.

This one-day conference is organised by and for academic trainees and aims to give practical tips on how to manage academic careers. It acts as a national forum in which to network, learn how to make the most of academic training and develop careers. Practical advice will be available from experts and colleagues in the field.

To register interest in attending and receive notification when registration opens, email confunit@bma.org.uk.

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**SESSIONAL GPs E-NEWSLETTERS:
OCTOBER & NOVEMBER 2018**

The October and November editions of the Sessional GPs e-newsletter are available on the British Medical Association (BMA) website at:

<https://bma-mail.org.uk/t/JVX-5WU0A-1BJCJOU46E/cr.aspx>

<https://bma-mail.org.uk/t/JVX-5YKMA-1BJCJOU46E/cr.aspx>

The main articles include:

- Top tips for salaried GPs
- SARS and PCSE – the 400-day journey
- Supporting doctors' health and well-being at work
- GP Partnership Review: Interim Report
- Self care and patient empowerment
- Capita and the NHS pension fiasco - part 8
- Have you been affected by annualisation?
- How to calculate your annual pension allowance growth
- Winter indemnity scheme: an essential guide

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**GP TRAINEE E-NEWSLETTER:
OCTOBER 2018**

The October edition of the GP Trainee e-newsletter is available on the British Medical Association (BMA) website at:

<https://bma-mail.org.uk/t/JVX-5XAM9-1BJCJOU46E/cr.aspx>

The main articles include:

- Meet your new co-chairs
- The GP trainee's guide to the AKT
- GP partnership review: interim report and myth-buster
- How's your mental health survey
- The case for enhanced GP training
- Preparing for your first GP role
- NHS England extends mental health support service for GPs

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

Articles for the December edition to be received by Friday 7 December

Submission deadlines can be found at

<http://www.sheffield-lmc.org.uk/website/IGP217/files/Newsletter%20&%20VB%20Deadlines%202019.pdf>