SHEFFIELD LOCAL MEDICAL COMMITTEE NEWSLETTEN October 2016

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LMC ELECTIONS 2016-2020: EXTENSION OF DEADLINE

Concerns have been raised by Dr Trish Edney, Returning Officer, as 2 LMC election nomination forms that are known to have been posted to her w/c 26 September 2016 have not been received. It is thought that this is due to a disruption in postal services as a result of temporary road closures.

As a result of the above, it has been decided to extend the election closing date to **Friday 21 October**, in order to be able to check whether any other forms are missing.

An email was sent to GPs who could have been affected by this on Tuesday 11 October. Any GP who received the email and has posted a completed form to Dr Edney is asked to inform the LMC via (0114) 2588755 or secretary@sheffieldlmc.org.uk as soon as possible, and no later than **Friday 21 October**.

Thank you.

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PRIMARY CARE SUPPORT ENGLAND (PCSE): UPDATE

The LMC continues to receive updates on the outstanding service issues as follows:

Performers List Applications: GP Trainees

Further to the update in the September newsletter noting the difficulties some new GP Trainees were experiencing in being added to the Performers List, one suggested solution has been that where a GP Trainee has completed and submitted their application correctly and in a timely manner, NHS England will allow a "grace period". However, it has been suggested that the increased capacity and priority given to this issue by PCSE will mean that this "grace period" is not required, and NHS England is currently working to develop a single national solution. Therefore, whilst it is hoped that no GP Trainee will find themselves due to commence work in a GP practice without having been added to the Performers List, if this circumstance looks likely or does occur, it is vital that the GP Trainee and the employing practice email ENGLAND.yhpp@nhs.net to seek the latest advice in line with national recommendations.

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Patient Registration Delays

Concerns were raised regarding the possible impact of delayed registrations on global sum payments, particularly for university practices. The General Practitioners Committee (GPC) has confirmed that global sum is calculated by the number of patients on the practice list on the first day of the quarter, but only once all submissions by that date have been actioned. Therefore, all registrations submitted by 1 October will count towards a practice's global sum.

<u>Urgent Medical Information Requests</u>

PCSE have confirmed that if practices have an urgent clinical need to access information in a medical record, they should email pcse.enquiries@nhs.net with *Urgent medical information request* in the subject line. If a record is currently with the old practice, PCSE can facilitate the exchange of information between practices via a telephone call or transfer of electronic summary notes, to ensure the information gets to the relevant clinician in good time.

Emails Deleted Unread

Concerns were raised with the LMC regarding read receipt requests resulting in an automatic reply stating that the email to pcse.enquiries@nhs.net has been deleted unread. This was raised with PCSE and confirmation has been received that emails are not deleted but are redirected to the appropriate team within PCSE. These misleading automatic replies cannot currently be fixed by PCSE until additional functionality is introduced to NHSmail 2.

LMC Representation of Sheffield GPs

Despite repeated requests and the promise of monthly updates, the LMC has still not received any updates on the doctors that have joined or left the Performers List or changed their status since May 2016. We continue to stress to PCSE the importance of receiving this information, but until this is resolved, we appreciate that many Practice Managers are endeavouring to keep us informed via: manager@sheffieldlmc.org.uk. This does not, of course, enable us to offer representation to locum GPs who are not attached to a Sheffield GP practice, and we continue to make this point to PCSE.

GP Registrar Reimbursements

We were pleased to receive confirmation from some practices that their outstanding or incorrect payments have been resolved. Unfortunately, they still appear to be in the minority and we continue to receive reports of significant problems. We understand that making correct and timely payments is being prioritised within PCSE. Therefore, we would encourage practices to email pcse.enquiries@nhs.net (clearly stating the nature of the problem in the subject line), copied to manager@sheffieldlmc.org.uk and Justine.burns@capita.co.uk. This will ensure that the LMC and PCSE's Regional Manager is aware of the number and nature of outstanding issues. If the problems are not resolved by the time the next payments are made and statements received, this should be brought to the LMC's attention via manager@sheffieldlmc.org.uk.

Collection of LMC Levies

Adjustments are still being made to the amount of money collected from practices due to accurate and timely information not having been passed from PCSE to Sheffield Clinical Commissioning Group (CCG). We have been reassured that this is being looked at and should be resolved imminently but, in the meantime, practice statements might show slightly differing amounts to those expected or small additional payments being taken. Please be assured that the LMC is reconciling all payments received and will ensure that no practice pays more than is due.

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SOUTH YORKSHIRE PENSIONS AUTHORITY MEDICAL DECLARATION FORM

Concerns have been raised with the LMC regarding the statement to be signed by GPs on these forms, as well as the lack of an agreed fee. As such, the LMC entered into negotiations with the Pensions Authority and received constructive and helpful assistance from Joanne Webster, Communications and Training Manager, in resolving GPs' concerns.

The Local Government Pension Scheme regulations allow a member to purchase up to £6755 additional pension within the Scheme. If a member chooses to go ahead with buying extra pension and later retires through ill health before having completed the contract, any outstanding payments for extra pension would be deemed to be fully paid. Therefore, to safeguard the Scheme, the Pensions Authority requires a member to undergo a medical confirming whether or not the member is in reasonably good health.

As the Medical Declaration Form for the purchase of Additional Pension is only used when a voluntary decision is made by the Scheme member to increase their pension contribution, the LMC agreed that it is the Scheme member's responsibility to pay any fee incurred. This was not always clear to the Scheme member prior to consulting their GP and, therefore, the form has been amended to state "Please note that any charges associated with the completion of this medical certificate are to be borne by the scheme member and may not be charged or recharged to the Pension Fund".

We also raised concerns with the wording of the medical declaration, as we do not believe that it is within the remit of a GP to make an actuarial decision to determine risk in relation to whether a patient should or should not be included in a pension scheme.

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As a result, Notes for the Medical Practitioner on completion of the form have been included and the statement to be signed has been revised to "I understand that the above named person has asked to purchase additional benefits under the Pension Scheme Regulations. I confirm that I am a certified registered medical practitioner and confirm that in my opinion is / is not in reasonably good health."

We hope that the above amendments will result in Scheme members being forewarned that GPs can charge a fee for this work and GPs feeling that the statement they are being asked to sign is within their competence and remit. However, as ever, please do not hesitate to contact the LMC via manager@sheffieldlmc.org.uk if you have any concerns or comments.

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MEDICAL EVIDENCE IN SUPPORT OF BENEFIT CLAIMS AND APPEALS

A number of concerns have recently been raised with the LMC office regarding patients requesting medical evidence in support of benefit claims and/or appeals. This is an issue that the LMC took up with the Department of Work and Pensions (DWP) many years ago but, in view of the recent queries, we have revisited the issue.

We have received confirmation that the DWP does not ask patients to obtain evidence directly from their GP. The wording on the ESA50 has been amended to make this clear.

In view of the above, the LMC's guidance has been amended and reissued and can be found at: http://www.sheffield-lmc.org.uk/lmc%20guidance/benefit_appeals.pdf

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GENDER INCONGRUENCE IN PRIMARY CARE

A number of queries have been raised with the GPC regarding the management of patients who present at their general practice with gender identity problems; including questions relating to patient records and confidentiality and, in particular, regarding prescribing and monitoring responsibilities in relation to the gender reassignment process.

In response, the GPC has produced new guidance, which:

- aims to explain what should be provided in primary care;
- signposts to further sources of guidance;
- highlights some of the underpinning ethical and legal considerations.

A copy of the guidance can be downloaded from the LMC website at: http://www.sheffield-lmc.org.uk/OG16/Focus-on-gender-incongruence-in-primary-care.pdf

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PARTNERSHIP AGREEMENTS

Concerns continue to be raised regarding some practices not having Partnership Agreements, or not having up-to-date Partnership Agreements. We strongly recommend that GPs in partnership enter into a written Partnership Agreement, seek legal and accountancy advice in doing so, and ensure that it is reviewed regularly and kept up-to-date. Partnership Agreements reduce both financial and non-financial risk and provide a detailed framework on which the ongoing management and administration of the partnership can be based.

BMA guidance on Partnership Agreements can be downloaded from the *Other Guidance* section of the LMC website at: http://www.sheffield-lmc.org.uk/OG09/Partnership_Agreements.pdf

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GENERAL PRACTICE ACCESS INFORMATION

All practices should have received an update from the Primary Care Team at NHS England - North (Yorkshire and the Humber) regarding the requirement to submit an online return twice a year via the Primary Care Web Tool. This will set out what access to appointments the practice offers to patients either itself or through other arrangements (such as via Primary Care Sheffield), 7 days a week.

The first return opened for submission from **3 to 31 October** 2016. Guidance has been made available on NHS England's website: https://www.england.nhs.uk/commissioning/gp-contract/.

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FUNDING AND SUPPORT FOR GENERAL PRACTICE

As part of the Urgent Prescription for general practice, the GPC asked for fair and sustainable funding and resources to reach a minimum of 11% of NHS spend. The General Practice Forward View (GPFV) has gone some way in addressing this ask through the announced increase in the level of investment in primary care, and specifically to general practice. Investment to general practice services will rise by a recurrent £2.4bn by 2020/21, which will increase the proportion of investment going into general practice to over 10% of the NHS England budget. NHS England has indicated the funds will be distributed equally up to 2020/21. The GPC will be challenging this modelling as it seeks to secure front-loading of the funding to better deal with the current crisis in general practice.

Frequently the time between announcement of funds and the closing date for applications is very tight, leaving practices very little time to plan and submit their bid. Therefore, the GPC has produced a guide which aims to summarise:

- the different funding streams currently or soon to be available;
- what they can and cannot be used for;
- the relevant criteria to be met;
- · where to find more information.

The GPC will add to and update the guide to reflect any new information released by NHS England and add any new sources of funding or support.

A copy of the guidance can be downloaded from the LMC website at: http://www.sheffield-lmc.org.uk/OG16/Funding-support-general-practice-full-guidance-oct-2016.pdf

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WORKFORCE MINIMUM DATA SET (WMDS)

The British Medical Association (BMA) recently published guidance on the WMDS, which can be downloaded from the LMC website via: http://www.sheffield-lmc.org.uk/OG16/Focus-on-the-Workforce-Minimum-Data-Set-September-2016.pdf

WMDS is a national twice-yearly collection of data from NHS organisations in England on current workforce figures. Practices are legally required under the Health and Social Care Act to provide the information requested for the WMDS. The collection is intended to allow the Department of Health, NHS England and Health Education England to understand the current NHS workforce picture and plan for future needs.

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NHS GP HEALTH SERVICE

As part of a broader package of support, the GPFV is committed to improving access to mental health support for GPs and GP Trainees who may be suffering from mental ill-health, including stress, depression, addiction and burnout.

A new NHS GP Health service is being developed and, following the appointment of The Hurley Clinic Partnership as the provider of this service, NHS England is expecting to launch the service in January 2017.

More information about the type of services on offer, who can access them and how they can be accessed can be found at: https://www.england.nhs.uk/ourwork/gpfv/gp-health/

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GP INDUCTION AND REFRESHER (I&R) SCHEME

The GP I&R scheme was launched last year. The GPFV pledged to simplify and improve the scheme. These changes are in 3 key areas:

- 1. Increasing financial support from November 2016;
- 2. Increasing practical support from September 2016;
- 3. To make it easier for GPs to return to practice and cutting down the time involved, the process will be made more flexible.

Further information can be found at: https://www.england.nhs.uk/commissioning/primary-care-comm/gp-workforce/gp-induction/

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NHS OPERATIONAL PLANNING AND CONTRACTING GUIDANCE 2017 - 2019

On 22 September 2016 NHS England and NHS Improvement published operational and contracting planning guidance covering 2 financial years. This is underpinned by a 2 year tariff and 2 year NHS Standard Contract.

The guidance provides local NHS organisations with an update on the national priorities for 2017/18 and 2018/19, as well as updating on longer term financial challenges for local systems.

The main areas covered in the guidance are:

- Introduction and context: implementing Sustainability and Transformation Plans;
- Priorities and performance assessment;
- Developing operational plans and agreeing contracts for 2017-19;
- NHS Standard Contract;
- Finance and business rules;
- Commissioning in the evolving system.

A copy of the guidance can be downloaded at: https://www.england.nhs.uk/wp-content/uploads/2016/09/NHS-operational-planning-guidance-201617-201819.pdf

The BMA's Public Health team has produced a brief summary of the guidance, which can be accessed via: https://www.bma.org.uk/collective-voice/policy-and-research/nhs-structure-and-delivery/summary-of-nhs-operational-planning-and-contracting-guidance

Of particular interest is Annex 6 of the guidance *General Practice Forward View planning requirements*. This gives more detail on the extra funding announced in the GPFV. The BMA has produced a summary of this, which can be accessed via: http://www.sheffield-lmc.org.uk/OG16/focus-on-the-gpfv-planning-requirements.pdf

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COURT OF PROTECTION ISSUES

The Court of Protection has moved from a centralised arrangement to using non-specialised regional judges. The BMA's Professional Fees Committee has received reports of an unusual instance of a GP being 'ordered' to examine a patient without a fee. This occurred because it was assumed that the GP practice was an NHS Body, whereas the nearest it can be is an NHS Body for the purpose of the GMS/PMS Contract. It is hoped that this was an isolated instance.

If practices receive any unusual or inappropriate requests, it would be appreciated if as much detail as possible, whilst preserving confidentiality, could be forwarded to the LMC office via manager@sheffieldlmc.org.uk.

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HOW AUSTERITY IS DAMAGING HEALTH

Doctors are increasingly seeing patients struggling on low incomes and unable to live a healthy lifestyle. A new briefing from the BMA board of science sets out the evidence for the ways in which austerity and associated welfare reforms can impact on health and wellbeing. This includes increasing child poverty and rates of material deprivation, as well as more tangible effects such as a higher prevalence of mental illness and suicides. The briefing looks at what action can be taken to reduce the impact on health and wellbeing, and suggests some practical ways doctors can be advocates for their patients.

A copy of the briefing can be downloaded via:

https://www.bma.org.uk/-

/media/files/pdfs/working%20for%20change/improving%20health/public%20and%20population%20health/bos-health-in-all-policies-austerity-briefing-2016.pdf?la=en

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PURPOSE AND ACTIVITIES OF THE GENERAL PRACTITIONERS DEFENCE FUND (GPDF)

Information provided by Dr Stewart Kay, GPDF Chair

At the GPDF's recent AGM, I was asked to produce a short guide on the role of the GPDF for LMCs to distribute to GPs.

The purpose of the GPDF is to protect the interests of all GPs rendering services in the UK under the NHS. The functions of the GPDF are:

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- 1. To support financially the central GP political structure of England, Wales and Scotland on behalf of all GPs, as set out in the Company's Memorandum of Association.
- 2. To fund the Annual Conferences of LMCs, including Special Conferences.
- 3. To support 'local' initiatives, including legal challenges which are judged to be of national importance.

It receives its income from:

- 1. An annual levy on LMCs calculated to meet its projected costs.
- 2. Income from investments.
- 3. A contribution from the BMA to support the activities of the GPC and its sub-committees on the same basis as the support the BMA provides to other Branches of Practice.

The Members of the GPDF are currently the voting members of the GPC, who elect directors to manage the company.

Under changes which are happening this year membership of the GPDF will expand to include nominees of LMCs.

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ST ANDREW'S CHILD CONTACT CENTRE

Practice Managers should have recently received (or will shortly receive) information from St Andrew's Child Contact Centre regarding the services they provide, including a leaflet which practices are being asked to display. Further copies of the leaflet can be obtained by contacting the Centre's co-ordinator on 07905 417228 or info@saccc.co.uk.

The Centre is a voluntary organisation which provides a friendly and neutral place where children of separated families can enjoy contact with their non-resident parents and sometimes other family members, in a comfortable and safe environment.

Of particular note to practices is that the Centre accepts self-referral. More information about the services and facilities provided and the referral processes can be found at: www.saccc.co.uk.

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

Articles for the November edition to be received by Friday 11 November.

Submission deadlines can be found at http://www.sheffield-lmc.org.uk/Newsletters14/VB and Newsletter Deadlines.pdf

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