

SHEFFIELD LOCAL MEDICAL COMMITTEE

Newsletter

APRIL 2014

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ACTIVITY UPDATE:

FEBRUARY TO MARCH 2014

The LMC's latest Activity Update (February to March) 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.sheffield-lmc.org.uk/Reports/SLMC%20Activity%20Update%20Feb-Mar14.pdf>

In addition, hard copies can be requested from the LMC office via email to:

adminassistant@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.

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STAFFING CHANGES AT SHEFFIELD LMC

It is with sadness that the LMC has to announce that Amy Lacey will be leaving the post of LMC Administrator at the end of May.

Amy will have been with the LMC for almost 6 years. In that time she has worked tirelessly in supporting the LMC Executive and Manager, as well as expanding her own knowledge and remit. Amy has been instrumental in improving communications, from the new telephone system to new PCs and digital dictation, as well as streamlining internal systems for diary management, meeting arrangements and generally ensuring that we are all able to work more efficiently and coherently.

Amy's impressive work ethic, organisational skills, sense of humour and fabulous baking will be sadly missed, but we wish her every success and happiness in her relocation to Wiltshire.

Amy has generously given more notice than was contractually required in order to help train and handover to her successor. We hope to be able to make a further announcement on this front shortly.

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E-DISCHARGES – INVESTIGATION/FOLLOW-UP REQUESTS

Sheffield Clinical Commissioning Group (CCG) and Sheffield LMC have been made aware of an increasing number of GPs who feel they are receiving inappropriate e-discharge requests, eg requests for investigations or follow-up which GPs do not consider to be Primary Care's responsibility and / or inappropriate timescales.

The LMC Executive is hoping to meet with CCG and Sheffield Teaching Hospitals NHS Foundation Trust (STHFT) representatives towards the end of April 2014.

It would be extremely helpful if practices could send specific examples of inappropriate requests to the LMC office via:

administrator@sheffieldlmc.org.uk.

Please ensure that patient identifiable information is removed from these communications.

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FITNESS FOR PHYSICAL ACTIVITY CERTIFICATION

It has been brought to the LMC's attention that there has been an increase in the number of requests from gyms requesting that GPs certify whether or not patients are fit for a particular activity.

As a result, our guidance *Fitness for Physical Activity Certification* has been updated and reissued. A copy of the guidance can be downloaded from the LMC website at:

<http://www.sheffieldlmc.org.uk/lmc%20guidance/Fitness%20for%20Physical%20Activity%20Certification.pdf>

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GUIDANCE TO SUPPORT CONTRACT CHANGES 2014/15

NHS Employers, NHS England and the General Practitioners Committee (GPC) have published documents to support GP practices and NHS England Area Teams to implement the 2014/15 contract changes.

They include the amended Statement of Financial Entitlements (SFE), 2014/15 General Medical Services (GMS) contract guidance and audit requirements (including core contractual requirements and enhanced services) and the 2014 Directed Enhanced Service (DES) and Alternative Provider Medical Services (APMS) directions.

The documents can be accessed as follows:

Joint guidance on the contract changes:

http://bma.org.uk/-/media/files/pdfs/practical%20advice%20at%20work/contracts/gps/gms_contract2014-2015_guidance_audit_requirements.pdf

NHS England guidance:

<http://www.england.nhs.uk/wp-content/uploads/2014/03/gp-contract-change-fin.pdf>

SFE (Amendment) Directions 2014: http://www.nhsemployers.org/SiteCollectionDocuments/Statement_of_financial_entitlement_201415_ja310304.pdf

In addition, the GPC has produced a checklist of actions for practices to complete to ensure they meet the requirements of the 2014/15 GP contract. The checklist covers the following areas:

- Allocation of named GPs to patients aged 75 and over;
- Signing up to the voluntary unplanned admissions enhanced service;
- New regulations on patients and information, including electronic appointment booking, requesting online repeat prescriptions and access to summary information on the patient record;
- Seniority changes;
- Quality of out of hours services requirements;
- Changes to the Extended Hours enhanced service.
- GMS practices - financial impact of the movement of Quality and Outcomes Framework (QOF) and enhanced services resources into core funding;
- Personal Medical Services (PMS) practices - check how the contract changes will be applied to practice funding.

The checklist and associated guidance can be accessed via the GPC website at:

<http://bma.org.uk/gpcontract>

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UNPLANNED ADMISSIONS ENHANCED SERVICE

Guidance on the Unplanned Admissions Enhanced Service has now been published and is available at:

<http://www.nhsemployers.org/SiteCollectionDocuments/Avoiding%20unplanned%20admissions%20guidance%202014-15.pdf>

Associated templates are available in Word format at:

<http://www.nhsemployers.org/PayAndContracts/GeneralMedicalServicesContract/DirectedEnhancedServices/Pages/Enhancedservices201415.aspx>.

The guidance:

- Sets out the full requirements of the enhanced service under the headings of practice availability, proactive case management and personalised care planning, reviewing and improving the hospital discharge process and internal practice review;
- Includes the templates associated with the enhanced service, including care planning and reporting;
- Sets out how the enhanced service will be paid and monitored.

Please note that, following pressure from the GPC, the guidance was revised and now clarifies that:

- Care plans for patients initially added to the case management register have to be in place by the end of September 2014, not June 2014 as was originally specified. This recognises the difficulty with producing care plans for these patients for the end of June and ensures consistency with the payment structure in place for the enhanced service.
- Patients initially added to the case management register have to be informed of their named accountable GP and care co-ordinator by the end of July 2014, not June 2014 as was originally specified. The July deadline for the named accountable GP applies only to patients added to the register who are under the age of 75, as patients aged 75 and over will have been informed of their named GP by the end of June (existing patients) or within 21 days of registration (new patients), as per the requirements of the GMS and PMS regulations for a named GP aged 75 and over.

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VACCINATION AND IMMUNISATION GUIDANCE 2014-15

Guidance on a number of changes to the vaccination and immunisation programmes have been published and added to the GPC website at:

<http://bma.org.uk/practical-support-at-work/gp-practices/vaccination>.

A summary table is available at:

<http://bma.org.uk/-/media/files/word%20files/practical%20advice%20at%20work/gp%20practices/vaccs%20imms%20summary%20table%2014%2015.docx>

The GPC is still waiting for guidance or service specifications to be published for some of the vaccinations, which will be added to the GPC website as soon as they are finalised. The main guidance document *Vaccination and Immunisation Programmes 2014-15 - guidance and audit requirements* will be updated to reflect this.

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DOCTORS' AND DENTISTS' REVIEW BODY (DDRB) – 2014-15 RECOMMENDATIONS

In its recently published report the DDRB recommendations for 2014/15 were as follows:

- 0.28% to be applied to the overall value of GMS contract payments, intended to result in an increase of 1% to GP contractor income, after allowing for movement in expenses. This was due to an apparent reduction in practice staff costs, using the data Annual Survey of Hours and Earnings. The GPC strongly disagrees with the contention that a 0.28% uplift to the contract value will produce a 1% increase in contractor income, and is looking at ways to challenge this figure.
- For salaried GPs, the minimum and maximum of the salary range should be increased by 1%.
- For the trainers' grant, an increase of 1% along the same lines as basic pay for other doctors.

Given ongoing doctors in training contract negotiations, no recommendation on any change to

the GP specialty registrar supplement has been made. It will remain at 45%.

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GP TRAINEE FRAMEWORK CONTRACT

The GP Trainee framework contract has been updated by the GPC and the Committee of General Practice Education Directors (COGPED) to bring it in line with current legislation and terminology.

The changes to the framework are not the result of a negotiation and are in no way connected to the ongoing negotiations for a new contract for all doctors in training.

The GPC recommends that the framework is used for all GP trainees.

The updated framework can be found on the British Medical Association (BMA) website at:

<http://bma.org.uk/-/media/files/word%20files/practical%20advice%20at%20work/contracts/juniors/frameworkcontractgptrainees%2014.docx>

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FEDERATED FLEXIPLAN NO 1 PENSION SCHEME

This industry-wide occupational pension scheme covers workers in the health and education sectors and was set up in 1966. The scheme is currently being wound up, having closed to future accrual on 1 February 2010, with a deficit of approximately £20 million.

The GPC would like to hear from any practices that are members of the scheme that may have been affected by increasing cost liabilities as a result of the deficit. Please contact info.gpc@bma.org.uk to share your experiences.

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GPC REGIONAL ELECTIONS

As you will be aware, elections are underway for the GPC Regional Representative for the Barnsley /

Doncaster / Rotherham / Sheffield region. As there were two candidates, Dr Dean Eggitt (Doncaster GP and Doncaster LMC Secretary) and Dr Krishna Kasaraneni (Rotherham GP), a ballot is being conducted. GPs in the region should have received a ballot paper, candidate election statements and a pre-paid envelope. **The deadline to return ballot papers is Friday 25 April.**

Any GP who has not received a ballot paper and wishes to take part in the process should contact Rachel Juby, Senior Policy Executive at the GPC via email rjuby@bma.org.uk or tel: 020 7383 6375.

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TOMORROW'S DOCTORS Exciting New Opportunities for Medical Student Teaching

Article submitted by Dr Jenny Swann, The Academic Unit of Primary Medical Care (AUPMC)

The model for training undergraduate medical students is changing, with a drive to increase patient-student contact in the early years of training, and to base more teaching in Primary Care. The AUPMC of the Medical School has been asked to develop teaching for groups of second year medical students. The teaching will be innovative, patient focussed and problem based. The work is in its early stages, but to help us plan, we are inviting expressions of interest from individuals and practices who may like to be involved in this exciting development.

Interested? Please email Dr Jenny Swann: j.swann@sheffield.ac.uk for further details.

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

Email:
manager@sheffieldlmc.org.uk

**Articles for the May edition
to be received by
Friday 9 May 2014**