

## **CLMC Bulletin 377 – 12.02.19**

### **New GMS Contract and LMC/GPC Roadshow**

We are sure that many of you will now have read the information that is currently available on the new 19/20 GMS contract. There is a lot of information to digest, a lot of changes and a lot of detail still missing. As soon as we have definitive information (inc. the global sum figure) we will provide summaries and updates. If you do have any questions or points you wish clarified, please email [janice.foster@nhs.net](mailto:janice.foster@nhs.net) and we will try to assist.

In the meantime we urge you to put an important meeting in your diary. On 28 March CLMC will host a GPC Contract Roadshow. This is a key opportunity to hear first-hand about the contract changes and question Krishna Kasaraneni (GPC England Executive Team member) on further details and wider thinking about the contract and what is happening in general practice. After lobbying for a long time, this is the first time we have been successful in attracting one of these meetings in Tees so we urge a good turn out and that everyone maximises the opportunity.

The meeting will be held at Sporting Lodge Inns, Low Lane, Middlesbrough, TS17 9LW. It is 6.30 arrival and refreshments for a 7pm start, Thursday 28 March. Please register your place ASAP by email to [Jackie.jameson@nhs.net](mailto:Jackie.jameson@nhs.net)

### **State Indemnity Cover under the New Contract**

You cannot have missed that as part of the contract, State Backed Indemnity Cover is to be provided to all practices. We understand this will cover all GMS/PMS/APMS work and any other work associated with this e.g. LISs, LA contracts, sexual health services, OOHs and PCN work. The cover is extended to all staff working within practices (including locums who will be covered for their work within a practice). We have been advised that it DOES NOT cover work provided under hospital contracts or private work e.g. community hospital bed contracts which are commissioned through the Trusts. Neither will it cover GMC, coroners cases etc. which are considered private work.

It is important that practices/clinicians maintain their own MDO cover to ensure they have adequate 'top up' cover for run on and private work/hospital contracts.

GPC have had discussions with the medical defence organisations regarding the likely indemnity costs for their membership offering after April, and so far they can share the following information:

- The MDOs are in the later stages of pricing the post-April product and GPC expect them to announce this soon.
- GPC advise all GPs to remain members of one of the MDOs to ensure they have cover for GMC, criminal/coroners cases, private reports etc.
- There will be a competitive market for this cover after April and this is likely to influence pricing decisions
- In the meantime all indications suggest the market rate for this cover is likely to be broadly in range with GPC expectations – a reduction from previous escalating costs which should result in real savings for practices
- Renewals falling due before April 1st are likely to be in line with current costs
- All trainees will be covered for clinical negligence under the CNSGP scheme.

### **Over the Counter Medicines Letter**

As part of the contract agreement, NHS England has written [a letter to GP practices](#) to provide assurance that practices will not be at risk of breaching their contract when following OTC prescribing guidance.

### **Brexit Briefing for Practices**

The joint collective of CCGs has issued the briefing below to all practices around Brexit.



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Readiness - Briefing f

### **Sexual Health Newsletter**

Virgin Health provide a regular newsletter to practices which is designed to keep you up to date with regard to national and local sexual and reproductive health and genitourinary medicine. The latest newsletter was circulated this week (pasted below for ease) and contains a number of embedded links that will take you to further online information, access to appointment slots and links to postal testing resources. Information regarding a conference is also pasted below.



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FORM V1 2018.doc



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### **Integrated Care Provider Contract**

GPC England has serious concerns about the risks related to NHS England's integrated care provider contract (previously the multispecialty community provider contract) which has been proposed as a way of integrating services. Practices entering in to such an arrangement would be required to give up their existing GMS or PMS contract in part or altogether. With the new GP contractual focus on primary care networks, which build on the existing core GP contract, GPC do not believe the use of the ICP contract is necessary.

The BMA has produced some briefing materials on the ICP contract and its potential impact on the NHS, and for general practice. These provide a brief overview of what GPs and patients need to know about ICPs, the BMA's concerns about them, and the alternative options available for achieving integration of NHS services. The briefings can be accessed via the [BMA website](#).

### **Regulation of the Medical Associate Professions**

[The government's response](#) to their 2017 [consultation](#) on the regulation of the Medical Associate Professions (MAPs) has now been published. It does not confirm who the regulator will be but does confirm what Matt Hancock announced in a video last year; that PAs and PA(A)s will be regulated and that SCPs and ACCPs will not for the time being. A further consultation on prescribing rights will be required. The BMA's response to the consultation can be read [here](#).

### **GPC Newsletter**

Read the latest GPC newsletter [here](#)