

## Newsletter – June 2013

### LMC Meeting 10<sup>th</sup> June 2013

At our last meeting, members met Dr Brynes from the SCE and Dr McCrae from RDASH to discuss mental health issues, including: -

#### **Physical health checks for people with a serious mental illness.**

The LMC view was that the proposal should be piloted first with SCE funding, and further consideration be given to the issues raised by members that included: register management, documentation and practice attendance.

#### **Proposed changes to the local agreement for the provision of shared care for drug mis-users.**

There was fundamental disagreement with the principle expressed in the document that *'any practices who decide to withdraw from the LES would not be referring patients back to secondary care for their drug treatment but would be expected to liaise with other shared care practices in terms of supporting patients to register with another practice'* For this reason, members thought that the proposal needed a re-think.

#### **Commissioning of mental health services.**

A general discussion took place regarding the discharge of patients into primary care. The LMC view was that a

transfer of work to primary care should always be accompanied by a transfer of resources. Attention was also given to the terminology, in that the process should focus on *handover with a clear management plan* rather than simply 'discharging'.

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#### **Alcohol LES / DES**

Practices are reminded that the local alcohol LES does not prevent practices signing up to the nationally defined DES. Details can be found on our website under 'NHS Enhanced Services 2013-14.'

<http://www.rotherhamlmc.org/guidance.htm>

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#### **Delayed payments to practices**

Many thanks to practices who contacted us about problems with delayed payments.

The GPC (General Practitioners Committee) has now written to NHS England at a national level about the recent delays in payments across the country to practices caused by both administrative problems and uncertainty about which organisations are responsible for payments.

### PMS Locum Superannuation

The GPC continues to urge NHS England to ensure that PMS practices receive an uplift to help cover the costs of locum employers' superannuation, in line with GMS practices. NHS England has confirmed that it has not yet made a decision on this matter. In the meantime, Area Teams should not be making unilateral decisions about this but should wait for NHS England to complete its review of the issue.

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### Repeat Callers to NHS 111

This issue was discussed at the last LMC meeting, following receipt of new national guidelines (see below). Members are gathering data locally and we will be meeting with the CCG and then the local project manager to discuss any problems arising from 'inappropriate advice notifications'.

The national service specification for handling repeat callers (i.e. patients who call NHS 111 three times in four days) states that these patients should receive an assessment from a GP within one hour.

In March 2013 the GPC negotiators had reached a verbal agreement that GPs were not contractually obliged, nor indemnified, to make call backs and assess these patients within one hour.

Following recent concerns raised by LMCs regarding unwillingness from some commissioners to review inappropriate local arrangements for handling these calls, the GPC negotiators have agreed the following statement with NHS England:

*NHS 111 commissioners and providers have a responsibility to ensure that repeat callers (those who have called the NHS 111 service 3 or more times in 4 days and, because of the potential risk, require a thorough senior clinical re-assessment by a GP within the hour) receive the service as specified.*

*There is no national mandate as to how this service should be provided or resourced, nor is there a contractual obligation for practices to do this work. However, it is the responsibility of CCGs as the local commissioners of NHS 111 to ensure an appropriate service is commissioned. If local GPs are not satisfied with the current local arrangements for dealing with repeat callers, then commissioners and providers should work to find another solution.*

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## **New GPC publicity**

The GPC have launched a new initiative to communicate with patients and public about the various issues

facing general practice and the wider NHS.

The first phase of their programme of communications - a new, public-facing section of the website at [www.changingnhs.com](http://www.changingnhs.com) - has just gone live. It explains to patients and the public what's happening, while also communicating GPs concerns and reassuring them that doctors will always put patients first.

The GPC also want politicians to find out more about what's really happening on the ground, so they're re-launching the MP-GP visit scheme, and have written to MPs encouraging them to spend time in a local practice.

Let us know if you are interested in hosting one!

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## **New guidance on conflicts of interest for GPs as commissioners and providers**

The GPC have produced new guidance covering issues such as the governance of CCGs, GMC obligations for doctors in commissioning roles, primary care incentive schemes and what membership of a CCG means for GP practices.

<http://bma.org.uk/practical-support-at-work/commissioning/ensuring-transparency-and-probity>

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## **GP Contract Survival Guide**

A reminder that there is a link to the Enhanced Services guidance (by NHS Employers and NHS England) on the [GP Contract Survival guide pages](#) on the BMA website.

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## **Interim Seniority Factors 2013/14**

The Health and Social Care Information Centre has published the interim seniority factors for 2013/14 for GMS GPs. In England the figure is £96,183.

Further information about the calculations and the methodology may be seen on the primary care section of the Health and Social Care Information Centre website at [www.hscic.gov.uk](http://www.hscic.gov.uk)

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## **Sessional GP Newsletter**

Here is a link to the Sessional GP Subcommittee newsletter for Spring 2013:

<http://bma.org.uk/-/media/Files/PDFs/About%20the%20BMA/How%20we%20work/General%20Practitioners%20Committee/SessionalGPNewsletterSpring2013v4.pdf>

It contains updates relating to pensions, injury benefit, claims for unfair dismissal and revalidation & appraisal. It also features articles from several contributors detailing their experiences with support groups for Sessional GPs, including advice on how to set up your own.

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## Flu immunisation programme 2013/14

The DH has issued a letter providing planning details for health professionals on the flu immunisation programme for winter 2013 to 2014. Local areas are being asked to make sure they offer flu vaccine to everyone at risk so uptake reaches or exceeds 75% for people aged 65 and over and under 65s in risk groups, including pregnant women.

A copy of the letter is available at:

<https://www.gov.uk/government/publications/flu-immunisation-programme-2013-to-2014>

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## MMR catch-up programme

Information about the MMR catch-up programmes in England and Wales, including the specification and new joint FAQs [GPC/NHS England and NHS Employers], is now available on the BMA website:

<http://bma.org.uk/practical-support-at-work/doctors-as-managers/managing-your-practice/mmr-catch-up-programme>

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## Medical Appraisers

The South Yorkshire and Bassetlaw Area Team will need the support and commitment of local Medical Appraisers to coordinate and carry out annual appraisals for doctors with a prescribed connection to NHS England (South Yorkshire & Bassetlaw).

Over the next few weeks the Area Team will be recruiting a number of Medical Appraisers, who will work as independent contractors on an ad hoc basis, with the expectation that each appraiser will undertake no less than five and no more than twenty appraisals annually.

For further informal advice about the role, contact Dr Chris Myers at:

[Christopher.Myers@gp-C87020.nhs.uk](mailto:Christopher.Myers@gp-C87020.nhs.uk)

If you are interested in applying you can access the advert on the NHS Jobs website at:

<http://www.jobs.nhs.uk/cgi-bin/vacdetails.cgi?selection=913116937>

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## LMC Meetings

GP constituents are reminded that they are always welcome to attend meetings of the LMC as observers. The Committee meets on the second Monday of every month (except August) in the Board Room at Rotherham General Hospital

**NEXT  
LMC MEETING  
MONDAY  
22<sup>nd</sup> JULY  
COMMENCING  
AT 7.30 PM**

### OFFICERS OF THE LMC

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**If you have any questions or agenda items, or wish to submit articles**

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