

Newsletter – September 2013

* * * * *

LMC SEMINAR ON 'ANY QUALIFIED PROVIDER' - NEW CONTRACTING ARRANGEMENTS FOR ENHANCED SERVICES

The LMC have arranged a free seminar for GPs and Practice Managers which will demystify:-

- the context for AQP and other types of procurement
- the rules and principles that commissioners have to adhere to
- procurement models commonly used - mainly AQP and competitive tendering

Our aim is to get you "organisationally ready" to compete for services to be contracted-out

This is an important free seminar which we urge you to attend. Presented by Solicitors WardHaddaway

7.30pm Wednesday 16th October 2013 at the Rotherham Hospital Lecture Theatre (arrivals from 7pm).

Please e-mail us to confirm your attendance

rotherhamlmc@hotmail.com

* * * * *

LMC Meeting 9th September 2013

At our last meeting, the following issues were raised:-

RDASH Single Point of Access. Members felt this was still not functioning effectively. Practices were reporting that RDASH were still not re-referring enquiries internally, but instead bouncing them back to practices. If this is happening to you we would encourage you to report the details to us so that we may collate examples and take this up with the CCG/RDASH.

CCG Representation We're mindful that some CCG members are near to retirement and would encourage GPs thinking of participating in the CCG to contact Julie Kitlowski, the new SCE Chairman. We discussed how to broaden the appeal and it was suggested that project roles may serve as a helpful introduction.

Home Office Immigration Enforcement. The Home Office are seeking medical information from GPs on illegal immigrants, essentially asking whether there were medical reasons why an individual could not be deported. It had been agreed by the Home Office that practices might charge a token payment of £40 for the

work involved. **Please advise us of any such enquiries received.**

NHS Health Checks

Dr John Radford, Director of Public Health, attended the last LMC Meeting to talk about the delivery of NHS Health Checks. Members thought that these should continue to be delivered via practices and discussions will now follow on pricing.

Dr Radford did confirm that he would be supportive of practices requesting health trainers to be practice-based.

Regular comparative practice performance data would also be made available.

Payments to practices

There have been reports to us of some problems regarding payments to practices since the demise of the PCT.

David Geddes, Head of Primary Care Commissioning, NHS England, has confirmed to LMCs that there is a central team, led by Sheila Powell, which has responsibility for corporate payments and family health services (FHS).

They have agreed that if the GPC continues to send reports of payment problems directly to him, he will ensure NHS England's central finance team works with Area Teams to trace back payment issues and rectify problems as soon as possible.

In the first instance please contact us to report any problems so that we may pass them on to the GPC.

In terms of finding a long term national solution, NHS England are unlikely to be able to do this quickly. Around 30% of Area Teams still have in-house FHS payment teams. The contracts the other 60% of Area Teams have with FHS payment agencies, including SBS, which has a 20% market share, were inherited from PCTs, and in many cases these contracts are inadequate.

Care.data

You should by now have received an e-mail from the Health and Social Care Information Centre about Care.data.

There has been much discussion about this between Local Medical Committees across the country and the following advice has just been provided by the BMA :-

We can confirm that there is no onus on practices to contact patients and that once extracted the HSCIC then becomes the data controller for the extracted data.

Practices do not need to write to their patients about care.data. We know that

NHS England are planning further national and regional awareness raising and details on this are imminent – on which we will communicate further with LMCs. Awareness raising will therefore not be limited to the actions we have advised practices to undertake i.e. posters, leaflets etc

The ICO are also due to provide clearer advice on what GPs will be expected to do to fulfil their obligations in raising awareness, and again, we will communicate this to LMCs. We expect the position on both of these points to be much clearer within the next two weeks

GPs will remain the data controller for any patient data they hold. The HSCIC will become data controller for any data they hold which has been extracted from GP systems.

The HSCA gives the HSCIC the legal authority to require identifiable data from GPs without patient consent. This overrides the DPA requirement to seek patient consent

We are very aware of the concerns practices have and are working to provide further guidance. We are in constant contact with the HSCIC and NHS England and are pressing them on the point.

We are also working with the Information Commissioner's Office (ICO) and NHS England to ensure that we can further advise practices on satisfying their own awareness raising responsibilities alongside the national awareness raising.

The guidance and FAQs (FAQ6) cover the activities practices should undertake to

ensure patients know about care.data:

<http://bma.org.uk/practical-support-at-work/ethics/confidentiality-and-health-records/care-data>

Trade/Commercial Waste

Further to the article in the July LMC newsletter noting that we would keep practices informed of developments, we were pleased to receive confirmation that the SY&B Area Team are looking into the information they have and the analysis they can provide to practices in relation to previous trade / commercial waste costs. Once the Area Team has accurate data for the first part of 2013-14 they will collate this and distribute it to practices.

Childhood influenza and shingles catch-up programme FAQs

The BMA have published joint FAQs together with NHS Employers and NHS England, to help answer questions about [the childhood influenza programme](#) as well as the [shingles catch-up programme](#).

Both FAQs are available on the [vaccinations and immunisations pages](#) of the BMA website.

Clinical Academics in Primary Care

As you may be aware, GP academics employed by universities and other higher education institutions will normally have honorary contracts with NHS

organisations to enable them to provide clinical and other services to the NHS and have access to patients and data that assist with their research.

Until the end of March 2013 these contracts were held by Primary Care Trusts or Strategic Health Authorities. With the demise of these organisations new homes were required for the honorary contracts. A matter of days before the start of the new arrangements, NHS England agreed to take on responsibility for those academic GPs who had not made any other arrangements. A formal announcement to this effect was made via the website of the National Institute for Health Research:

<http://www.nihr.ac.uk/systems/Pages/HonoraryResearchContracts.aspx>

It is the expectation of the BMA's Medical Academic Staff Committee and the Society for Academic Primary Care that these arrangements will be managed at a Local Area Team level.

Help & Support for separated families

Howells Solicitors advise us they have been successful in securing funding for a two year pilot *Working Together for Children* to provide free access to a range of legal advice, mediation and counselling to 2000 separated / separating parents across South Yorkshire with gross incomes under £45K, at least one dependant child and who are not eligible for other public funding.

Further information can be found at:

<http://www.howellsllp.com/family/working-together-for-children/>

Patients who feel they might be eligible and would benefit from this service, can make an appointment or request a call back by contacting

Howells via:
Tel: (0114) 2496709
Email:
enquiries@howellsllp.com

Chronic Hepatitis B Draft Guidelines

There have been discussions between LMC and CCG but so far no deal has been established regarding a LES.

Performers List Changes

Dr Nalliagounder Ravi has changed status from salaried GP to partner at Greenside Surgery - 1/8/13

Dr Melissa Cave has completed VT and changed status from GP Registrar to Locum – 6/8/13

Dr Maxine Bilton has completed VT and changed status to Salaried GP at St. Ann's Medical Centre – 28/8/13

The LMC wish them well.

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

14th October

COMMENCING

AT 7.30 PM

OFFICERS OF THE LMC

Chairman

Dr Adrian Cole

Tel: 01709 565120

Adrian.Cole@GP-C87003.nhs.uk

Vice Chairman

Dr Chris Myers

Tel: 01709 560887

Christopher.Myers@gp-C87020.nhs.uk

Medical Secretary

Dr Neil Thorman

Tel: 01909 770213

Neil.thorman@gmail.com

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

CONTACT US AT THE LMC

OFFICE c/o: -

Greg Pacey

Secretary & Treasurer

Rotherham LMC

99 Green Lane

Wickersley

Rotherham

S66 2DD

rotherhamlmc@hotmail.com

www.rotherham.lmc.org