

Newsletter – February 2018

LMC Meeting 8th February 2018

At our last LMC meeting we discussed a range of issues, including NHSE Practice Manager Development Funding, Health Checks, new Palliative Care Drug Card and Case Management LES 2018

CGL Share Care Contract April 2018

CGL have now circulated their draft contract to GP practices. Meanwhile practices should look carefully at the contract (particularly indemnities) and consider deferring signing until the LMC have had an opportunity to further review in March.

Working Together to Identify Overseas Visitors

TRFT has recently revised its overseas visitor policy in line with changes to national guidance, which states that hospitals are required to establish whether patients are eligible for free treatment, and to charge upfront those who are not eligible, for any non-urgent, planned care. The Trust are asking that GPs referring patients alert them if they suspect the patient is an overseas visitor by emailing the patient's detail.

Practices are asked to exercise caution with this, and if they have concerns, to contact the LMC.

CQC guidance on assessing the financial viability of providers

In their January newsletter, reported CQC introduction of an assessment of the financial viability of providers, and that they would ask all providers to submit a statement letter from a financial specialist. The GPC raised this with them and they have now admitted that the communication was wrong and have issued a correction which stated: Evidence of an contract provides sufficient assurance and we will not require the following providers to submit statement letter: NHS GP practices, NHS dentists, NHS 111, out of hours and urgent care services. Non NHS organisations with NHS contracts

So to confirm, GP practices are not required to submit a statement of financial viability. However, this highlights the growing acceptance that maintaining the financial viability of our practices is of paramount importance to our patients.

Joint BMA-RCGP updated position on GPs as specialists

In a revised statement the BMA and RCGP have jointly called upon the four UK health departments, working with the GMC, to bring forward legislative proposals to the UK Parliament to update the Medical Act to recognise general practitioners as specialists, and grant them parity of esteem with senior doctors in other branches of medical practice.

GP Trainee pay reimbursements to practices

There was a risk that GP trainee pay reimbursements in Yorkshire (where there is no single lead employer arrangement) were potentially going to be problematic again this month.

The GPC raised this urgently with NHS England who have since assured us that they were able to work to resolve the problem so that it should not result in delays if the practices have submitted the relevant information. lf practices find themselves in a position where the payments did not come through, please let the LMC know. GP trainees should not be put in a position where they do not receive their salary at the end of the month.

Building on the partnership model to resolve the GP crisis

Recently, in the House of Commons, Parliamentary Questions referred to the BMA and the GPC campaign several times in relation to primary care. Stephen Morgan MP, commented: 'GP services are in crisis, practice after practice is closing, more GPs leave the service every day. When will the Secretary of State finally listen to the BMA GP Committee Chair who says current GP funding is nowhere near enough?'

In a response to questions, it was good to hear that Jeremy Hunt, Secretary of State for Health, announced that there will be a joint review on the partnership model, which the GPC called for in their Saving General Practice report.

This important is an acknowledgement of the continued importance of the partnership model for General Practice, and this has also been an issue of debate for a few years and the GPC's 2015 survey also showed that of GPs 82% support maintaining the option of independent contractor status for GPs.

BMA guidance on dealing with unfair comments on websites

A recent article published on GP Online provides advice on how to respond to online complaints from patients:

https://www.gponline.com/res ponding-online-complaintspatients/article/1456425 BMA guidance on dealing with unfair comments on websites is available here:

https://www.bma.org.uk/advic e/employment/gppractices/serviceprovision/dealing-with-unfaircomments-on-websites

Sheffield Medical School – Tutor Recruitment Drive

Dr Pip Fisher, GP and Senior Clinical Teacher, University of Sheffield writes:-

Over the next 18 months, the University of Sheffield will new opportunities available for GPs who are interested in teaching. We are keen to hear from GPs interested in supervising students medical on placement in Practice Training to become a small group tutor, working on a sessional basis.

Induction and support is given for each of the roles we have available, so you may be new to teaching or experienced in medical education. Students may be based across the South Yorkshire and Humberside region, so our tutor base should reflect this. Commitment can vary from occasional tutoring to more regular work.

If you are interested in finding out more, or letting us know if you would like to take a student in your practice or are interested in a role as a sessional tutor, please contact Steven Rowley at

teachingoffice1@Sheffield.ac.uk

An update on the indemnity scheme from the GPC

We expect to announce further details of the scheme in May 2018, with the scheme going live from April 2019. Until the scheme is in place. should continue to ensure they have appropriate indemnity cover in line with GMC requirements to enable them to practise. We want to ensure that the scheme works best for general practice and their patients, and provides money value for for aovernment.

As part of this work, we are commissioning a survey so that we can draw on an informed and up to date view of the GP indemnity market as we design the scheme. The survey will commence shortly, and we want to encourage GPs who are contacted to take part, as well as other health professionals working in general practice, to respond."

GP specialty round 1 recruitment campaign

Applications for GP specialty training will be open again from 27 February to 15 March for an August 2018 start. HEE-led campaign activity has begun using the strapline one career, endless opportunities, choose GP.

The GPNRO website includes application information, GP career stories and FAQs. If you would like to help promote the campaign, please share and like posts across social media channels using #choosegp on twitter, Instagram and Facebook page.

There's a toolkit on the HEE website with downloadable campaign banner, posters and flyers to use with local promotion. The GPs featured are all voluntary ambassadors and some appear in the campaign video.

https://gprecruitment.hee.nhs.uk/

Sessional GP newsletter

Here is the link for the sessional GP newsletter for February:

https://bma-mail.org.uk/t/JVX-5GIM6-1BJCJOU46E/cr.aspx

This month's newsletter includes:

Zoe Norris' chair's blog on the Bawa-Garba ruling, pensions update, a feature from the member relations team on maternity leave and pay, and choosing an online consultation system guidance from GPC's GP IT policy group.

Transgender services

Richard Vautrey, GPC Chair, writes:-

I reported last week that we had written to NHS England to express our concerns about their circular Primary care responsibilities in regard to requests by private on-line medical service providers to prescribe hormone treatments for transgender people. NHS England has now responded and advised that:

'The circular has been shared in response to an increasing number of requests made to us by GPs and practice managers for advice on how to respond to any on-line provider that holds itself out as being expert in the assessment, diagnosis and care of gender dysphoria.

As NHS England is not in a position to make judgements on the competence and experience of providers whom we do not directly commission, our intention is to provide GPs with an authority to refuse a request for prescribing and monitoring responsibilities where this is appropriate due to uncertainty about the online provider's expertise in this field.

GPs cannot implement a blanket approach to accepting or declining responsibility for ongoing prescriptions, we must advise GPs to consider each case on its own merit.'

Although this goes some to alleviate way our concerns, GPs should be aware that, if they are already providing treatment for patients on the advice of third parties whose expertise they now doubt, they should not withdraw treatment before alternative routes to care for the individuals concerned can be secured.

You can read our guidance on gender incongruence in primary care here.

https://www.bma.org.uk/advice/emp loyment/qp-practices/serviceprovision/prescribing/genderincongruence-in-primary-care

LMC Meeting

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 in the Board Room at Rotherham General Hospital

NEXT LMC MEETING

12th March 2018

COMMENCING At 7.30 PM

OFFICERS OF THE LMC

Chairman
Dr Adrian Cole
adie23454@gmail.com

Vice Chairman
Dr Chris Myers
Christopher.Myers@gp-C87020.nhs.uk

Medical Secretary
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If you have any questions or agenda items, or wish to submit appropriate articles for this newsletter

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