

# Newsletter

February 2020

Sheffield  
LMC



## INSIDE THIS ISSUE:

**LMC NEWSFLASH: GENERAL PRACTITIONERS COMMITTEE (GPC) UPDATE – PRIMARY CARE NETWORKS (PCNS) & THE FUTURE**

**CORONAVIRUS GUIDANCE**

**SHEFFIELD LMC CHAIR'S UPDATE FOR SHEFFIELD GPS AND PRACTICES**

**PARTNERSHIP CHANGES: DOCUMENTATION TO BE UPDATED**

**DEALING WITH REQUESTS FOR HOME VISITS**

**UNLAWFUL PENSIONS CHANGES**

**IMPACT OF PENSION TAXATION ON THE NHS**

**ONLINE CONSULTATIONS TOOLKIT**

**QUALITY AND OUTCOMES FRAMEWORK (QOF) PERSONALISED CARE ADJUSTMENTS**

**FLU TIA CODING ERROR**

**MMR CAMPAIGN MATERIALS**

**CLINICAL COMMISSIONING GROUP (CCG) MERGERS GUIDANCE**

**MEDICAL ASSOCIATE PROFESSIONS (MAPS) PUBLICATIONS**

**END OF LIFE SURVEY**

**PHYSICIAN-ASSISTED DYING SURVEY**

**IMPROVING PHYSICAL HEALTH FOR PEOPLE WITH SEVERE MENTAL ILLNESS: TRAINING SESSIONS FEBRUARY & MARCH 2020**

**SESSIONAL GPS E-NEWSLETTER: JANUARY 2019**

### ***LMC NEWSFLASH: GENERAL PRACTITIONERS COMMITTEE (GPC) UPDATE PRIMARY CARE NETWORKS (PCNS) & THE FUTURE***

**Date:** Monday 17 February 2020

**Time:** 7.30 pm, with light refreshments from 6.45 pm

**Venue:** Hallam Room, Tapton Hall <https://taptonhall.com/contact/?ref=Home%20Banner>

All represented Sheffield GPs and Practice Managers were recently emailed a Newsflash with details of this event.

On 6 February 2020 GPC England voted to accept a package of changes to the GP contract for 2020-21. This event will be a valuable opportunity for you to hear from Dr Krishna Kasaraneni, GPC Executive Team, with an opportunity to ask questions afterwards.

**Registration:** Places are limited and are to be confirmed by Friday 14 February. Therefore, **a place must be secured no later than Thursday 13 February** by contacting Emma Birtles, LMC Admin Assistant via: [adminassistant@sheffieldlmc.org.uk](mailto:adminassistant@sheffieldlmc.org.uk).

Full details of the package can be accessed via:

<https://www.bma.org.uk/collective-voice/committees/general-practitioners-committee/gpc-england/gp-contract-agreement-england-2020-2021>

-000-

### ***CORONAVIRUS GUIDANCE***

The British Medical Association (BMA) has published a web page highlighting key information and links to official guidance from government agencies on coronavirus, including how to handle queries from patients and how to manage patients who contact or attend GP practices: <https://www.bma.org.uk/collective-voice/policy-and-research/public-and-population-health/wuhan-novel-coronavirus>

Queries have been raised with the General Practitioners Committee (GPC) regarding GP practices being contacted by their Clinical Commissioning Groups (CCGs), on behalf of NHS England (NHSE) requesting information regarding practice preparation for coronavirus. The GPC's advice is that while there is no obligation to provide this information, unless the Secretary of State issues a direction, they would encourage practices to respond so that NHSE and Public Health England are aware of the national picture for preparations.

The GPC remains in close contact with NHSE and other stakeholders to ensure that any measures they put in place are supportive and do not place any overly onerous burden on GPs and their patients. Practices should continue to review their business continuity plans, infection prevention and control measures in addition to any national guidance issued by UK health or public health agencies.

-000-

### ***SHEFFIELD LMC CHAIR'S UPDATE FOR SHEFFIELD GPs AND PRACTICES***

Alastair Bradley, LMC Chair, has produced an Update for Sheffield GPs and Practices, which we hope offers a helpful and interesting insight into some key areas such as:

- Who are we?
- Primary Care Networks (PCNs)
- Retirement / Retention Schemes
- Clinical Negligence Scheme for General Practice (CNSGP)
- Sheffield LMC Developments
- What do we do?
- GP Mentoring Scheme
- Package of Support for Practices
- Pensions

A copy of the update can be accessed via:

<https://www.sheffield-lmc.org.uk/website/IGP217/files/SLMC%20Chairs%20Update%20Feb20.pdf>

-000-

### ***PARTNERSHIP CHANGES: DOCUMENTATION TO BE UPDATED***

We have recently received a number of queries regarding documentation to change and processes towards a successful change in partnership. This might be through a retirement and appointing a new partner or a practice merger.

We have compiled guidance on the main issues to consider, which includes:

- The Partnership Agreement;
- Land Registry;
- Sheffield Clinical Commissioning Group (CCG);
- Care Quality Commission (CQC);
- Accountants;
- Lease or Mortgage;
- NHS England;
- Primary Care Support England (PCSE);
- New Partners;
- Bank.

A copy of the guidance can be accessed via: [https://www.sheffield-](https://www.sheffield-lmc.org.uk/website/IGP217/files/Partnership%20Changes%20on%20a%20Page%20(Feb20).pdf)

[lmc.org.uk/website/IGP217/files/Partnership%20Changes%20on%20a%20Page%20\(Feb20\).pdf](https://www.sheffield-lmc.org.uk/website/IGP217/files/Partnership%20Changes%20on%20a%20Page%20(Feb20).pdf)

-000-

### ***DEALING WITH REQUESTS FOR HOME VISITS***

We have been made aware of a number of practices raising concerns regarding an increase in inappropriate home visit requests.

Although there is no automatic right to a home visit, practices should have systems in place to triage and prioritise home visits depending on clinical need.

NHS England (NHSE) issued a patient safety alert in 2016 to raise awareness, following a patient safety incident where a patient's death was related to the lack of prioritisation of a home visit: <https://www.england.nhs.uk/wp-content/uploads/2016/03/psa-gp-home-visit.pdf>

The alert states:

*When a request for a home visit is made, it is vital that general practices have a system in place to assess:*

- *whether a home visit is clinically **necessary**; and*
- *the **urgency** of need for medical attention.*

When assessing clinical necessity all patients should be treated fairly and equally, ie each request should be assessed individually and consistently as to whether a GP should visit the patient at home or the patient should attend the practice.

The Care Quality Commission (CQC) *Nigel's surgery 71: Prioritising home visits* contains further detail on the NHSE alert, as well as information on what the CQC is looking for in relation to home visits during their inspections:

<https://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-71-prioritising-home-visits>

Where a significant number of requests are being received which, following assessment, do not clinically necessitate a home visit, practices may wish to consider introducing a home visiting policy or making literature available outlining reasons why a home visit might not be in the patient's best interests, such as:

- A GP practice is a preferable environment for consultations and medical examinations due to the equipment available, lighting, infection control measures etc.
- Not all procedures, tests, examinations can take place outside of a practice, thus potentially necessitating attendance at the practice for follow-up.
- The resources needed to carry out a home visit are diverted from patients attending the practice.
- There may be limited access to medical records away from the practice.
- There is no option to see other, possibly more appropriate, clinical staff within the practice following an initial consultation.

For ease of future reference, this guidance can be found at:

[https://www.sheffield-lmc.org.uk/website/IGP217/files/Home%20Visits%20\(Feb20\).pdf](https://www.sheffield-lmc.org.uk/website/IGP217/files/Home%20Visits%20(Feb20).pdf)

**-000-**

### ***UNLAWFUL PENSIONS CHANGES***

The British Medical Association (BMA) recently secured victory in the High Court over controversial changes made by the Secretary of State for Health and Social Care to the NHS Pensions scheme in England and Wales.

In April 2019, the Government amended the NHS pension rules in order to grant the Secretary of State the power to suspend payment of pensions benefits to any doctor or NHS professional who had been charged with certain criminal offences but not yet convicted. These changes, which also did not include a right to appeal or a provision for the suspension of payments to be lifted automatically upon acquittal, were a total disregard of the principle that a person charged with a crime is presumed innocent until proven guilty.

Despite concerns raised by the BMA before their implementation, the Government proceeded with their reforms leaving the BMA with little choice but to take legal action to seek to force their reversal through a judicial review.

The High Court agreed with the BMA's argument that the new regulations breached Article 6 (right to a fair trial), Article 14 (protection from discrimination) and Article 1, Protocol 1 (right to peaceful enjoyment of property) of the European Convention on Human Rights (ECHR) and also breached the Public Sector Equality Duty (PSED) under the Equality Act (in failing to have regard to the equality implications of the changes).

In the judgment handed down the Hon Mrs Justice Andrews described how the Government had drawn no distinction between someone charged with a crime and someone convicted of a crime despite the fundamental principle in law being that "every defendant to a criminal charge, however serious, and however compelling the evidence against him may appear, is presumed innocent until proved guilty to the criminal standard."

**-000-**

### ***IMPACT OF PENSION TAXATION ON THE NHS***

As part of the ongoing campaign to address the current pension taxation crisis impacting doctors across the country, the British Medical Association (BMA) has produced a briefing paper which highlights the current situation, background to the issue and consideration of possible solutions. This includes an overview of the BMA's preferred solution removing the annual allowance in defined benefit schemes, such as the NHS pension scheme.

The briefing can be accessed via: <https://beta.bma.org.uk/media/2002/bma-briefing-on-the-impact-of-pension-taxation-jan-2020.pdf>

**-000-**

### ***ONLINE CONSULTATIONS TOOLKIT***

NHS England has published a toolkit for staff in practices and commissioning organisations who are implementing online consultation systems.

There is a shortened version aimed at GPs and practice staff: <https://www.england.nhs.uk/wp-content/uploads/2019/09/online-consultations-summary-tocolkit-for-practices-dec-2019.pdf>

The full version is aimed at those who are leading these projects: <https://www.england.nhs.uk/wp-content/uploads/2020/01/online-consultations-implementation-toolkit-v1.1-updated.pdf>

-oOo-

### **QUALITY AND OUTCOMES FRAMEWORK (QOF) PERSONALISED CARE ADJUSTMENTS**

Following concerns raised by practices about the loss of opportunistic prompts following the roll out of the QOF changes in 2019, TPP have confirmed to NHS Digital that they will add a status flag to the patient record which will alert practices to the fact these patients may be missing QOF care as part of their roll out of v44 of the QOF business rules.

NHS Digital will explore whether additional functionality can be added to v45 of the QOF business rules to ensure that the 2 invitation Personal Care Adjustments will only come into force at the end of the reporting period, ie 31 March.

-oOo-

### **FLU TIA CODING ERROR**

NHS Digital has emailed practices about an error with the Seasonal Flu 2019/20 extraction:

*We are writing to inform you of an error with the Seasonal Flu 2019/20 extraction which automatically ensures payment in the at risk groups (patients under 65 whose only eligibility criteria is having a TIA).*

*The codes for TIA were inadvertently removed from the business rules, which means that these patients are not being included in the payment extraction despite vaccines having been given and coded appropriately. We anticipate that the number of missed payments will be low, as it is likely that most people will have other risk factors that are captured by the current business rules.*

*We have discussed this with NHS England and NHS Improvement and GPC England and have agreed to schedule in a single collection in April 2020 for payment in 20/21.*

*The service will be offered out centrally by CQRS and will be called **TIA Seasonal Flu Service 2019/20**.*

*The service will be offered out by the end of February and we will send a further email to advise you of the exact date once we have confirmation. Practices will need to accept this offer on CQRS when it is made available. Other than that, no further action will be required by practices as the collection will be automated.*

*Further communications will be sent when the service is available.*

*In the meantime, we would encourage practices to double check that all patients under 65 with TIA have been offered the flu vaccine this season.*

-oOo-

### **MMR CAMPAIGN MATERIALS**

NHS England sent posters and counter cards - *Measles, Mumps and Rubella (MMR) – Help Us Help You, Get Protected* - to practices w/c 20 January 2020.

The materials have been developed to support practices in encouraging their patients to get protected against measles, mumps and rubella, by getting the MMR vaccination.

A digital pack including these and further downloadable materials including social media content and digital screens are also available via:

<https://campaignresources.phe.gov.uk/resources/campaigns/99-measles/resources>.

-oOo-

**CLINICAL COMMISSIONING GROUP (CCG)  
MERGERS GUIDANCE**

The British Medical Association (BMA) has produced new guidance on CCG mergers in England, to help GPs get to grips with the changes taking place. This includes information on why, how, and when mergers are likely to take place, as well as advice on how to approach them, and examples of ways in which LMCs and grassroots GPs have influenced and shaped mergers in their areas.

A copy of the guidance can be accessed via:

[https://www.sheffield-lmc.org.uk/website/IGP217/files/BMA%20CCG%20merger%20guidance%20Jan%202020%20\(1\).pdf](https://www.sheffield-lmc.org.uk/website/IGP217/files/BMA%20CCG%20merger%20guidance%20Jan%202020%20(1).pdf)

-oOo-

**MEDICAL ASSOCIATE PROFESSIONS (MAPS) PUBLICATIONS**

MAPs are

- physician associates;
- anaesthesia associates;
- surgical care practitioners;
- advanced critical care practitioners.

The following reports relating to MAPs have been published on the British Medical Association (BMA) website:

**Principles for effective working – Doctors and the Medical Associate Professions working together:** This report outlines a range of principles that can help to improve the ways that doctors and MAPs work together and identifies possible solutions to some of the common problems that have arisen with the introduction of MAPs:

<https://www.bma.org.uk/-/media/files/pdfs/collective%20voice/policy%20research/nhs%20structure%20and%20delivery/bma%20principles%20for%20effective%20working%20doctors%20and%20maps%20jan%202020.pdf?la=en>

**Medical associate professions in the UK:** This report covers the increasing presence of MAPs in the NHS, their regulation, prescribing rights and the BMA's view on these developments:

<https://www.bma.org.uk/-/media/files/pdfs/collective%20voice/policy%20research/nhs%20structure%20and%20delivery/bma%20medical%20associate%20professions%20in%20the%20uk%20jan%202020.pdf?la=en>

-oOo-

**END OF LIFE SURVEY**

The Department for Work and Pensions (DWP) is undertaking an evaluation looking at how the benefits system supports those nearing the end of their lives. As part of this they have published a survey to collect information from clinicians on this issue.

The results from this survey will help support DWP in making decisions around how best to support claimants nearing the end of their life and provide valuable insight into how clinicians across the UK feel about the current system and where they think it can be improved.

The survey, which closes on 29 February 2020, can be accessed via: <https://getinvolved.dwp.gov.uk/analysis-divisions/b8ca6d03/>

-oOo-

**PHYSICIAN-ASSISTED DYING SURVEY**

The British Medical Association (BMA) is surveying members (who have provided up-to-date contact details and have 'opted-in' to receive membership updates from the BMA) to inform a debate at the annual representative meeting (ARM) on physician-assisted dying.

A briefing pack and details of how to take part can be found at: [www.bma.org.uk/PAD](http://www.bma.org.uk/PAD).

-oOo-

**IMPROVING PHYSICAL HEALTH FOR PEOPLE WITH SEVERE MENTAL ILLNESS:  
TRAINING SESSIONS FEBRUARY & MARCH 2020**

*Article Submitted by Liz Tooke, Project Manager: Dementia & Physical Health Mental Health / LD /  
Dementia Commissioning Portfolio, NHS Sheffield Clinical Commissioning Group*

Practice Nurses, Health Care Assistants, ANPs, GPs, Mental Health Nurses and others involved in physical health checks for people with severe mental illness, are invited to attend one of several free *SMI Annual Physical Health Check training sessions* in February and March 2020. This training is organised by Sheffield CCG Mental Health Team, with national SMI health check pioneer Kate Dale (Academic Health Science Network).

Health Checks (and follow up interventions and LTC management) for people living with SMI are important because they face some of the greatest health inequality gaps in England. The average life expectancy for someone with a long-term mental health illness is up to 20 years shorter than for someone without.

This training will contribute towards your continuous professional development.

There will be AM (9.15 am to 12 noon) and PM (1.15 pm to 4 pm) sessions on the following dates:

- Wednesday 12 February, Sheffield City Council, Moorfoot Building, Sheffield
- Thursday 13 February, Sheffield City Council, Moorfoot Building, Sheffield
- Monday 2 March, St Marys Conference Centre, Sheffield
- Tuesday 3 March, St Marys Conference Centre, Sheffield
- Wednesday 4 March, St Marys Conference Centre, Sheffield
- Thursday 5 March, St Marys Conference Centre, Sheffield

Bookings are via Eventbrite:

- [SMI Training - St Marys](#)
- [SMI training - Moorfoot](#)

Please let us know if you have any accessibility requirements for the training when booking.

For more information, you can also contact Liz Tooke [liz.tooke@nhs.net](mailto:liz.tooke@nhs.net).

**-OOO-**

**SESSIONAL GPs E-NEWSLETTER:  
JANUARY 2019**

The latest edition of the Sessional GPs e-newsletter(s) can be found on the British Medical Association (BMA) website at: <https://bma-mail.org.uk/t/JVX-6P0BZ-1BJCJOU46E/cr.aspx>

The main articles include:

- Model contract guidance update.
- GP contract negotiations.
- QOF personalised care adjustments.
- Legal victory over pensions charges.
- Coronavirus guidance.
- A digital dilemma.

**-OOO-**

**Please forward any articles for inclusion in the LMC newsletter to**  
[manager@sheffieldlmc.org.uk](mailto:manager@sheffieldlmc.org.uk)

**Submission deadlines can be found at**  
<http://www.sheffield-lmc.org.uk/website/IGP217/files/Newsletter%20&%20VB%20Deadlines%202020%20.pdf>

**Contact details for Sheffield LMC can be found at:**  
**Executive Officers:** <http://www.sheffield-lmc.org.uk/page1.aspx?p=13&t=1>  
**Secretariat:** <http://www.sheffield-lmc.org.uk/page1.aspx?p=13&t=2>