

SHEFFIELD LOCAL MEDICAL COMMITTEE

Newsletter

January 2016

INSIDE THIS ISSUE:

ELECTED MEMBER VACANCY ON SHEFFIELD LMC

AVOIDING UNPLANNED ADMISSIONS (AUA) CARE PLAN REVIEWS

CARE QUALITY COMMISSION (CQC) INSPECTIONS: PRACTICE FEEDBACK

CLINICAL WASTE COLLECTIONS

CAMERON FUND PARTNERSHIP CLINICS

FIT NOTE DATA EXTRACTION AND PUBLICATION

MENACWY FOR FRESHERS: MISSED COHORT

FLUMIST VACCINE EXPIRY

MEN B VACCINATION: PARACETAMOL SUPPLIES

VIVIEN LANE FOUNDATION SCHOLARSHIP

ELECTIONS TO BMA COUNCIL

ELECTED MEMBER VACANCY ON SHEFFIELD LMC

It was with sadness that the LMC received and accepted Dr Trish Edney's resignation. Trish joined the LMC in 1989 and was a member of the LMC Executive from 1996 to 2008. Her contribution will be greatly missed. However, Trish has decided to retire from general practice and so we wish her a long and happy retirement.

In view of this, there is an elected member vacancy on the LMC, which will run for the remainder of the current electoral term, ie until 30 November 2016.

All eligible GPs (on the Medical Performers List and contributing to the LMC's levies) are encouraged to consider joining the LMC.

Meetings of the full LMC are usually held on the second Monday of the month at 7.45 pm in the Lecture Theatre at Tupton Hall (occasionally dates are changed to avoid bank holidays, staff leave etc).

In addition, members are encouraged to represent the LMC on other committees and this additional meeting attendance is funded by the organisers of the committees or the LMC.

The LMC's primary function is to represent Sheffield GPs and, therefore, it is extremely important that local GPs have a means of debating the important topical issues and influencing or making policy in order to represent the breadth of general practice in Sheffield. The LMC is also a very useful forum for keeping up-to-date with all that is happening in Primary Care and a chance to meet colleagues with differing views and experience across the city.

Further details of the work of the LMC can be found in *A Guide to Your Local Medical Committee*, which is available via the LMC website at:

<http://www.sheffield-lmc.org.uk/Downloads/LMC%20Guide.pdf>

If you are interested in joining the LMC or would like more information about what being a committee member involves, please do not hesitate to contact Margaret Wicks, LMC Manager via email manager@sheffieldlmc.org.uk or tel: (0114) 2588755.

-000-

AVOIDING UNPLANNED ADMISSIONS (AUA) CARE PLAN REVIEWS

As noted in the December LMC Newsletter, the LMC continued to liaise with the General Practitioners Committee (GPC) and the local NHS England Area Team to ensure that the issues with AUA component 2 are resolved to everyone's satisfaction.

On 30 December 2015 Deborah Jaines, Head of Primary Care Policy & Contracts, NHS England wrote to Chaand Nagpaul, Chair of the GPC, acknowledging the ambiguity of the requirements for timing of the care planning element and the number of

changes to the specification following negotiations which might have led to further confusion. Importantly, the letter states:

“We agree with you that we should reward work undertaken in good faith. I am sure that you appreciate that it has not been our intention to withhold payment where the work has been completed. We are aware that local teams may have already had discussions with LMCs on this issue, but to ensure a consistent position across England we are recommending to our teams that they review each practice’s circumstances and adopt the following approach. This consistency of approach should now result in more practices being paid.

- Any practice that has achieved the minimum 1.8% but has technically ‘failed’ due to having insufficient updated care plans, or having failed to record allocating an accountable GP, **should receive the mid-year payment.**
- Any practice that has failed the minimum target of 1.8% **should not be paid.**
- Practices should be reminded that the requirement to allocate and record every patient an accountable GP is a core contractual requirement. Practices should therefore address this issue as a matter of urgency.

However, the full requirements of the AUA enhanced service must be delivered and appropriately recorded by the year end. Any practice that fails any of the requirements at the year end will not be paid the final amount. In addition, any of those practices that had benefited from the flexibility described above (and who received the payment this time) who do not achieve all elements by the year end will be subject to the mid-year payment being reclaimed”.

The LMC is aware of a communication from the Area Team dated 17 December, which gave practices until 8 January to send through screen shots of their clinical systems showing the outcomes of searches for:

- the register of patients of 1.8% of target group or over;
- patients on the register being informed of their named accountable GP;
- a care plan having been agreed within 1 month of the patient being placed on the register.

Having had further conversations with the Area Team, in view of NHS England’s communication to the GPC, the LMC is hopeful that most practices will now receive the mid-year payment.

If any practice that has achieved the minimum 1.8% is informed that they still do not qualify for the mid-year payment, please bring this to the LMC’s attention as a matter of urgency via email to Margaret Wicks manager@sheffieldlmc.org.uk.

-000-

CARE QUALITY COMMISSION (CQC) INSPECTIONS: PRACTICE FEEDBACK

The LMC has received informal intelligence that some CQC inspections have been less than satisfactory from the practice’s perspective and, as such, our intention is to gather as much feedback as practices are willing to share, with a view to meeting with relevant CQC personnel to review the processes in place.

It would greatly assist the LMC in supporting practices, and in our communications with local CQC contacts, if all practices that have any concerns about the inspection process and experience could forward a brief summary to the LMC via email to manager@sheffieldlmc.org.uk.

It would also be helpful if practices could confirm how much of this information they are happy for the LMC to share with the CQC in order to resolve these concerns.

If any practices would prefer to discuss this issue prior to putting anything in writing, please do not hesitate to contact Margaret Wicks, LMC Manager, on (0114) 2588755.

-000-

CLINICAL WASTE COLLECTIONS

The LMC office has received anecdotal evidence of clinical waste collections being inadequate for the quantity of clinical waste generated by some practices.

Concerns were raised with the local NHS England Area Team. The Area Team is unaware of receiving any recent concerns, but requested that practices put their concerns in writing to Lucy Griffin (who manages the contract on the Area Team’s behalf).

Therefore, it would be appreciated if any practices who continue to experience difficulties with inadequate clinical waste collections could email Lucy Griffin via lucy.griffin4@nhs.net.

-000-

CAMERON FUND PARTNERSHIP CLINICS

*Article submitted by David Harris,
Chief Executive, The Cameron Fund*

In association with BMA Law, the Cameron Fund will be providing a series of partnership clinics.

GPs, GP Partners and Practice Managers who are in need of legal advice on a partnership or premises issue, are invited to book a FREE half-hour phone session with a specialist solicitor.

The clinics will cover partnership matters, corporate or commercial enquiries and issues relating to commercial property. The clinics cannot advise on negligence or disciplinary matters or on GMC issues.

The clinics will run from 10 am to 4 pm on:

- Friday 29 January;
- Friday 26 February;
- Friday 18 March.

You will be provided with the earliest available slot.

The Cameron Fund is only too aware of how practice partnerships can go

badly wrong, especially when a GP has not sought specialist legal advice and many beneficiaries have found themselves in severe financial difficulties due to partnership disputes.

The BMA recently published an article which highlighted the story of one of the Cameron Fund's beneficiaries and the terrible impact his experiences have had on his work, his financial situation and his mental health. The article is available via:

<http://www.bma.org.uk/news-views-analysis/news/2015/october/gp-partnerships-beware-gentlemens-agreements>.

If you would like to book a 30 minute slot, please email admin@cameronfund.org.uk with 'Partnership Clinic' as the subject, stating:

- Full name;
- Contact email;
- Direct line;
- Address;
- Practice name;
- A brief summary of the issue that you wish to discuss.

-000-

FIT NOTE DATA EXTRACTION AND PUBLICATION

All practices should have received a communication from the Health and Social Care Information Centre (HSCIC) on the extraction and publication of fit note data.

The extraction is intended to allow the Department for Work and Pensions (DWP) to collect data on fit note usage to inform policy development and evaluate the Fit for Work service.

The data being collected will be fully anonymised and will include:

- The number of computer-generated fit notes issued;
- The number of patients recorded as 'unfit' or 'maybe fit' for work;

- Fit note duration;
- Gender;
- Health condition type aggregated to high-level diagnosis code;
- Location, including CCG area;
- Whether workplace adaptations were recommended.

The Joint GP IT Committee of the British Medical Association (BMA) and the Royal College of General Practitioners (RCGP) was consulted on this data collection and has taken steps to reduce the burden on practices and clarify the legal position.

The legal basis for the collection of this data is the issuing of Directions under section 259 of the Health and Social Care Act and, as such, it is recommended that practices comply with this legal requirement.

There is also a legal requirement under the Data Protection Act (DPA) for practices to inform patients of the extract through fair processing.

The DWP has recommended practices provide a brief overarching statement for patients, for example, on the practice website or notice board. The statement should include links to further information for patients seeking more detail. The template statement, plus links, are available within the briefing pack sent out to all practices.

Practices may also wish to inform patients in person when attending the practice for a fit note.

Please note that data will not be extracted for those patients with a Type 1 objection recorded, ie those who have objected to their identifiable data from leaving the practice for purposes beyond their direct care. These objections will be respected, even though the extract does not include any patient identifiable data.

Data will be collected in February 2016 (to include fit notes issued from December 2014) and published from spring 2016. Aggregated data will be published on the HSCIC website at CCG level and above.

Further information for practices is available at:

<https://www.gov.uk/government/publications/fit-notes-plans-for-collecting-anonymous-data-in-england>

-000-

MENACWY FOR FRESHERS: MISSED COHORT

NHS Employers' FAQ in relation to the missed cohort of MenACWY vaccination for freshers has been updated to accommodate those who left school but may be older than 17 or 18 but do not fall in to the freshers programme. This is to ensure practices are remunerated for vaccinating these patients.

The updated FAQ reads as follows:

Q: What about teenagers and young adults who left school in the last term of the 2015/16 school year and may be going to university in autumn 2015 but do not meet the age criteria for the two MenACWY programmes?

A: Children who finished school year 13 in August 2015, but are either younger or older than the normal age and are therefore outside the cohorts defined in the specification, are expected to be at similar risk to their peers. As these patients fall outside of the eligible cohorts defined by the NHS England service specifications, they would not be covered by the automated data collections. Where these children self-present for vaccination, practices should discuss the vaccination of these patients with their commissioner on a case-by-case basis. In line with established procedures, where the practice and commissioner agree to the amendment the commissioner will adjust the practice achievement. In the spirit of the agreement, we would expect these practices to be remunerated for vaccinating these patients

The LMC contacted Public Health England Yorkshire and the Humber Screening and Immunisation Team regarding the above and has been informed that the contact for Sheffield GP practices to discuss the vaccination of these patients is:

Rachel Staniforth, Screening and Immunisation Co-ordinator
Email: rachelstaniforth@nhs.net
Tel: 0113 8250826.

All of NHS Employers' FAQs on vaccinations and immunisations are available via:

<http://www.nhsemployers.org/your-workforce/primary-care-contacts/general-medical-services/faqs-and-queries/vi-faqs>

-000-

FLUMIST VACCINE EXPIRY

As you will be aware from the November 2015 LMC newsletter, FluMist® Quadrivalent vaccine was made available as well as of Fluenz Tetra® vaccine, due to a shortage of Fluenz Tetra. However, practices need to be aware that the expiry date of the FluMist vaccine is **24 February 2016**, and should not be used thereafter. The following information was included in the Public Health England vaccine update (no. 237):

When does the FluMist nasal vaccine expire?

To ensure timely supply, changes in the supply schedule were required. This has resulted in a mismatch between the actual expiry date and that printed on the packaging and labelling. The two batches of FluMist quadrivalent being supplied (FL2113 & FL2118) **must not be used after the 24 February 2016**. This does not affect the safety, quality or efficacy of the batches. In agreement with the MHRA, a pre-planned withdrawal of any unused stock of FluMist quadrivalent will begin on the 25 January 2016. This will help ensure that no time-expired vaccine remains in circulation. AstraZeneca's logistics provider, Movianto, will contact you to arrange collection. Please quarantine any unused FluMist quadrivalent ahead of 24 February 2016. This should avoid accidental administration prior to collection.

Batches of UK labelled Fluenz Tetra will not be subject to the withdrawal and may be used up to the expiry date stated on the carton and nasal applicator.

-000-

MEN B VACCINATION: PARACETAMOL SUPPLIES

Public Health England has informed the GPC that as the temporary supplies of paracetamol sachets (to be given after the doses of the Men B vaccinations for infants have been given), have been fully distributed, the central supply of paracetamol sachets is being phased out.

The updated patient leaflet makes it clear that parents will need to make arrangements to have infant paracetamol at home in time for their baby's first immunisation appointment:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/483408/9413-paracetamol-menB-2page-A4-08-web.pdf

The revised leaflets are available to order in paper copy through the DH Orderline, to be handed out at the time of the vaccination:

https://www.orderline.dh.gov.uk/ecom_dh/public/home.jsf

-000-

VIVIEN LANE FOUNDATION SCHOLARSHIP

*Financial awards for furthering
studies in Sport and Exercise
Medicine and Injury Management*

*Article submitted by
Mrs Fran Wood*

Are you a registered practitioner with 2 years' experience in Medical General Practice?

Do you want to study Sports Medicine and Injury Management (whether on a full-time or part-time basis) at a recognised medical training establishment in the United Kingdom?

You may be eligible for an award from the Dr Vivien Lane Foundation.

The value of any award will be decided by the Trustees at their absolute discretion.

Information on how to apply can be found via www.drvivienlane.co.uk or by contacting:

Mrs Fran Wood
Clerk to the Trustees
Dr Vivien Lane Foundation
c/o Bell and Buxton
Telegraph House
High Street
Sheffield S1 2GA
Email fwoodlane@gmail.com

Please note that applications need to be received by **15 March 2016** for the award in April 2016.

-000-

ELECTIONS TO BMA COUNCIL

Nominations opened on 7 January 2016 for the election of 18 voting members of the UK council of the BMA to serve for a 2 year term of office for the sessions 2016-17 and 2017-18.

The sessions normally run from June to June.

Candidates must be current members of the BMA and nominations must be made via:

www.votebyinternet.com/bmanoms2016

Further information for candidates is available via:

[https://secure2.votebyinternet.com/V2-3-2/\(S\(23b4e9fe-0892-4d95-868c-cb9da87e4a45AMIQgAAAAAAAAA\)=7WkETQw6MZTB9ynC434\)\)/resources/attachments/f1124/info.pdf](https://secure2.votebyinternet.com/V2-3-2/(S(23b4e9fe-0892-4d95-868c-cb9da87e4a45AMIQgAAAAAAAAA)=7WkETQw6MZTB9ynC434))/resources/attachments/f1124/info.pdf)

The deadline for completed nominations is **4 pm on Friday 5 February 2016**.

-000-

Please forward any articles, comments etc for inclusion in the LMC newsletter to the LMC office via email to:

manager@sheffieldlmc.org.uk

**Articles for the February edition to
be received by
Friday 5 February**

**Further submission deadlines can
be found at: <http://www.sheffieldlmc.org.uk/Newsletters14/VB> and
[Newsletter Deadlines.pdf](http://www.sheffieldlmc.org.uk/Newsletters14/VB)**