

# Newsletter

## January 2020

Sheffield  
LMC



### **INSIDE THIS ISSUE:**

**FOSTER PARENT MEDICAL REPORTS / EXAMINATIONS**

**PRIVATE FOSTERING REPORTS**

**ADDITIONAL ROLES REIMBURSEMENT SCHEME (ARRS) UPDATE**

**CLAIM PERIOD FOR IMMUNISATIONS**

**ANNUAL SEASONAL FLU VACCINATION PROGRAMME AND REIMBURSEMENT GUIDANCE FOR 2020/21**

**SOUTH YORKSHIRE & BASSETLAW (SY&B) COMMISSIONING FOR OUTCOMES (CFO) POLICY**

**PERFORMERS LIST: PRIMARY CARE SUPPORT ENGLAND (PCSE) ONLINE**

**PRIMARY CARE SUPPORT ENGLAND (PCSE) GP PENSIONS BULLETIN**

**FINAL PAY CONTROL REGULATIONS FOR PENSIONS (UK)**

**COMPETENCY FRAMEWORK FOR DESIGNATED PRESCRIBING PRACTITIONERS**

**SALARIED GPS HANDBOOK: UPDATE**

**SOCIAL PRESCRIBING WEBINAR**

**THE STATE OF MEDICAL EDUCATION AND PRACTICE IN THE UK 2019**

### ***FOSTER PARENT MEDICAL REPORTS / EXAMINATIONS***

Following discussions with Sheffield Family Placement Services, in 2009 we produced guidance to clarify the involvement of GPs in the process of obtaining foster parent medical reports and examinations. We became aware of a number of changes and, as such, have agreed revised guidance with Sheffield City Council (SCC).

Completion of foster carer medical reports / examinations is not part of the NHS and, therefore, GPs have no obligation to perform this work. However, in order to be able to approve a foster carer there is a requirement under Fostering Service Regulations that a medical (of fostering applicants) is undertaken. We are keen to assist GPs and SCC in streamlining the process, in order to encourage more GPs to engage in the process.

There are 3 different communications sent to GPs:

1. Prospective foster carers are required to have a full fostering medical examination, involving completion of Form AH Adult Health Report. GPs are requested to complete Part C, sections 1-11.
2. Approved foster carers are required to have further full fostering medical examinations, involving completion of Form AH Adult Health Report every 4 years, with the first of these commencing 4 years after the date of the prospective foster carers medical. Again, GPs are requested to complete Part C, sections 1-11.
3. Approved foster carers are required to have interim update medicals, involving completion of the AH2 Update Adult Health Report every 4 years, with the first of these commencing 2 years after the date of the prospective foster carers medical. GPs are asked to complete Part C, sections 1-4.

Forms AH Adult Health Report and AH2 Update Adult Health Report are nationally produced forms, therefore, it is not possible to negotiate a local alternative.

If a GP wishes to discuss any issues arising from the medical examination or report, the Medical Adviser named in Part A of the form can be contacted. For other non-clinical queries, the GP can contact the Business Support Officer allocated to the case, whose details will be on the letter sent to the GP.

GPs carrying out this work are entitled to charge a fee, payable by SCC. Fees for this work have not been agreed since 2005 and are no longer set nationally. Therefore, the BMA advises individual doctors and GP practices to establish and agree their own fees

in advance of undertaking the work. SCC has stated that the average costs of prospective foster carer medicals / full (approved) carer medicals are charged at £73.86, with interim medicals being charged at £24.36. Further guidance for doctors on setting their own fees can be found on the BMA website:

<http://bma.org.uk/practical-support-at-work/pay-fees-allowances/fees/organising-your-finances>

Further information about fostering arrangements can be accessed via the SCC website at:

[https://sheffieldcs.proceduresonline.com/chapters/contents.html#fostering\\_adopt](https://sheffieldcs.proceduresonline.com/chapters/contents.html#fostering_adopt)

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

[https://www.sheffield-lmc.org.uk/website/IGP217/files/Foster%20Parent%20Medicals%20\(revised%20Jan20\).pdf](https://www.sheffield-lmc.org.uk/website/IGP217/files/Foster%20Parent%20Medicals%20(revised%20Jan20).pdf)

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### ***PRIVATE FOSTERING REPORTS***

Following a number of queries from practices, we met with Sheffield City Council (SCC) representatives to clarify the role of private foster carers and SCC requests for medical information identifying concerns regarding safeguarding. We subsequently issued guidance in 2012. We became aware of a number of changes and, as such, have agreed revised guidance with SCC.

Private fostering arrangements occur whenever a child is under the age of 16, or under the age of 18 when the child has a disability, and is cared for by an adult who is not a parent, grandparent, aunt, uncle, step parent (by marriage or civil partnership), sister or brother, and where the child is to be cared for in that person's home for 28 days or more. The 28 days should be continuous, however, the continuity is not deemed to have been broken by the occasional short break and less than 28 days do not fall within this legislation. In a private fostering arrangement, the parent retains parental responsibility.

Where a child is to be placed with private foster carers, SCC must be notified in writing at least 6 weeks before an arrangement begins by the parent(s), other person with parental responsibility, or the private foster carer, where they are involved in the making of the private fostering arrangement or are aware of the proposal. Where no prior notification of a placement is given, private foster carers must notify SCC of the placement immediately. Notifications are made to Sheffield's Safeguarding Hub.

SCC procedures set out that there is a requirement that Disclosure and Barring Service (DBS) and Children's Services records checks are undertaken by the Service for the private foster carers, all members of the household and frequent visitors over the age of 16. Two written references are also sought. However, there is not a requirement to undertake a full medical; rather it was agreed that SCC would request GPs to state if they had any safeguarding concerns regarding private foster carers in a simple yes or no statement. If the answer was no, there would be no fee incurred. If the answer was yes, SCC may need to request a more detailed report from the GP, for which a fee would be payable.

The payment SCC makes for a GP report that relies on reviewing the patient's notes is £24.36, which SCC would pay on receipt of an invoice. However, if a more extensive and complex report is appropriate, SCC have suggested that a fee would be agreed with the GP prior to work being undertaken, which again would be payable on the production of an invoice. SCC has stated that they currently pay £73.86 for a full foster carer medical and £24.36 for an interim medical for SCC foster carers.

Further information about private fostering arrangements can be accessed via the SCC website at:

[https://sheffieldcs.proceduresonline.com/chapters/p\\_private\\_fost.html](https://sheffieldcs.proceduresonline.com/chapters/p_private_fost.html)

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

[https://www.sheffield-lmc.org.uk/website/IGP217/files/Private%20Fostering%20\(revised%20Jan20\).pdf](https://www.sheffield-lmc.org.uk/website/IGP217/files/Private%20Fostering%20(revised%20Jan20).pdf)

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### ***ADDITIONAL ROLES REIMBURSEMENT SCHEME (ARRS) UPDATE***

The General Practitioners Committee (GPC) has been encouraging practices to transfer Clinical Pharmacists from previous schemes to the new Primary Care Network (PCN) ARRS, as this will be to the benefit of the practices and their PCN in the long term. As there are some practices yet to take the necessary action, the GPC has requested that the deadline to make this change is extended, and it has been agreed with NHS England that this will be extended to 31 March 2020.

In order to reduce future risk (of including these Clinical Pharmacists in the baseline) for all members of PCNs, the GPC advises that practices seriously consider transferring any Clinical Pharmacists on the previous national schemes.

This extension to the deadline, and the information about funding for covering management fees for subcontracts for Social Prescriber Link Workers has been included in the latest update to the ARRS guidance, and can be found at para 2.3.6 page 9 and 2.3.1 page 5 respectively: <https://www.england.nhs.uk/publication/network-contract-directed-enhanced-service-additional-roles-reimbursement-scheme-guidance/>

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## **CLAIM PERIOD FOR IMMUNISATIONS**

All practices should have received a letter dated 20 December 2019 from Nick Germain, Public Health Contracts Manager – NHS England & NHS Improvement – North East & Yorkshire Region (via email from Yorkshire & Humber Public Health Commissioning), detailing changes to be implemented regarding Target Payments for Routine Immunisations.

Historically, some Public Health Commissioning Teams have backdated these payments to previous years. However, the Statement of Financial Entitlement (SFE) requires that claims are submitted within 4 months of the final date of immunisation for a given quarter. Therefore, **from 1 April 2020** NHS England & NHS Improvement will process manual claims for 2-Year-Old and 5-Year-Old Immunisation Payments in line with the SFE.

In addition, the letter reiterates the claim period for Additional and Enhanced Services through CQRS. Part 4 of the SFE requires that claims are submitted within 6 months of administering a vaccine. The claim process for Yorkshire & Humber already operates to this rule so there is no change to practice.

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## **ANNUAL SEASONAL FLU VACCINATION PROGRAMME AND REIMBURSEMENT GUIDANCE FOR 2020/21**

NHS England & NHS Improvement have published a letter based on the recommendations by the Joint Committee on Vaccination and Immunisation (JCVI), which sets out the vaccines that should be offered to eligible people and the reimbursement for 2020/21. This was recently circulated to all practices by NHS England & NHS Improvement – North East & Yorkshire. Further copies can be accessed via:

<https://www.england.nhs.uk/wp-content/uploads/2019/12/NHS-England-JCVI-advce-and-NHS-reimbursement-flu-vaccine-2020-21.pdf>

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## **SOUTH YORKSHIRE & BASSETLAW (SY&B) COMMISSIONING FOR OUTCOMES (CFO) POLICY**

Following discussions between LMC, secondary care and Sheffield Clinical Commissioning Group (CCG) colleagues, amendments have been agreed to the SY&B CFO Policy.

Referral templates / threshold forms completed during consultations have also been updated and have been published on SystmOne and made available to practices using EMIS Web.

A one page clinician's guide has been produced to assist with the referral process for the interventions within the SY&B CFO Policy, which can be accessed via:

[https://drive.google.com/file/d/1YbRHMHWIAXfcn35PBRehSe\\_aTmeSxegM/view?usp=drive\\_web](https://drive.google.com/file/d/1YbRHMHWIAXfcn35PBRehSe_aTmeSxegM/view?usp=drive_web)

Any queries or concerns can be raised with Debbie Stovin, Commissioning Manager – Elective Care, Sheffield CCG via [debbie.stovin1@nhs.net](mailto:debbie.stovin1@nhs.net).

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## **PERFORMERS LIST: PRIMARY CARE SUPPORT ENGLAND (PCSE) ONLINE**

Further to the article in the December LMC newsletter, the new PCSE online service for submitting Performers List applications and changes is now live and replaces the old paper forms:

<https://pcsendland.co.uk/cv/4a7252337d82082371c486a57d414e575d6a3940>

Every doctor on the Performers List should have received an email requesting that they set up their own PCSE online account. This will enable GPs to check their details are correct and provide access to the new online system to make changes, so it is worthwhile logging in to check, given the inaccuracies that have previously been highlighted.

In addition, a letter detailing how to register the practice for PCSE online should be sent to each practice's Care Quality Commission (CQC) manager. It is vital that practices register in order for the system to work effectively. Historically there have been significant problems arising as a result of delays in Performers List information being kept up-to-date, particularly affecting appropriate pension deductions and prescribing numbers.

Regulations require that a performer informs NHS England of change of status and details. Changes to contractual status also requires notification by the GP and confirmation from the practice, and finally contract changes by NHS England, so both practices and individual doctors should sign up to PCSE online.

The General Practitioners Committee (GPC) is in regular contact with PCSE and, therefore, in issues with the new system can be brought to the GPC's attention via [info.gpc@bma.org.uk](mailto:info.gpc@bma.org.uk).

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### **PRIMARY CARE SUPPORT ENGLAND (PCSE) GP PENSIONS BULLETIN**

A special edition of the PCSE GP Bulletin had been published which covers:

- Annual end of year pension administration;
- New December Annual Benefit Statement (ABS) available;
- Available support for pension administration;
- What happens if I can't see my December ABS?

The bulletin can be accessed via: <https://pcsengland.co.uk/rv/ff0056ff7e529d2eba84b7dc0145baa8337db027>

There is also more information available at <https://www.nhsbsa.nhs.uk/employee-section>

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### **FINAL PAY CONTROL REGULATIONS FOR PENSIONS (UK)**

The final pay control regulations were introduced from 1 April 2014 to protect the pension scheme from the costs that arise where an employer awards an exceptionally high pay rise to a member of the 1995 section of the NHS Pension Scheme, to achieve an inflated pension benefit: <https://www.nhsbsa.nhs.uk/final-pay-controls>

Under the 1995 Section of the NHS Pension Scheme, a scheme member's pension is calculated using their highest salary in their final 3 years of pensionable service. As a consequence, a member who has a significant pay increase in their final 3 years will receive a substantially larger pension than they would have received without the pay increase. Practice partnerships, as employers, can receive final pay control charges if they award a pay increase to their staff that exceeds the allowable amount.

Since the introduction of the regulations, a number of exemptions have been introduced to stop employers receiving a final pay control charge for awarding significant pay increases for genuine reasons. These recent exemptions include:

- pay increases that are necessary to comply with the national minimum wage and living wage;
- nationally agreed annual pay awards for Agenda for Change employees.

The British Medical Association (BMA) has been working with other trade unions, NHS Employers and Department of Health and Social Care to ease these regulations and allow for a far less strict interpretation of the regulations. As a result, the BMA hopes to see developments in the near future that will increase the allowable amount, add further exemptions to the final pay control regulations, allow more discretion in the regulations and restricting the payment of charges to being pursued above a certain minimum level. Practices should discuss those issues with their accountants. Please note that this does not relate to GP partners but to final salary scheme doctors.

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### **COMPETENCY FRAMEWORK FOR DESIGNATED PRESCRIBING PRACTITIONERS**

The Royal Pharmaceutical Society (RPS) has published *A Competency Framework for Designated Prescribing Practitioners* for use by all non-medical prescribing professions. The Framework supports individuals across all independent prescribing professions, training providers and universities to understand what competencies must be met to provide safe and effective prescribing supervision to independent prescribers.

Further information can be accessed via:

<https://www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Professional%20standards/DPP%20Framework/DPP%20competency%20framework%20Dec%202019.pdf?ver=2019-12-18-150746-160>

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## **SALARIED GPs HANDBOOK: UPDATE**

The British Medical Association (BMA) Salaried GPs Handbook has recently been updated. The handbook:

- Explains the legal entitlements of Salaried GPs as employees and helps to ensure that Salaried GPs are aware of their statutory and contractual rights.
- Helps to prevent GP employers contravening the law unwittingly by explaining the statutory entitlements that a GP employer must provide to its Salaried GPs in order not to fall foul of the law.
- Explains the national and local representation of Salaried GPs, how to become a Salaried GP and the work involved.
- Helps to ensure that all Salaried GP members receive appropriate employment terms and conditions.
- Provides a comprehensive overview of the employment contracts available to Salaried GPs and the effect of the various provisions of the model salaried GP contract.
- Provides guidance on negotiating improvements to salary and other contractual provisions.

The updated handbook is available to BMA members via the link below. As login is required the link might not work directly, but may need to be copied & pasted in to your chosen browser.

<https://www.bma.org.uk/-/media/files/pdfs/employment%20advice/contracts/salaried%20gp%20handbook%202017/bma-salaried-gp-handbook-2019-dec-v2.pdf>

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## **SOCIAL PRESCRIBING WEBINAR**

The National Association of Link Workers is running a 30 minute webinar at 12.30 pm on 30 January for anyone interested in getting a bit more information about Social Prescriber Link Workers and their involvement in Primary Care Networks (PCNs). Further information and registration details are available via:

[https://zoom.us/webinar/register/WN\\_Y2BV1NJDSmGOy\\_qMGxhXbw](https://zoom.us/webinar/register/WN_Y2BV1NJDSmGOy_qMGxhXbw)

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## **THE STATE OF MEDICAL EDUCATION AND PRACTICE IN THE UK 2019**

The General Medical Council (GMC) has published its annual report, noting that:

- 45% of GPs reported working less than full time (61% female GPs compared with 26% male GPs);
- 36% have reduced their hours in the past year, and many are considering leaving the profession altogether (18% in the next year);
- Increasing workloads has resulted in two thirds of GPs working over their rostered daily hours with 19% taking stress related absence over the last year;
- 92% of GPs reported that they felt unable to provide sufficient levels of care at times while a quarter reported witnessing patient care being compromised;
- Around half of GPs are satisfied in their work, largely driven by a sense of fulfilment.

The full report can be accessed via:

[https://www.gmc-uk.org/-/media/documents/somep-2019---full-report\\_pdf-81131156.pdf?la=en&hash=B80CB05CE8596E6D2386E89CBC3FDB60BFAAE3CF](https://www.gmc-uk.org/-/media/documents/somep-2019---full-report_pdf-81131156.pdf?la=en&hash=B80CB05CE8596E6D2386E89CBC3FDB60BFAAE3CF)

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**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>