

SHEFFIELD LOCAL MEDICAL COMMITTEE

Newsletter

July 2018

INSIDE THIS ISSUE:

FIREARMS LICENSING

SICKNESS COVER REIMBURSEMENT FOR GP LOCUMS

CARE QUALITY COMMISSION (CQC) UPDATES

LMC BUYING GROUP: VACANCY ADVERTISING

GP PARTNERSHIP REVIEW

GENERAL PRACTITIONERS COMMITTEE (GPC) REPRESENTATIVE UPDATE

GPC DISCUSSION GROUP: TRAINERS, EDUCATIONAL SUPERVISORS & UNDERGRADUATE TEACHERS

CONFIDENTIALITY: GOOD PRACTICE IN HANDLING PATIENT INFORMATION

DON'T GO UNDER: AWARENESS OF HYPOGLYCAEMIC RISK

DVLA LICENCE RENEWALS: DRIVERS OVER 70

EMPLOYMENT TAX AND THE CRIMINAL FINANCE ACT

BRITISH MEDICAL ASSOCIATION (BMA) ANNUAL REPRESENTATIVE MEETING (ARM) 2018

QUALITY AND OUTCOMES FRAMEWORK (QOF) REVIEW

DIGITAL-FIRST PRIMARY CARE: IMPLICATIONS FOR GENERAL PRACTICE PAYMENTS

GP TRAINEE E-NEWSLETTER: JUNE 2018

SESSIONAL GPs E-NEWSLETTER: JUNE 2018

FIREARMS LICENSING

Superintendent Simon Verrall and David Macleod, Warrants & Firearms Manager attended a recent meeting of South Yorkshire LMCs. Of particular note were concerns regarding no report received by the police from the GP being equivalent to a medical endorsement of an application.

The proper regulation of firearms is in the public interest and it is important that GPs respond to the initial police letter. **GPs should not disregard the letter, nor delay in providing a reply** (normal response time within 21 days). **Failure to respond could put GPs at professional risk.**

British Medical Association (BMA) guidance available via the link below lays out 5 options with template letters to assist GPs in responding safely and professionally in a way that fits their circumstances:

<https://www.bma.org.uk/advice/employment/ethics/ethics-a-to-z/firearms>.

-000-

SICKNESS COVER REIMBURSEMENT FOR GP LOCUMS

Following several requests from GPs and LMCs for clarification around reimbursement for locum cover for sickness, NHS England has confirmed to GPC England:

- Where a GP is signed off sick as part of a phased return then the SFE entitles the practice to locum reimbursement where the requirements under the SFE are met.

- Where a GP is not signed off sick but has agreed a phased return or does not meet the requirements of the SFE, this would be a discretionary matter.

Practices are encouraged to quote this clarification from the Head of Primary Care Commissioning (Medical Services) if they are having problems with this issue.

-000-

CARE QUALITY COMMISSION (CQC) UPDATES

Fees - Invoice Issues

CQC has been made aware that a number of practices received duplicate copies of invoices when the original invoices were sent out by NHS SBS, its outsourced financial services provider. CQC has confirmed with SBS that this was caused by an administrative (printing) error. CQC expects SBS to write to all practices affected to confirm they only need to pay one invoice and to offer an apology.

CQC - Provider Information Collection (PIC) and routine inspections

CQC has also reviewed progress on the development of the GP Provider Information Collection (PIC) tool and the associated Annual Regulatory Review (ARR) process. They have decided that more time is needed to ensure that the whole process and digital solution is right and there is sufficient time for inspectors and practices together to test the end-to-end process before it goes live, and GP PIC will be launched on 1 April 2019.

This will have a knock-on effect on routine focused inspections of good and outstanding practices, which will now commence in the middle of Quarter 1 2019. CQC believes this is the least disruptive option and by choosing to further test and refine the system, they have made a positive decision not to introduce a new approach before it is fully ready for both practices and inspectors. Inspections of good and outstanding practices where information and intelligence suggests there is a risk to patients will continue as normal.

CQC - GP Improvement

Leadership, communication and collaboration are among the key drivers of improvement for 10 GP practices featured in a new report *Driving improvement: Case studies from 10 GP practices*, which draws on interviews with a broad group of staff from 10 practices; 9 of which were originally rated as inadequate and, through dedicated effort, improved to an overall rating of good on their last inspection. The 10th practice improved from a rating of requires improvement to outstanding.

The report can be accessed via: https://www.cqc.org.uk/sites/default/files/20180613_driving_improvement_gp.pdf.

-000-

LMC BUYING GROUP: VACANCY ADVERTISING

Recruitment is often an expensive and time-consuming business, so the LMC Buying Group has created an eye-catching, easy to use recruitment page where any registered member practice can post any vacancy (clinical and non-clinical roles) for free. Any new job posting is highlighted at least once across all of the social media platforms (Twitter, Facebook and LinkedIn).

A 'Featured Job' option has also been introduced for those practices that want to draw more attention to their advert. The featured job will appear at the top of the Jobs page in a bright colour, be highlighted on social media channels each week and Google AdWords will be used to drive more traffic to the advert for a month. This service costs £50+VAT. An invoice will be generated once the advert has been posted online.

To place an advert, visit the Jobs page: <https://lmcbuyinggroups.co.uk/job-vacancies/gp-practice/uk> and login for further information.

If you have not registered to use the LMC Buying Group, or have not re-registered since the Buying Group requested re-registration in line with GDPR requirements, the registration form can be accessed via: <https://www.lmcbuyinggroups.co.uk/members>.

-000-

GP PARTNERSHIP REVIEW

In February 2018 a review into the partnership model of general practice was announced. There was then a period of consultation with the General Practitioners Committee (GPC), Royal College of General Practitioners (RCGP), NHS England and the Department of Health and Social Care to agree the terms of reference and to agree on an independent chair for the review. Nigel Watson, Chief Executive of Wessex LMC was appointed as the chair of the review, supported by the above organisations.

Nigel will be producing an interim report by the end of September 2018, with a final report by the end of the year. The report aims to make recommendations that will revitalise the partnership model and ensure that consideration has been given to GPs, other staff working in general practice, patients and the wider system.

The document *GP Partnership Review – Key lines of enquiry: Call for evidence*, available via the link below, details the work to be undertaken, and LMCs have been asked to share this with practices:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/721708/gp-partnership-review-key-lines-of-enquiry-call-for-evidence.pdf.

The review is inviting feedback from individuals or groups via GPPartnershipReview@dh.gsi.gov.uk.

-ooo-

GENERAL PRACTITIONERS COMMITTEE (GPC) REPRESENTATIVE UPDATE

Please find below a link to the 2018 update from Dr Dean Eggitt, GPC Representative (Barnsley, Doncaster, Rotherham & Sheffield): http://www.doncasterlmc.co.uk/gpc_update_2018.html.

If you have any queries regarding the update, or if there are any topics you would like Dean to raise with the GPC, please contact the Sheffield LMC office via manager@sheffieldlmc.org.uk.

-ooo-

GPC DISCUSSION GROUP:

TRAINERS, EDUCATIONAL SUPERVISORS & UNDERGRADUATE TEACHERS

Request from Dr Helena McKeown, GPC UK Policy Lead Education, Training & Workforce

To assist us to represent our Trainers, Educational supervisors and undergraduate teachers better we have set up a new list server. In particular I envisage that our discussions will potentially provide us with evidence for our negotiations for pay uplifts for educational roles.

In order to join our electronic discussion group (list server) please email Karen Day, Coordination and Support Officer, Committee Services, Policy Directorate, British Medical Association via kday@bma.org.uk, expressing a wish to be on this new list server. Karen will then issue the T&Cs prior to being added to the list.

-ooo-

CONFIDENTIALITY:

GOOD PRACTICE IN HANDLING PATIENT INFORMATION

Although there have not been any fundamental changes to the General Medical Council (GMC) guidance *Confidentiality – Good practice in handling patient information*, some updates have been made in view of the General Data Protection Regulation (GDPR) coming in to effect. The following paragraphs have been added/amended:

- Paragraph 11 deals with recording of actions and decisions when disclosing information.
- Paragraphs 25 and 67 reflect the new data protection law.
- Paragraphs 28 and 29 (for direct care) and paragraph 96 (for local clinical audit) in relation to implied consent.
- Paragraphs 63-70 deal with disclosure of information in the public interest.
- The Legal annex contains a GDPR summary and how this relates to other laws governing the use of patient information.

A copy of the revised guidance can be accessed via: http://www.sheffield-lmc.org.uk/website/IGP217/files/Confidentiality-good-practice-in-handling-patient-information---English-0417_pdf-70080105.pdf.

-ooo-

**DON'T GO UNDER:
AWARENESS OF HYPOGLYCAEMIC RISK**

Article submitted by Dr Jenny Stephenson

Some antidiabetic drugs carry a variable risk of hypoglycaemia. This can cause sugar levels to drop too low when driving or operating machinery; it can also cause falls and confusion in older people. It can happen on a daily basis and sometimes be difficult to detect, unless this diagnosis is considered.

Some patients react unpredictably to Gliclazide, even if their renal function is not impaired; the blood sugars can fall quite rapidly. Similarly, when Gliclazide is stopped, sugars can also rise rapidly.

This aspect of diabetes management is updated in the Sheffield Diabetes Guidelines available at:

<http://www.intranet.sheffieldccg.nhs.uk/Downloads/Medicines%20Management/prescribing%20guidelines/T2%20Glucose%20Management.pdf>.

-000-

**DVLA LICENCE RENEWALS:
DRIVERS OVER 70**

Concerns have been raised regarding the DVLA's letter to applicants who are over 70 and wish to renew their driving licence containing the statement "Before returning the application you should check with your doctor(s) that you are able to satisfy the medical standards for driving". This has led to patients requesting letters or booking appointments in order to comply with the request.

As this work is not part of a GP's NHS contract, any GP agreeing to undertake the work is entitled to do so as a private medical. Alternatively, patients can be directed to an assessment centre, details of which can be found at:

<http://www.olderdrivers.org.uk/driver-assessment/find-a-driver-assessment/england/>.

The above also applies to applicants who are reapplying for a driving licence following a medical condition. Further information on the process for applicants can be found at: <https://www.gov.uk/reapply-driving-licence-medical-condition>.

-000-

EMPLOYMENT TAX AND THE CRIMINAL FINANCE ACT

The General Practitioners Defence Fund Ltd (GPDF) recently shared an article with LMCs published by Justine Riccomini, Head of Taxation at the Institute of Chartered Accountants of Scotland (ICAS), which should be of interest to practices as employers:

<https://www.icas.com/technical-resources/did-employment-tax-just-get-even-more-serious>.

Please note that the GPDF and Sheffield LMC do not provide taxation or other financial advice, but are making this information available for the general benefit of GPs.

-000-

**BRITISH MEDICAL ASSOCIATION (BMA)
ANNUAL REPRESENTATIVE MEETING (ARM) 2018**

The general practice related motions taken during the BMA's ARM 2018, along with Richard Vautrey's speech can be accessed via: <https://www.bma.org.uk/collective-voice/committees/arm-2018/arm-week/tuesday>.

-000-

QUALITY AND OUTCOMES FRAMEWORK (QOF) REVIEW

The General Practitioners Committee (GPC) published a briefing *Focus on GP quality indicators* to provide background and context for the forthcoming negotiations on the QOF and the potential changes following the current QOF review, led by NHS England.

The briefing can be accessed via: <http://www.sheffield-lmc.org.uk/website/IGP217/files/Focus-on-GP-quality-indicators.pdf>.

The review brought together key stakeholders to analyse current evidence and other incentive schemes, with the intention of delivering proposals on the future of QOF. The GPC has highlighted, and NHS England agrees, that a significant proportion of QOF funding is core income for practices and is an essential resource used for the employment of practice staff, and is already committed to delivering important practice activities.

The review concluded that there are aspects of QOF which are both valued and valuable, but there is a need to refresh the scheme to support a wider view of high quality care and to align better with professional values. It then sets out potential changes that could facilitate such a refresh.

A report of the review and annex have been published (available from the links below) with the intention of stimulating public discussion. This will inform, but not determine, negotiations between NHS England and the GPC in the coming months.

<https://www.england.nhs.uk/wp-content/uploads/2018/07/quality-outcome-framework-report-of-the-review.pdf>.

<https://www.england.nhs.uk/wp-content/uploads/2018/07/indicator-assessment-methodology-v1.pdf>.

Comments on the report are being invited via email to england.qofreview@nhs.net before 31 August 2018.

-000-

***DIGITAL-FIRST PRIMARY CARE:
IMPLICATIONS FOR GENERAL PRACTICE PAYMENTS***

As a result of a call for NHS England (NHSE) to take action to address the many concerns expressed about the model used by GP at Hand/Babylon in London, NHSE has outlined a number of changes that could be made to General Medical Services (GMS) funding which would reduce the payments per patient made to digital-first models of care provision. However, some of these suggestions would have an impact on other practices, so the pros and cons need to be considered carefully.

Further information can be found at: <https://www.engage.england.nhs.uk/survey/digital-first-primary-care/>.

The deadline to give views via an online survey is 31 August 2018.

-000-

GP TRAINEE E-NEWSLETTER: JUNE 2018

The June edition of the GP Trainee e-newsletter is available on the British Medical Association website at: <https://bma-mail.org.uk/t/JVX-5ONW8-1BJCJOU46E/cr.aspx>. The main articles include:

- Connecting with our WHY.
- Improving the interface between primary and secondary care.
- Returning to work LTFT.
- Priorities of the GP trainees subcommittee.
- I'm CCTing as a GP... the world is my oyster?
- Meet your rep.

-000-

SESSIONAL GPs E-NEWSLETTER: JUNE 2018

The June edition of the Sessional GPs e-newsletter is available on the British Medical Association website at: <https://bma-mail.org.uk/t/JVX-5P6PZ-1BJCJOU46E/cr.aspx>. The main articles include:

- Supporting GPs with less clinical work;
- Sessional GPs guidance on pensions and Capita;
- Doctors with disabilities;
- Diversion to early diagnosis;
- GMC could lose power to appeal fitness-to-practice decisions;
- Leadership masterclass.

-000-

Please forward any articles for inclusion in the LMC newsletter to
manager@sheffieldlmc.org.uk

Articles for the August edition to be received by Friday 10 August

Submission deadlines can be found at

<http://www.sheffield-lmc.org.uk/website/IGP217/files/Newsletter%20&%20VB%20Deadlines%202018.pdf>