

# Newsletter



North Staffordshire  
LOCAL  
MEDICAL  
COMMITTEE

Professional advice for General Practice

## In this issue .....

- Latest news on PMCF and Caremesh bids
- Mental health claims
- Publication of NHS payments to General Practice
- The European Medical Directory (TMDI)
- Apprenticeships in General Practice
- Workforce Minimum Data Set
- Out of Area Registrations
- Regional primary care transformation programme: Supporting new models of care (one day event)
- Controlled Drugs update
- Outcomes from January 2015 LMC meeting Payment of locum NHS pension contributions
- Practice Managers' Symposium
- Personal Health Budgets
- CQC Inspections
- GPC News

## Latest on PMCF and Caremesh bids and co-commissioning

Dear colleagues,

As Dr Kanneganti has updated, the Stoke PMCF bid has achieved the second stage alongside the GP First one for our Area Team area. The results of this bidding process have been deferred to mid March and the ratio of success may be 50%. The DoH asked for Stoke wide cover and practices not involved in the bid have been approached to allow their patients to visit the 3 hubs at weekends. North Staffs CCG may consider some parallel developments.

The Models of Care bids including Caremesh await further news with a final decision in mid April. There are some reports that there may be only a very small number approved nationally.

North Staffs and Stoke CCGs had their level 3 co-commissioning bids rejected, which they have appealed and now await allocation of level. This is very disappointing given Shropshire, Derbyshire and Nottinghamshire were all approved at level 3. The reason given was that the local health economy had too great a problem with A+E, which given the solution is investment in primary care, means the CCG's options are limited and our situation prolonged.

The interim action group of the federation met yesterday, following the meeting 2 weeks ago and is approaching the CCGs for indirect pump priming money. This will be debated at the LMC together with the future options for the service provider arm of the current federation at the next committee meeting on 5th March. This also has implications for Thursday afternoon cover, so decisions will have to be made shortly.

## GPC News

[Click here for the latest GPC newsletter](#)

We are currently a little in limbo, but standing still is not an option with the continuing shift of workload and complexity into primary care, with no parallel investment (and real terms disinvestment). This has to fundamentally change and practices need primary care services aligned, reinvigorated and expanded, to cope with this community health workload. A federation is one vital component to broker and realise this change, whatever the bid outcomes and the LMC welcomes the 11 GP and practice manager colleagues who have joined the federation interim action group.

I am sure there will be a steady stream of communication between now and April and especially before the May election.

Regards,

Paul Scott  
LMC Chair



## Mental Health Claims

The LMC has been advised of the following by the GP payments department within NHS England.

Previously claims were signed off and forwarded to Heron House, Fenton. The FHS team (now known as PCS) processed and included the fee with the Exeter PMS or GMS monthly payment. Payment was then made to the practice.

It has now been determined that CCG's are responsible for payment. Currently, the CSU, also based at Heron House, are handling on behalf of CCG's. This means claims will continue to be signed off, as now, and forwarded to Heron House, so no change as regards submission at present.

In the future, your contacts will be the CSU/CCG's. Any communication regarding any changes to how claims are to be submitted will come from the CSU/CCG.

### **Payment of other collaborative fees, such as fostering and adoption**

These account for the majority of claims from GP's in general practice. There is no change to this system at present, and these will continue to be included with the GMS or PMS payment.

## **Publication of NHS payments to General Practice**

On 12 February 2015 the Health and Social Care Information Centre (HSCIC) will publish NHS payments to individual providers of general practice services (including practices, walk-in centres and health centres) in England for 2013/14. This will start an annual publication process. Practices do not have to do anything in relation to this publication as data is taken from the HSCIC GP payments system. The report will break down payments by category including Global Sum, MPIG, QOF, enhanced services etc.

GPs should use their Area Team contact for any queries related to the published figures.

If publication of these figures generates media interest the GPC will support practices. If practices require help with this they should contact the LMC.

### **Publication of mean GP net earnings**

From April 2015 it will be a contractual requirement for GMS practices to publish on their practice websites by 31 March 2016 the mean net earnings of the partners, salaried GPs and any locum who has worked in the practice for over six months.

- This includes income from NHS England, CCGs and local authorities for the provision of GP services that relate to the contract or which have been nationally determined.
- All earnings to be reported are pre-tax, National Insurance and employee pension contributions.
- For contractors the figures are net of practice expenses incurred.

- Income and costs related to premises will not be included in this figure.

Alongside the mean figure, practices will be required to publish the number of full and part time GPs in the practice. The information must be published on practice websites before the end of the financial year following the financial year to which that information relates. Practices must also make available the information in hard copy on request – recognising that not all patients will be able to access the website.

NHS England will publish guidance for GPs and their accountants on how mean net earnings should be calculated. Practices, or their accountants, will have to generate the report themselves. NHS England has acknowledged that it can be difficult to disaggregate income and expenditure lines precisely and will recommend that practices should work within the reporting guidelines as far as is reasonably practicable.

## The European Medical Directory (TEMEDI)

The GPC recently updated its guidance on Med1web forms and The European Medical Directory. [Click here](#) for the updated guidance.

## Apprenticeships in General Practice

Practice Managers will have received an e-mail from their CCG informing them that Health Education West Midlands is undertaking a census of all apprentices currently employed in General Practices. Practices could be entitled to £500 for registering new starters in the 2014-15 financial year. Practices who currently have an apprentice should complete the Excel Spreadsheet (which was attached to the e-mail from the CCG) and return to martinwilkinson@wm.hee.nhs.uk by the end of February. Someone from HEWM will contact the practice to confirm the arrangement for payment.

Please follow the links below for further information from the National Skills Academy Health regarding the benefits of employing an apprentice in General Practice This includes access to free training and financial support.

Practices wishing to discuss employing an apprentice and find out more information can contact the National Skills Academy Health or e-mail Martin Wilkinson martinwilkinson@wm.hee.nhs.uk

[From apprenticeship to asset-NSA Health Case Study](#)

[GPs flyer](#)

[The Apprenticeship Training Agency](#)

## Workforce Minimum Data Set

The GPC issued a position statement on the Workforce Minimum Data Set (WMDS) in January. The statement included advice for practices on the data submission and asked for further feedback on its implementation, so that concerns could be taken up with the Department of Health (DH). Following this feedback, The GPC advised practices to await further guidance before proceeding with the preparation of the data.

The GPC has now held an urgent meeting with the DH, where they highlighted the areas of concern. The meeting was positive, with a willingness on both sides to work together to resolve the issues. The GPC is meeting with DOH again very soon, and will also soon be in a position to share the advice received from the ICO, and a GPC response is being drafted to the Privacy Impact Assessment consultation.

The GPC's advice remains that practices should await further guidance before proceeding with the preparation of the data. As a reminder, the first data submission will be due at the end of May, so further guidance will be issued as soon as possible.

## Out of Area Registrations

The LMC has been reminded by the GPC that although the implementation date of the scheme was 5th January, the advice of the GPC is that a practice should only register out of area patients after they have sought and obtained assurances from area teams that arrangements for urgent GP services including home visits are in place

for individual patients at their place of residence.

Without that assurance, practices are strongly advised that they should not currently register any patients under the new regulation.

[Further guidance](#) is available on the BMA website:

## **Regional primary care transformation programme: Supporting new models of care (one day event)**

NHS England (Midlands and East) were to host 8 evening roadshows across the region as part of the Primary Care transformation programme in relation to new models of care.

These roadshows have been replaced by a one day event due to take place on **24th March** at Leicester racecourse.

An outline of the day and full agenda is provided [here](#) and it is from here that you are able to register as a delegate.

Please also note that it is a free to attend event and your support is really valued.

## **Controlled Drugs Update**

For further information please follow the link below.

[Controlled Drugs Update February 2015](#)

## **Outcomes from February LMC meeting**

After a presentation by Dr Russell Muirhead, Chair of Shropdoc regarding the advantages of the involvement of a North Staffordshire Federation to be included in the Caremesh bid, discussions took place regarding the pros

and cons of involvement of our local Federation. A vote was taken on the subject with 12 members voting for the bid, 1 against and 1 abstaining.

## Payment of locum NHS pension contributions

With effect from the 1 April 2013 all GP Practices (and APMS Contractors) in England and Wales must pay the NHS Pension Scheme employer contributions in respect of freelance GP locums. This is a statutory requirement and means that GP Practices (and APMS Contractors) must pay the 14% employer contributions on top of the fee paid to a freelance GP locum.

The NHS Pensions website now has two sets of GP locum forms; A and B. One set in respect of freelance GP locum work performed up to the 31 March 2013 and one set in respect of GP locum work performed from the 1 April 2013. These forms can be found on NHS Pensions website under the heading 'GP Locums' [click here](#). The new forms A and B must be used for freelance GP locum work performed with effect from the 1 April 2013. This is the date that GP Practices (and APMS Contractors) are legally required to pay the 14% employer contributions.

The new locum form A clearly distinguishes between the actual fee, the pensionable pay (which is 90% of the fee), and the employer contributions which are 14% of the pensionable pay. This is so that it is clear to all parties that the 14% employer contributions paid by the Practice are separate, and in addition, to the invoiced fee and the pensionable pay.

The LMC has heard of locum GPs who have had problems obtaining the payment for NHS pension contributions from employers, and we would therefore ask practices to ensure that they implement this statutory duty as outlined above.

## Practice Managers' Symposium

The North Staffs LMC are planning to arrange a Practice Managers Symposium in late March early April. To help form a meaningful and interesting agenda, can

## LMC Officers

---

**Chair:**

Dr Paul Scott  
Tel: 0300 123 1466

**Vice Chair:**

Dr Jack Aw  
Tel: 01782 565000

**Secretary:**

Dr Harald Van der Linden  
Tel: 01782 746898

**Treasurer:**

Dr James Parsons  
Tel: 01782 534241

**Practice Liaison Officer**

Mrs Elaine Wilkinson  
Tel: 01782 544466

**Lay Secretary:**

Miriam Adams  
Tel: 0300 365 0135

## Members

---

Dr R Aw	0300 1235002
Dr A Pugsley	01782 627403
Dr M Chada	01782 202622
Dr L Clarson	01782 753052
Dr P George	0300 1231468
Dr S Fawcett	01782 281806
Dr A Green	0300 4042987
Dr C Kanneganti	01782 772242
Dr U Katkar	01782 395101
Dr B Kulkarni	01782 395101
Dr H Pathak	0300 7900164
Dr P Rao	01782 593344
Dr S Reddy	01782 222930
Dr P P Shah	0300 1231468
Dr K Tattum	01782 544466
Dr P Unyolo	01782 783565

practices please let our Practice Liaison Officer, Elaine Wilkinson [elaine.wilkinson@stoke.nhs.uk](mailto:elaine.wilkinson@stoke.nhs.uk) have any items you feel would be helpful to you them i.e new contracts and funding for 15/16.

## Personal Health Budgets

Patients applying for Personal Health Budgets need to get their application forms signed and supported by a "health or other professional" according to page 2-3 of the application form. Naturally many patients will seek help from their GP , but GPC guidance clearly states that "this work is extra- contractual so practices may decline or charge a fee" for this work.

## CQC Inspections

The BMA has published [new guidance on CQC inspections](#) on the BMA website. This is a practical guide aimed at GP practices on how to prepare for a CQC inspection. It includes helpful tools including a check list, a presentation brief, key questions an inspector may ask and general hints and tips.