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Issue 9

Content

Accessible Information Standard for GP practices in England	2
Fees for responding to the police letter regarding firearms – England, Wales and Scotland	2
General Practice Forward View – England	1
GPC meeting	1
GPC Reform Task Group	2
LMC access to the BMA website	4
LMC Conference – elections to the General Practitioners Committee	3
LMCs – change of details	4
LMC observers at GPC meetings	4
NHS workforce for the future conference	3
Revalidation: Guidance for GPs – England	2
Sessional GPs elections	3

GPC meeting

The GPC held its meeting on Thursday 21 April 2016. Key items of discussion were NHS England's *General Practice Forward View* and the GPC Reform Task Group. A summary of these items is below, along with a number of other updates for LMCs and practices.

General Practice Forward View - England

GPC discussed NHS England's *General Practice Forward View*, setting out a programme of support for primary care over the next five years. This strategy follows strong lobbying and calls for action from GPC, including in our most recent paper '[Responsive, safe and sustainable: our urgent prescription for general practice](#)', outlining the urgent actions needed to alleviate the current significant pressures.

We have worked closely with NHS England to represent the views of the profession and influence their final strategy. A large number of our proposals have been accepted by NHS England and included in their roadmap for the future.

Whilst the *Forward View* represents a comprehensive package of support to general practice, both in the immediate and longer term, we are equally clear there are a number of areas requiring more clarity and work on the detail of implementation. GPC agreed at its meeting with the need for further information and analysis of the proposals before we can fully understand their significance. It was also agreed that we should continue to push NHS England to respond to the remaining areas outlined in our *Urgent Prescription* which they have yet to address, as we believe implementation of these are vital to help resolve both the current crisis facing general practice and to provide sustainability for the future.

In terms of next steps, the LMC Conference in May will provide an important opportunity for grass roots GPs to consider and debate the *Forward View*. GPC will sit on the Advisory Oversight Group which will steer and drive implementation of the measures; it is vital that this programme of support is delivered rapidly so that practices receive the support so urgently needed.



In the meantime, GPC has written this week to all GPs and LMCs highlighting the document and GPC's initial response. Links to the *Forward View* document, GPC's letter to the profession, and other relevant documents can be found on the [urgent prescription for general practice](#) campaign page.

GPC Reform Task Group

The GPC Reform Task Group has now completed its final report, setting out a package of proposals covering representative structures and ways of working. The report follows a significant consultation exercise, examining the role and function of GPC and associated bodies, including LMCs. Thanks to the many LMCs who have contributed ideas and thoughts to the review.

GPC discussed the final report at its meeting and a copy of the report, with a brief GPC commentary, will be circulated to LMCs next week to consider ahead of the LMC Conference. Time will be set aside at the Conference to discuss and debate the report.

Accessible Information Standard for GP practices - England

The Accessible Information Standard aims to ensure that disabled people have access to information they can understand and the communication support they may need. The Standard applies to service providers across the NHS and adult social care system. As organisations that provide NHS services, GP practices are required by law to follow the Standard under Section 250 of the Health and Social Care Act.

All organisations are expected to follow the Standard by **31 July 2016**. Many practices are likely to be meeting a number of the requirements already. Some aspects of the Standard will require support from CCGs or NHS England to allow practices to comply.

GPC has produced a Focus On guide, summarising practice responsibilities. We have discussed with NHS England the need to ensure a proportionate approach for general practice, particularly given the current severe workload pressures. The [Focus On is available on the BMA website](#), under 'key guidance'.

Revalidation: Guidance for GPs - England

The RCGP has approved a new Guide to Supporting Information for Appraisal and Revalidation (March 2016) that aims to reduce inconsistencies in interpretation and simplify and streamline the recommendations.

It is designed to ensure that any areas where there has been a lack of clarity are better understood. The guide confirms that:

- all time spent on learning activities associated with demonstrating the impact of learning on patient care, or other aspects of practice, can be credited as continuing professional development (CPD)
- quality over quantity - GPs should provide a few high quality examples that demonstrate how they keep up to date, review what they do, and reflect on their feedback, across the whole of their scope of work over the five year cycle
- only incidents that reach the GMC level of harm need to be recorded as Significant Events in the portfolio. Reflection on all such Significant Events is a GMC requirement and must be included whenever they occur
- GPs only need to do a formal GMC compliant colleague survey once in the revalidation cycle (like all doctors)
- there are many forms of quality improvement activity and they are all acceptable to demonstrate how you review the quality of what you do, and evaluate changes that you make. There is no requirement for GPs to do a formal two cycle clinical audit once in the five year cycle.

The RCGP recognises that GPs need to be supported by their College in resisting inappropriate additional bureaucracy and is working with key stakeholders such as the BMA GPs Committee, GMC and responsible officer networks to look at reducing the regulatory burden.

[The guide is available on the RCGP website.](#)

Fees for responding to the police letter regarding firearms – England, Wales and Scotland

Following the introduction of the new firearms licensing process, GPs have already raised considerable concerns to us over the process and whether or not they can charge a fee for responding to the letter from the police, indicating whether they have any concerns and have placed a code on the patient's medical record.

In our discussions with the Home Office, police and shooting representatives we have faced continual challenges that have been particularly difficult to resolve, however we have made it clear throughout that this work is not part of a GP's contract and therefore GPs are able to charge a fee. Our original proposal to improve the process was rejected by ministers and so we are having to deal with what has now been implemented, which although has its own problems, is far better than the existing process. Our initial guidance was cautious in our advice in order to gain feedback from members and allow the new process to unfold. However there has been a clear message from our members that there are concerns and we have now raised these with the Home Office and Scottish Government. We will continue to seek further resolutions to the process.

BMA revised guidance on fees

The response to the police's letter indicating whether there are any concerns and that a code on the patient's medical record has been added is not part of a GP's contract. It is therefore up to the GP to assess how best to proceed, taking on board the following factors and guidance:

1. The work involved in responding to the letter is minimal and therefore can be undertaken easily without delay and without a fee.
2. The work involved in responding to the letter requires time and resources from the practice that necessitate a fee to be charged to the patient (the police should not be charged). We would advise GPs to seek confirmation from the patient that they are in agreement to pay a fee before undertaking the work so not to cause additional confusion or delay. If there is a delay owing to this and you are unable to respond to the letter within the 21 days, please notify the police of this.
3. No one in the practice is available (eg on holiday or off sick) to complete the work within 21 days. Please notify the police without delay.
4. The practice does not have the capacity to undertake the work within the 21 days. Please notify the police without delay.
5. That the GP has a conscientious objection to gun ownership and no other GP in the practice is available or able to undertake the work. Please notify the police without delay.

NHS workforce for the future conference

One year on from the introduction of the NHS 10 point workforce plan, the BMA held a special one day workforce conference offering practical support, advice and guidance for LMCs on how they can work with GPs locally to make the most of new workforce initiatives. The day also featured talks from prominent figures in the 10 point plan process. The conference struck a positive and constructive tone, building on the joint working between NHS England, HEE and the BMA on the 10 point plan to help LMCs and GPs consider the practical implications of, and opportunities within, the complex and constantly developing primary care workforce situation.

Wendy Reid, HEE Director of Education & Quality provided an informative overview of HEE's role in workforce development, while there was also an unscheduled additional morning talk from Martin Roland, author of the Primary Care Workforce Commission report in which he outlined what he felt would be necessary to ensure a healthy workforce for the general practice of the future. Workshop sessions were held across the day, focussing on topics such as physician associates, training hubs and telephone triage. In the afternoon, the conference was addressed by Ian Biggs, NHS England Director of Primary Care Transformation Programmes, followed by a lively Q&A session involving Ian and GPC Chair, Chaand Nagpaul.

The 10 point plan is now set to be migrated into a wider primary and community care strategy, more of which can be read about in the recently published NHS England General Practice Forward View.

LMC Conference – elections to the General Practitioners Committee

Following the change to LMC Conference standing orders, agreed in 2015, the process for electing the seven members of the General Practitioners Committee (GPC) has changed. Please note we will be writing imminently to representatives with further information on the process, including how and where to submit nominations for these seats.

Sessional GPs elections

Voting is now open for elections to the BMA sessional GPs subcommittee. The ballot closes at 5pm on Friday 6 May. If you are a sessional GP and have not received information on how to vote, but would like to do so, please contact elections@bma.org.uk.

LMC observers at GPC meetings

LMC observers are welcome to attend GPC UK meetings. If your LMC would be interested in sending an observer to a GPC meeting, please contact Michelle Palmer (mpalmer@bma.org.uk). A maximum of three LMC observers may attend any one meeting.

Please also note that all travel and other expenses for LMC observers should be met by the relevant LMC.

The final meeting of the 2015/16 session is being held on Thursday 16 June 2016, 10am - 1pm, with subcommittees in the afternoon. The meeting will be held at BMA House, Tavistock Square, London WC1H 9JP.

LMC access to the BMA website

It has been drawn to our attention that some LMCs may be having difficulty accessing the BMA website. All LMCs do have access, but need to use the login details registered for submitting conference motions. This may, however, be an individual's email address, registered to input conference motions only.

If you wish to create an office account, using the office email address as part of your login and a password that everyone can use, or if you are unsure of your current login details and password, please email Karen Day at kday@bma.org.uk and she will email you your relevant information.

LMCs – change of details

If there are any changes to LMC personnel, addresses and other contact details, please can you email Karen Day with the changes at kday@bma.org.uk.

The GPC next meets on 16 June 2016 and LMCs are invited to submit items for discussion. You may like to review these, beforehand, with the representatives in your area who serve on the GPC. The closing date for items is 7 June 2016. It would be helpful if items could be emailed to Michelle Palmer at mpalmer@bma.org.uk. You may also like to use the GPC's listservers to exchange views and ideas.

GPC News

LMCs are reminded that their regional representatives can provide more detailed information about the issues covered in GPC News, and other matters. Other members of the GPC would also be pleased to accept invitations to LMC meetings wherever possible. Their names and addresses are in the GPC Yearbook. The secretariat can also provide a written background brief if required, but it would be helpful to have such requests well in advance of your meetings.

Finally, if LMCs require assistance on local issues, they can also contact the BMA's local offices: addresses are on page 3 of the GPC's yearbook.

This newsletter has been sent to:

Secretaries of LMCs and LMC offices
Members of the GPC
Members of the GP trainees subcommittee
Members of the sessional GPs subcommittee