## Newsletter



#### Professional advice for General Practice

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### A heads up

Dear colleagues,

So - I thought you might like to have a quick update on some of the activities going on at the LMC, or what is in the pipeline.

We are coming to the end of the current financial year and are reviewing all current GP contracts. Meetings are planned with the Area Team, the CCGs and the various Public Health bodies to review these and negotiate suitable improvements where possible for 2015/16. We are looking to support practices in reducing their workload, and as part of this initiative raised the inappropriate dumping of work (such as prescription requests for dressings) by SSOTP some months ago. We have asked the CCGs to ensure that future community provider contracts make it clear this work is not part of the core GP contract, and that GPs can not be expected to fill the void left by other (failing) providers.

The LMC is working on a guidance document for practices on how to deal with patients who require treatment but are unable to consent (Covert Prescribing), which we expect to be ready for release in the coming months.

We are aware of a bid for The Prime Minister's Challenge Fund by Stoke practices, about which Paul has communicated with you before. Although the LMC welcomes any investment, this bid (if successful) may bring into our local health economy, some concerns about possible long-term implications remain. In particular the expectation that CCGs will support the ongoing funding for extended access (8-8 working) beyond the 1 year contract period may prove difficult to realise.

A lack of GP capacity remains an ongoing concern, even though the Area Team has managed to gain

#### **GPC News**

The following articles are included in the GPC Newsletter - issue 11, January 2015

- £1 billion funding for GP premises
- Doctor in training
- contract negotiations.
- GPC meeting
- LMCs change of details
- New course dates for 2015: employment law for GP partners and practice managers
- Patient choice scheme and out of area registration .
- Payment of NHS Pension Scheme contribution .
- Quality first: managing workload to deliver safe patient care
- The future of general practice

interest from some 20 GPs to relocate to our area, many of whom are looking to return from working in Australia. This lack of capacity is having an impact on the ability of Aruna - our local GP federation - to deliver on contracts. It is in our collective interest to ensure that we stand strong together, and as such I would encourage practices who have so far not felt able to join the Aruna, to consider doing so.

The reconfiguration of the local NHS England team means that our local area has increased to include not just North Staffs, South Staffs and Shropshire LMC, but also Derbyshire and Nottinghamshire LMC. We met with all these LMCs for the first time this week, and we are looking to collaborate and draw on our collective wisdom when it comes to standing up for and advising our practices.

That leaves me to mention two other important initiatives coming our way in the not too distant future: personal health budgets and reconfigured palliative care services, about which more soon...

Harald Van der Linden LMC Secretary



## Copying of notes for patients living abroad

Patients who reside outside of the UK for more than three months should be removed from the practice list, and their records should be returned to NHS England. In the event that the patient requires a copy of their records, the practice should refer the patient to the Area Team for this.

The Area Team may need to seek medical advice prior to release and this would normally be from the last GP. However this would be an entirely extra- contractual and non-statutory service, and the practice may charge its usual private professional fee.

### **Intermediate Care**

Following the ceasing of the Winter Pressures Intermediate Care LIS (advice +/- visiting) last financial year on 31.3.14, the CCGs have not commissioned any further medical intermediate care cover from anyone else, but have indicated that if practices wish to claim for their input in the meantime, then they will be reimbursed. The LMC is unsure whether all practices are aware of this and are therefore publicising this.

### **Action to reduce Sepsis**

Following the statement by the Department of Health regarding the intention to reduce Sepsis, the GPC Executive Team Clinical and Prescribing Lead, Dean Marshall has indicated that the action to reduce Sepsis had not been agreed with the GPC and that there is no contractual arrangement or additional funding to carry out the work. The GPC has suggested that practices might want to decline to engage and continue trying to cope with the demand GPs are experiencing.

The GPC are going to raise this issue with NHS England at their next meeting.

## **Workforce Minimum Data Set - interim update**

Following the recently issued GPC position statement on the Workforce Minimum Data Set, the BMA has received further concerns from practices and LMCs about the data collection, particularly around workload and the sharing of personal staff data.

The GPC has contacted the Department of Health (who has directed the Health and Social Care Information Centre (HSCIC) to undertake this collection) to take up these concerns, and will be meeting urgently with both organisations to discuss the actions being taken to address the issues raised. The BMA is also contacting the Information Commissioner's Office (ICO) to help clarify the legal position for practices in respect of the Data Protection Act (DPA).

In the meantime the BMA is advising practices to await further guidance before proceeding with the preparation of the data, and GPC will issue further information as soon as possible.

## **Exempt certificates**

Please note the following regulations which clarify the circumstances in which **no fee can be charged** for the provision of a medical certificate.

Regulation 21 of GMS regulations (also applicable to PMS) states that 'The Contractor shall issue free of charge to a patient or his personal representative any medical certificate of a description prescribed in column 1 of the table below which is reasonably required under or for the purposes of the enactments specified in relation to the certificate in column 2 of the table below'.

Description of medical certificate	Enactment under or for the purpose of which certificate required
To support a claim or to obtain payment either personally or by proxy; to prove inability to work or incapacity for self-support for the purposes of an award by the Secretary of State; or to enable proxy to draw pensions etc.	Naval and Marine Pay and Pensions Act 1865, Air Force (Constitution) Act 1917, Pensions (Navy, Army, Air Force and Mercantile Marine) Act 1939, Personal Injuries (Emergency Provisions) Act 1939, Pensions (Mercantile Marine) Act 1942, Polish Resettlement Act 1947, Social Security Administration Act 1992, Social Security Contributions and Benefits Act 1992, Social Security Act 1998.
To establish pregnancy for the purpose of obtaining welfare foods	Section 13 of the Social Security Act 1988 (schemes for distribution etc of Welfare foods).
To secure registration of still-birth	Section 11 of the Births and Deaths Registration Act 1953 (special provision as to registration of still-birth)
To enable payment to be made to an institution or other person in case of mental disorder or persons entitled to payment from public funds.	Section 142 of the Mental Health Act 1983 (pay, pensions etc of mentally disordered persons)
To establish unfitness for jury service	Juries Act 1974
To support late application for reinstatement in civil employment or notification of non-availability to take up employment owing to sickness.	Reserve Forces (Safeguarding of Employment) Act 1985
To enable a person to be registered as an absent voter on grounds of physical incapacity	Representation of the People Act 1983
To support applications for certificates conferring exemption from charges in respect of drugs, medicines and appliances	National Health Service Act 1977
To support a claim by or on behalf of severely mentally impaired persons for exemption from liability to pay the Council Tax or eligibility for a discount in respect of the amount of Council Tax payable	Local Government Finance Act 1992.

#### **LMC Officers**

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### **Primary Care Infrastructure Fund**

NHS England are inviting bids for the 2015/16 tranche of the Primary Care Infrastructure Fund which will be the first of a four year £1billion investment to accelerate improvements in GP premises and infrastructure. This is part of the additional NHS funding announced by the Government in December last year to enable the direction of travel set out in the Five Year Forward View.

Bids for investment in 2015/16 should be submitted by 16 February to <a href="mailto:england.gppremisesfund@nhs.net">england.gppremisesfund@nhs.net</a>. For further information and application forms follow the link <a href="mailto:PrimaryCare Infrastructure Fund">PrimaryCare Infrastructure Fund</a> and also see <a href="Quick Guidance for GPs">Quick Guidance for GPs</a> and <a href="LMCs">LMCs</a> - 2015 <a href="Premises Funding">Premises Funding</a>

For practices who require LETB support (deanery) in terms of workforce issues and/or training capacity please contact David Palmer, Staffordshire's GP Associate Dean david.palmer@wm.hee.nhs.uk Health Education West Midlands (HEWM) advise that practices will be able to add to their bid that they have support or are in conversation with them about the need to extend their practice. HEWM are keen to support capacity for training including GP registrars, nurses, health care assistants, physician assistants and practices wishing to become new training practices.

## Outcomes from December's LMC meeting

#### Co-commissioning

In December 2014, committee members unanimously voted for Level 3 co-commissioning. Subsequent CCG membership meetings have endorsed this view and both North Staffordshire and Stoke CCG have applied for delegated commissioning.

# Prophylactic prescribing of influenza antivirals in care homes.

We would like to hear from practices who may have been contacted by Public Health, asking them to prescribe prophylaxis for patients exposed to Influenza. Please reply to the LMC office here admin@northstaffslmc.co.uk