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Doncaster LMC February 2019 Update



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**Local Medical Committee Team**

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**Jackie Harper - Practice Manager Consultant to Doncaster LMC**

Jackie is contactable via e.mail at [jackie@doncasterlmc.co.uk](mailto:jackie@doncasterlmc.co.uk).

**Information and Website Updates**

**Looking for advice? LMC Website Updates**

Many of the questions asked by practices to Doncaster LMC have already been asked before and the answers can often be found on our website. We have integrated a Google Search function on our homepage so you can search our archive of monthly updates. If you have a query, try searching our website first – it will save you time.

**GDPR**

To help you to fulfil your requirements under the regulation Doncaster LMC have created and sourced are large number of template documents that you will need.

Doncaster LMC is also the only LMC in the UK to provide the Data Protection Officer service to practices as a part of their levy.

The GDPR resources are available on our website at -

<http://www.doncasterlmc.co.uk/gdpr/.html>

**GDPR hint for February**

Information sharing should always be about privacy by design and privacy by default. For example, when your reception team give out prescriptions, do they check who they are giving them to and whether consent is in place to give it to someone other than the patient?

Consider discussing within your practice how to make it safer to give out confidential information to someone other than the patient.

**CQC reimbursement – reminder**

In 2016 the BMA negotiated for practices’ CQC fees to be fully reimbursed by their Commissioner. This is a practice entitlement, so please ensure you contact [genna.miller@nhs.net](mailto:genna.miller@nhs.net) (Finance Manager at NHS Doncaster CCG) to arrange your reimbursement. **There also appear to be several practices in Doncaster who have not claimed other reimbursable entitlements claims such as water and business rates.**

**2019 – 2020 GMS Contract changes**

No doubt you will have all heard by now some of the 2019-2020 GMS contract changes that will come into play from 1st April 2019.  If you haven't, don't worry - I'll be creating a summary of the 180 pages for you soon.

Influence from South Yorkshire to the GPC has played a kay role in shaping the GMS contract negotiations this year where you will note a significant change from the usual annual tinkering at the edges.

In particular, the demand of the GPC executive was to deliver a contract with changes over 5 years that give a clear steer in direction of travel of the NHS so that we can adjust our businesses accordingly.  The GPC executive have delivered this.

One of the more significant changes that meet this ask is a Directed Enhanced Service that will **see resources going into GP practices working collaboratively as networks**.

In anticipation of this, Doncaster LMC has dedicated considerable effort in association with our Partners to help establish **a single credible Federation across Doncaster that has strong and reliable Leadership and Governance**.

To this end, Primary Care Doncaster has become the vehicle ready to deliver neighbourhood working described in the contract this year with the expectation that the following four years will also use this model of delivery.

Further still, Doncaster LMC has worked hand in hand with Primary Care Doncaster and NHS Doncaster CCG to describe a Primary Care Strategy based upon these national contract changes.

This product of years of work means that Doncaster is currently aligned to deliver the ideals of the National Primary Care Strategy.

**Access guidance**

GPC England has released additional guidance that provides an overview of all elements of the contract agreement which could change how patients will access primary care in the future and the impact of these changes on practices. You can read the access guidance at <http://www.doncasterlmc.co.uk/guidance.html>

**Doncaster to be included in the rollout for lung cancer scanning trucks**

Lung cancer scanning trucks that operate from supermarket car parks are being rolled out across the country in a drive to save lives by catching the condition early, NHS England has announced.

Around £70 million will fund 10 projects that check those most at risk, inviting them for an MOT for their lungs and an on the spot chest scan that include mobile clinics. The targeted screening will help improve survival rates by going first to the some of the areas with the highest death rates from lung cancer.

The [NHS Long Term Plan](https://www.longtermplan.nhs.uk/) set out an ambition that 55,000 more people will survive their cancer – to achieve this the plan also included an ambition to increase the number of cancers diagnosed at stages one and two from half to three-quarters of cancer patients.

The scheme means people aged 55-74 who have been identified as being at increased risk of lung cancer will be invited for a lung health check and be offered a chest scan if appropriate – this scan could take place in a mobile unit or in a hospital setting.

The new projects will last initially for four years and NHS England will then evaluate the results to use as a basis for further roll out.

**GP Practice Support Services Campaign**

If you are a GP partner and BMA member the BMA have made it simple to access a range of practice support services in one place. Practice managers can also call on the GP’s behalf to discuss their needs. Further information about what the BMA can support you with can be accessed at <http://www.doncasterlmc.co.uk/coleaguefbk.html>

**Home Office discussing potentially unlawful access to patient info by police**

Police officers may be using an unlawful means of obtaining the patient records of firearm licence applicants, it has been reported.

According to some LMCs police are using subject access requests (SARs) to acquire the medical histories of individuals who have applied for a firearms licence.

Under GDPR, GP practices can no longer charge people who request to see a copy of their patient record via a subject access request. But, in an effort to cut costs, it seems some police forces are using this mechanism rather than requesting a medical report.

The ICO is reported to have advised that the police do have power to request such information but made clear that applicants for firearms licences would have to consent to such an approach. “It would represent a means of ensuring that the applicant was aware of, understood and accepted the need for obtaining medical data to support the decision whether or not to award a licence.” But the statement also makes clear that the “previous means” of police forces obtaining medical information is still permissible under the Data Protection Act. “Therefore the ‘enforced subject access’ approach is not only unnecessary but could potentially constitute a breach of the Data Protection Act.”

**CQC Visits - Mythbusters and tips**

With CQC visits taking place around Doncaster it may be helpful to revisit the CQC mythbusters and tips provided by Prof Nigel Sparrow OBE who is CQC's Senior National GP Advisor. You can find our updated mythbusters and tips for [**general practice**](http://links.govdelivery.com/track?type=click&enid=ZWFzPTEmbXNpZD0mYXVpZD0mbWFpbGluZ2lkPTIwMTkwMTMxLjkwOTc3MSZtZXNzYWdlaWQ9TURCLVBSRC1CVUwtMjAxOTAxMzEuOTA5NzcxJmRhdGFiYXNlaWQ9MTAwMSZzZXJpYWw9MTczNjEzNTkmZW1haWxpZD1vZmZpY2VAZG9uY2FzdGVybG1jLmNvLnVrJnVzZXJpZD1vZmZpY2VAZG9uY2FzdGVybG1jLmNvLnVrJnRhcmdldGlkPSZmbD0mbXZpZD0mZXh0cmE9JiYm&&&106&&&https://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-full-list-tips-mythbusters-latest-update) by following the link. They are designed to help providers with the CQC inspection process and share agreed guidance and best practice.

One notable example is that GP practices should be registered to delivery Maternity Services. Are you registered for this?....

**Pension Blog**

For the latest pension blog from Krishan Aggarwal, Deputy Chair of the Sessional Subcommittee please follow the link below. The main focus of this blog is the Type 2 forms for Sessional GPs.

<https://www.bma.org.uk/connecting-doctors/the_practice/b/weblog/posts/capita-and-the-nhs-pension-fiasco-what-is-going-on-part-9>

**New death certificate system**

From April 2019 a new medical examiner led system will begin to be rolled out within hospitals in England and Wales. The non-statutory system will introduce a new level of scrutiny whereby all deaths will be subject to either a medical examiner’s scrutiny or a coroner’s investigation.

The government have decided to initially roll out the service within secondary care as a **non-statutory** system. In practice this means the medical examiner system will be introduced within hospitals alongside existing cremation processes and some of the fees paid will help to fund this. It is envisaged that once the ME service is established within a Trust, the system will then look to be extended to include deaths within the community/primary care. They have estimated around two years for this to bed in before primary legislation will look to be introduced to remove the existing cremation system and forms 4,5 and 10 and make the ME system statutory including introducing a new public fee to fund the system in its entirety.

Further information can be found here: https://www.bma.org.uk/advice/employment/ethics/implementation-of-the-medical-examiner-system

**Falsified Medicines Directive and Brexit**

NHS England has written to all Heads of Primary Care in England about the Falsified Medicines Directive. The letter states that in an event of a No Deal for Brexit the FMD requirements would be removed from law. Whilst mandated to continue preparations, these need to continue with appropriate caution given the possibility of a No Deal scenario.

Helpfully, the letter states that work has been progressing with system suppliers to provide an FMD solution as part of their package to practices – thereby signalling that **practices do not need to take immediate action**. Unhelpfully, the letter also states that dispensing doctors would need to make their own provision as part of dispensing. The BMA have serious concerns about this and will be meeting with NHS England and the Dispensing Doctors Association to discuss this as soon as possible.

Further information is available via the BMA website: <https://www.gov.uk/guidance/implementing-the-falsified-medicines-directive-safety-features>

**Integrated Care Provider contract**

GPC England has serious concerns about the risks related to NHS England’s integrated care provider contract (previously the multispecialty community provider contract) which has been proposed as a way of integrating services.  Practices entering in to such an arrangement would be required to give up their existing GMS or PMS contract in part or altogether. With the new GP contractual focus on primary care networks, which build on the existing core GP contract, the BMA do not believe the use of the ICP contract is necessary.

The BMA has produced some briefing materials on the ICP contract and its potential impact on the NHS, and for general practice.  These provide a brief overview of what GPs and patients need to know about ICPs, the BMAs concerns about them, and the alternative options available for achieving integration of NHS services. The briefings can be accessed via the [BMA website](http://www.bma.org.uk/ICP).

**Indemnity costs**

The BMA have had discussions with the medical defence organisations regarding the likely indemnity costs for their membership offering after April, and so far the following information can be shared:

* The MDOs are in the later stages of pricing the post-April product and we expect them to announce this soon.
* The BMA have advised all GPs to remain members of one of the MDOs to ensure they have cover for GMC, criminal/coroners cases, private reports etc.
* There will be a competitive market for this cover after April and this is likely to influence pricing decisions
* In the meantime all indications suggest the market rate for this cover is likely to be broadly in range with our expectations
* Renewals falling due before April 1st are likely to be in line with current costs
* All trainees will be covered for clinical negligence under the CNSGP scheme.

**Sessional GPs E-Newsletters:**

**January / February 2019**

BMA sessional GPs e-newsletters are now being produced fortnightly.

The main articles include:

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| * NHS long-term plan. | * The BMA’s submission to the DDRB. |
| * GP partnership review: read the final report. | * Working and living as a GP in Scotland. |
| * How will the new GMS contract affect sessional GPs in Scotland? | * How we’re connecting sessional GPs across Wales. |
| * HEE looking for volunteers who have re-trained as a GP in England to share their experience. |  |

**LMC Buying Group – advertising your vacancy**

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.

**REMINDER:**

**If you have an urgent issue that needs a quick response from the LMC or DPO please do not rely on email alone.**

**In an EMERGENCY please contact Dr Eggitt on 07585 116115**

**Job Vacancies**

**Our monthly update is sent to all LMCS in the SY area.**

**We are happy to advertise any of your vacancies**

**For full details of these vacancies please see the separate attachment in our email**

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| --- | --- | --- |
| Vacancy | Practice | Closing Date |
| Partner / Salaried GP | **Dunsville Medical Centre** | **N/A** |
| Partner / Salaried GP | **The New Surgery** | **N/A** |
| Partner/Salaried GP | **St John's Group Practice** | **N/A** |
| Salaried GP | **West End Clinic** | **N/A** |
| Salaried GP | **White House Farm** | **N/A** |
| Partner/Salaried GP | **St Vincents Practice** | **N/A** |
| Advanced Nurse Practitioner | **The Ransome Practice** | **N/A** |
| Minor illness/Triage Nurse | **The Mount Group Practice** | **N/A** |
| Salaried GP | **The Mount Group Practice** | **N/A** |
| Part Time Receptionist | **Bessecarr Medical Centre** | **N/A** |
| Part Time Receptionist | **The Holly Bush Health Centre** | **N/A** |
| Part Time receptionist | **The St Vincent Practice** | **N/A** |

**Monthly Update**

**MONTHLY REMINDER TO ALL GPS THAT THE LMC OFFICERS ARE WILLING AND ABLE TO PROVIDE ADVICE AND SUPPORT (TOGETHER WITH REPRESENTATION, IF REQUIRED), TO ANY GP WHO MAY BE THE SUBJECT OF A COMPLAINT**

**Concerned about a colleague?**

NHS General Practice is under unprecedented pressure.  As such, we are all at risk of work related stress, burn out and depression.

Often, the symptoms of these are insidious and can be more obvious to those around us than to ourselves.

So, if you have concerns about a colleague and feel that they need our support, we’d like to hear from you.

Doncaster LMC has launched a confidential web based reporting tool where you can share your concerns about a colleague at risk of burnout and ask for our support.

[**http://www.doncasterlmc.co.uk/coleaguefbk.html**](http://www.doncasterlmc.co.uk/coleaguefbk.html)

This tool is designed to be supportive so that those identified can be helped by Doncaster LMC, signposted on to support services or be personally assisted through difficult times by officers of the committee.

We stress that the online tool must not be used for reporting safety concerns regarding a colleague’s clinical practice. Read more about the tool at:-

[**http://www.pulsetoday.co.uk/your-practice/battling-burnout/gps-given-chance-to-anonymously-raise-concerns-about-colleagues-burnout/20010472.article**](http://www.pulsetoday.co.uk/your-practice/battling-burnout/gps-given-chance-to-anonymously-raise-concerns-about-colleagues-burnout/20010472.article)

***All GPs on Doncaster Performers List (including medical students) are welcome to attend any LMC meeting as an observer. Please let the office know if you plan to attend.***

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| **Next LMC Meeting** | |
| **When?** | **Monday 4th March 2019** |
| **Time?** | **7:00pm** |
| **Venue**? | **Doncaster Golf Club**  **DN4 7NY** |

