# LMC ViewPoint

# The newsletter of Leeds Local Medical Committee Limited

October 2018

# **QOF 2017-18 REPORT**

NHS Digital published the annual QOF in England report on the 26 October 2018. The area of greatest change has been the recording of patients with depression, which increased by 0.9% to 9.9%. 537.5 points was the average achievement score for practices out of 559 points, with 12.5% of practices achieving the maximum points, up from 11.9% last year. Read the full report <u>here</u>.

The report once again shows that despite high workload pressures impacting practices across the country, high standards of care are being provided to patients, and this is down to the hard work and dedication of GPs and their practice staff. The rising numbers of patients recorded as suffering from depression is a sign of how GPs are on the frontline in responding to people with mental health problems and provides more evidence as to why increased investment in wider community mental health services is urgently needed.

# **NEW QOF INDICATORS FOR DIABETES**

NICE has published <u>new diabetes indicators</u> for consideration for inclusion in the Quality and Outcomes Framework (QOF). The GPC has been active in producing these new indicators which would support GPs to ensure that patients with diabetes receive care tailored to their individual circumstances. These new NICE indicators will now be considered as part of the current negotiations between GPC England and NHS England.

The GPC prescribing policy lead, Dr Andrew Green, commented that the new indicators will "encourage GPs to ensure that patients with diabetes will receive care tailored to their individual circumstances. It is vital to balance the need of younger fitter patients for good risk-factor control with the importance of avoiding overtreatment in frailer people, and we are pleased that this principle has been incorporated into these indicators".

# REDUCING WORKLOAD INAPPROPRIATELY TRANSFERRED FROM SECONDARY CARE

Please see the message directly below from Dr George Winder who is leading a project for the CCG Primary Care team:

Thank you for completing the survey on inappropriate shift of workload from secondary to primary care. These are sometimes referred to as breaches of the 2017/2018 hospital contract. The results of the survey are attached to this edition of Viewpoint. Also attached are the guidance documents for the new reporting mechanism so that we can address the issues raised. This should be easy to complete and will enable the CCG to address the issues raised. We would ask you to use it instead of the current "BMA template letters".

# You said...

30% of you said that you weren't aware of the hospital contract.

# We did...

Below is a link summarising the salient points of the contract in relation to the "primary/secondary care interface". We will be at Target in November to talk through this guidance. <u>https://www.england.nhs.uk/wp-content/uploads/2017/07/interface-between-primary-secondary-care.pdf</u>

# You said ...

44% of respondents didn't use the existing BMA template letters for the following reasons:

a) 20% didn't know they existed.

- b) 24% thought they risked breaking down relationships with colleagues.
- c) 37% felt they wouldn't have an impact if sent.
- d) 56% said they took too long to complete.

#### We did...

a) We have developed a new reporting mechanism. This will be widely advertised and support will be given to embed in practices that wish to use it.

b) The information will be used by the CCG to identify patterns in the system that can then be addressed with the providers.

c) The information will be collated and used by the CCG. Feedback will be given to the system when this is done.

d) The new reporting mechanism is quick to complete. It will be possible for admin staff to complete. As part of the upcoming document workflow training, admin staff will be advised how this can be incorporated to avoid clinician input where possible.

e) We are meeting with the main providers to discuss the survey findings and look at how we can ensure colleagues from the rest of the system are aware of the guidance, and reduce any barriers to them following it.

These are the first steps. The more people utilise the reporting mechanism the quicker patterns will become apparent. Please email me at <u>georgewinder@nhs.net</u> or catch me at Target should you have further questions. The primary care team will be happy to support any practices who need help attaching the reporting mechanism to the clinical system.

# PENSION ANNUAL ALLOWANCE ISSUES

Growing numbers of doctors are facing problems created by recent pension changes and this is having a real impact on workforce retention. One of these problems is that the Annual Allowance is currently set at £40,000 and tapers down to £10,000 for higher earners, and those who exceed the standard Annual Allowance limit or the reduced tapered Annual Allowance are subject to a tax charge. This can either be made by paying the tax from savings via the tax return (taxed at the marginal tax rate) or by applying to use "scheme pays".

Further to several approaches made by the BMA, including a recent letter to the Chancellor of the Exchequer, NHS BSA has now agreed to permit the use of "voluntary scheme pays" to those who may have exceeded their tapered limit, but not necessarily the standard limit. Additionally, the requirement to have a tax charge of £2,000 or more is no longer required. This will be available from 2017/18 onwards and more details can be found <u>here</u>

Whilst the BMA continues to challenge the application of annual allowance and other wider pensions issues, this change at least allows those members affected the option not to have to fund the charge from savings, investments or borrowings.

The GPC have updated their guide to annual pension allowance, which provides examples of how to calculate your annual allowance growth. Read the guide <u>here</u>.

# **GP RETENTION SCHEME**

As of June 2018, around 295 GPs across England had joined the <u>GP Retention scheme</u> to give them the flexible working options they need to enable them to remain in practice. From having time to care for your family, wanting to reduce your hours as you approach retirement or to receive educational and development support after a period of absence, all GPs who are considering leaving General Practice and their employers should seriously consider applying to their CCG and joining this scheme. Watch this <u>video</u> interview with two GPs explaining how the scheme has helped them to continue practising.

#### NHS STANDARD CONTRACT TOOL KIT FOR PRIMARY AND SECONDARY CARE

NHS England has published a NHS standard contract implementation toolkit to improve working practices and patient experience between primary and secondary care. The toolkit contains a

practical guide to support local systems to work together to implement these changes. The BMA, along with other stakeholders, was involved in the development of this resource, which is aimed at reducing some of the avoidable transactional processes between primary and secondary care. Read the toolkit <u>here</u>.

The BMA has also produced guidance and resources to help improve the interface between primary and secondary care, including guidance on prescribing and referrals, and template letters to support GPs and CCGs. Access the resources <u>here</u>.

# CQC STATE OF CARE REPORT 2017/18

The CQC published its <u>State of Care report</u> earlier this month, which is an annual assessment of health and social care in England. The report found that 91% of GP practices were rated good in 2018, with a further 5% rated outstanding, despite increased pressure on services.

Once again, general practice has been found to be delivering the highest standard of care compared with other sectors, despite the workload pressures CQC themselves focus on. This achievement is down to the hard work of GPs and their practice staff, and provides further evidence of the benefit of the partnership model of working. However, we can't take this for granted and the review was right to point out the need for additional support and investment in general practice and community based services.

# **TPP DATA SHARING**

The Joint GP IT Committee (JGPITC), co-chaired by GPC and RCGP, has previously raised concerns regarding the sharing of patient records in TPP's SystemOne software. GPC have issued interim statements in March and December 2017 and earlier this year advising GPs of progress being made to address those concerns. New functionalities were deployed and implemented earlier this year and are now fully embedded.

Consequently, the JGPITC is confident that GP Data Controllers using TPP SystemOne now have the tools they need to ensure that they comply with GDPR and DPA 2018, but which also support appropriate sharing of data for care. To that end the JGPCIT is of the view that the concerns it raised have been fully answered and considers the matter closed. This is the end result of significant collaborative work between the BMA, Office of the Information Commissioner, NHS England, NHS Digital, TPP and the RCGP over the last 2 years.

# INTERIM PARTNERSHIP REVIEW REPORT AND PARTNERSHIP MYTH BUSTER

The interim partnership review report has now been published. We welcome this review which not only recognises the vital role of the partnership model, but crucially also acknowledges what the GPC has been saying for some time about the ever-increasing threats to its sustainability. The report identifies many of the problems that must be solved if the partnership model is to be reinvigorated, not least dealing with unsafe workload pressures and managing risks that so often outweigh the benefits of becoming a partner. Workforce recruitment and retention issues, spiralling indemnity costs, premises risks, and other financial liabilities all ultimately fall on the partner, and they must be tackled if we are to make the model more appealing to both today's GPs and those of tomorrow.

GPC will continue to work with the review as it looks for meaningful, tangible solutions that will give confidence to current partners and those who may consider this option in the future that their concerns have not only been listened to but are most importantly acted on. Read the interim partnership review report <u>here</u> Read the partnership mythbuster for trainees <u>here</u>

# **GP SHORTAGE – INTERVIEW ON BBC RADIO 4's YOU AND YOURS PROGRAMME**

It is three years since the government in England promised to recruit an extra 5,000 GPs by 2020. However, as we all know the number has fallen not increased during that time. Whilst the numbers of GP trainees are increasing much more needs to be done to help retain the existing workforce. This was the subject of an interview Richard Vautrey, GPC chair and Leeds LMC assistant secretary did on BBC Radio 4's "You and Yours" programme last week. You can also hear Matt Hancock, Secretary of State for Health and Social Care, responding to Dr Vautrey's comments. You can listen to the interview <u>here</u>.

# NATIONAL DATA OPT-OUT

Practices should recently have received a letter from NHS Digital informing them that the codes for the 'type 2' opt-out have been retired and should no longer be used. A 'type 2' opt-out prevented a patient's confidential personal information from leaving NHS Digital for purposes beyond their direct care.

A new national data opt-out model, launched in May, replaces the 'type 2' opt-out. The new model provides an online facility for individuals to opt-out from the use of their confidential data for purposes other than direct care i.e. for the purposes research and health service planning. Patients who had previously registered a 'type 2' opt-out have had this converted into a national data opt-out. It is important that patients are aware of their right to opt-out. Despite efforts to raise public awareness as part of the Information Commissioner's Office 'your data matters' campaign recently published figures show that uptake of the national opt-out has been lower than expected.

Patients can set their opt-out preferences at: <u>https://www.nhs.uk/your-nhs-data-matters/</u> They will need their NHS number and a valid email address or telephone number which is on the GP record or on the Personal Demographics Service database to register their decision to opt out. Patients who are unable to use the online facility can use a phone helpline to manage their choice - 0300 303 5678. A paper print-and-post form is also available: <u>https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/other-ways-to-manage-your-choice/</u>

A patient poster and handout pack was sent to practices in June - these can be accessed at: <u>https://digital.nhs.uk/services/national-data-opt-out-programme/supporting-patients-information-and-resources</u>

The new opt-out is provided in line with the recommendations of the National Data Guardian in her 2016 'Review of Data Security, Consent and Opt-Outs'. NHS Digital are applying patients' preferences but there is a longer timetable for implementation across the rest of the system by 2020. The national opt-out will not apply in the following circumstances:

- the patient has given consent to a specific project (e.g. a medical research project)

- statutory requirements to share data (e.g. Section 259 of the Health and Social Care Act 2012 which requires providers to share data with NHS Digital)

- where there is an overriding public interest for the opt-out not to apply

- other specific circumstance - for full list of exemptions see: <u>https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/where-opt-outs-dont-apply/</u>

'Type 1' opt-outs will continue to apply and be respected. A 'type 1' opt-out prevents confidential patient information from leaving the GP practice for purposes other than direct care. Practices should continue to record 'type 1' opt-outs.

# CLINICAL PHARMACISTS IN GENERAL PRACTICE PROGRAMME

A letter from NHS England is attached which outlines changes to the criteria for NHS England's Clinical Pharmacists in General Practice Programme. The changes will offer more flexibility by enabling sites to operate across a smaller population size and allow clinical pharmacists to work part-time.

# SUPPLIES OF HEPATITIS B VACCINE

The DHSC has informed LMCs that the supply situation for hepatitis B vaccines has improved and practices should be able to order as per historical demand. Although MSD have constrained supplies of the vaccines, GSK have very good supplies available.

# LOCAL PROSTATE SERVICES

Following the increased media focus on prostate cancer, please see attached document detailing a number of dedicated prostate services locally.

# LEEDS TIER 3 WEIGHT MANAGEMENT BID AND REQUEST FOR SESSIONAL GPs

Leeds Community Healthcare NHS Trust are scoping a bid to deliver Tier 3 Weight Management in Leeds. The service will require a consultant physician or medical practitioner with advanced training in obesity management. This will be provided on a sessional basis.

If you are a GP with this kind of special interest who would take up 1-2 sessions a month please contact Dan Barnett, Head of Business Development, Leeds Community Healthcare NHS Trust (Mob: 07507066321 Email: <u>danbarnett@nhs.net</u>).

Fully funded training would be provided for anyone that has an interest but doesn't yet have the training. Please see the attached Adult Specialist Weight Management Services – Tier 3 Service Specification for further information.

# **USEFUL APPRAISAL RESOURCES**

A number of guides intended to help GPs understand the annual appraisals process and how to get the most out of it have been developed. They are available on the BMA website <u>here</u>. This page signposts to a list of <u>useful resources</u> that can help with appraisal preparation. Also attached is early sight of an NHSE guidance intended to support doctors who undertake a low volume of NHS General Practice clinical work.

# LEEDS TELEDERMATOLOGY PATHWAY - UPDATE VIDEO

The teledermatology pathway for 2ww dermatology referrals launched in Leeds on 1st July 2018. Since the launch 65% of all 2ww skin referrals have been sent to Leeds Teaching Hospitals Trust (LTHT) have included images. In 275 cases (16%) the decision has been made following triage of the referral and the image to discharge the patient, and in the last 6 weeks 24% of patients have been discharged following triage. This is an extremely positive result so far. In order to make further improvements to the pathway <u>this video</u> has been created featuring Dr Wal Hussain, Consultant Dermatologist and Skin Cancer MDT lead for LTHT. The video contains guidance on effective image capture and quality and the teledermatology referral pathway.

# **NEXT GENERATION GP PROGRAMME**

Please click the link below for some information on the 'Next Generation GP' programme for emerging leaders and future 'change-makers' in general practice, designed by three GP trainees. Aiming to be ready to start in West Yorkshire and Harrogate in the spring of 2019. http://nextgenerationgp.wixsite.com/2017/more-about-me

# YORKSHIRE HUMBER CARE RECORD – EVENT AT PONTEFRACT RACECOURSE

On behalf of Dr Jason Broch, Clinical Lead for Yorkshire and Humber Care Record, please cascade the message below within your practice.

# Dear Colleague

If you work in social care, mental health, community, acute, pharmacy or GP setting we would like you to invite you to a clinical and care staff workshop to discuss how we achieve the Right Information, Right Person, Right Time vision for Yorkshire and Humber. Book now <a href="https://www.eventbrite.com/e/yorkshire-and-humber-care-record-clinical-and-care-staff-workshop-tickets-51398180341">https://www.eventbrite.com/e/yorkshire-and-humber-care-record-clinical-and-care-staff-workshop-tickets-51398180341</a> to reserve your place, spaces are limited. The event will take place on 27 November 2018 between 12:30-16:30.

We want to engage with a wide range of clinical and care staff who deal directly with patients/service users across the Yorkshire and Humber region. We need to understand your views on what information may be helpful, what the benefits of sharing patient data are, what your concerns/issues are and chat through some use cases. The workshop will be headed up by the Yorkshire and Humber Care Record team as key aspect of the work required to deliver the

exemplar position awarded to the region under the NHS England's Local Health Care Record Exemplar (LHCRE) programme.

The programme's ambitious objective is to integrate health and care records across the region with the aim of improving care by providing timely and relevant information to care professionals and citizens securely and safely and we need your help to achieve this goal. Your involvement will help us to build a solution that will help to provide better care for the people we look after.

This is the first of a number of clinical sessions that will be held over the coming months across the region. If you are unable to attend this event but want to be involved in the future - please register your interest with an email to <u>hnf-tr.yhcr@nhs.net</u>

#### PREMISES SURVEY

As you may be aware, the BMA are currently participating in a review of the GP premises system, which is being led by NHS England and the Department of Health and Social Care. A 'Call for Solutions', seeking input from interested parties for ways in which the GP premises system could be altered to address issues in the system, was recently undertaken with a wide range of proposals submitted for consideration, and detailed assessment of proposals drawn from this is currently underway.

In order to help inform this process and the continuing discussions with NHS England and other key stakeholders, the BMA are running a premises survey in order to build a fuller picture of the current landscape for GP premises.

The online survey can be found at <u>https://www.research.net/r/BMApremisessurvey</u> and will be running <u>until the 21<sup>st</sup> November</u>, we would be grateful if you could share this within your practice. It only requires one response per practice and should take no more than 10 minutes to complete.

For any questions about the survey please contact info.lmcqueries@bma.org.uk.

#### **TRAINING SESSION RE CHILD NEGLECT & GP RESPONSIBILITIES**

Please see attached flyer detailing a comprehensive training session around child neglect and GP responsibilities. Spaces are limited.

# CURRENT KEY DISCUSSION AREAS BY THE LMC ....please contact the LMC Office for current status.....

- CQC System Review
- GP Partnership Review
  - QIS

# **COMINGS AND GOINGS**

#### A warm welcome to .....

Dr Amy Izon and Dr Pierpaolo Ghirotto who have joined Meanwood Group Practice as salaried GPs.

#### Good bye and best wishes to...

Colton Mill and The Grange Medical Centre have Dr Younge on Maternity Leave who recently had twins and Dr Barrett going on Maternity leave in December for her third baby. Also the premises manager Rod Long and assistant manager Lorraine Long retire this month after over 25 years.

New Cross Surgery Lead GP – Dr Iqbal Ahmed will be leaving late October after 26 years. All colleagues wish him the utmost success and happiness in all his future ventures in life.

#### Practice vacancies at.....

#### Alwoodley Medical Practice Nurse Vacancy

We are looking for a Practice Nurse to join our busy Practice covering 2 sites, of which the main site is a new purpose built Medical Centre which opened in March 2016.

We are currently a team of 5 Practice nurses and 3 Health Care Assistants.

Ideally you will have some experience in Chronic Disease Management, but all applications considered. Training will be provided where necessary.

Responsibilities to include:

- All treatment room duties
- Health promotion
- Chronic Disease Management

Terms & Conditions:

- Ideally full time but minimum 30 hours
- Salary dependent on experience
- NHS Pension Scheme
- Uniform provided
- 6 weeks (pro rata) annual leave plus bank holidays

For further information, please contact: Sister Karen Gornall Senior Nurse Alwoodley Medical Centre Saxon Mount Leeds LS17 5DT Telephone 0113 3930119 or email <u>karen.gornall@nhs.net</u>. Closing date for applications November 25<sup>th</sup> 2018.

#### **Rutland Lodge Medical Practice**

Salaried GP/Partner required 4-8 Clinical Sessions for a forward looking practice in Leeds 7. We are seeking a caring, enthusiastic doctor with excellent clinical skills to join our friendly, high performing practice. You will be working with a team of experienced GPs, Nurses and Administrators who all work together to support each other. We have a varied demographic and are committed to ensuring the practice is efficient as it can be with GP workload.

Flexible working is available

The practice has:

- 9,200 patients
- 5 Partners (2 whole time/3 part time)
- 2 sites
- GMS contract
- Training practice
- SystmOne
- CQC rated Good
- Active engagement with patients and local CCG

Remuneration package negotiable depending on experience.

For further details or to arrange an informal visit please contact: Dr Simon Ottman or Paula Dearing on 0113 2007474 or email <u>simonottman@nhs.net</u> or p.dearing@nhs.net

Closing date: 31<sup>st</sup> October 2018

#### Salaried GP/ Nurse practitioner vacancy for 6-8 sessions in West Leeds

We are pleased to invite suitable candidates to apply for the above position at Whitehall Surgery, to commence late December 2018 / early January 2019. We are recruiting as a valued member of our team is emigrating to warmer climes!

The successful candidate would join 3 GP partners and 3 salaried GPs, along with 3 nurses and 3 healthcare assistants. We are a welcoming and well established team serving a mixed rural and urban population of almost 9000 patients. We recently were voted 3<sup>rd</sup> best practice in Leeds by our patients and are high QOF achievers. We are proud to have created a supportive and team based working environment and would welcome any specialist interests that would serve our patient demographic. We are a research practice, interested in education and professional development. We provide protected time for regular clinical and practice meetings and work from an attractive and modern leased building.

As a practice we are friendly and forward thinking and the majority of the staff are long serving members of the team. We are proud of the co-operative, motivated and positive working environment at the practice and are hoping to welcome a new long term colleague into the team.

For more information or to apply by CV, please contact Joanne Woods, Practice Manager: Tel: 0113 4677533, E-mail: joanne.woods@nhs.net

#### Permanent or 6 Month fixed term, Salaried GP – New Cross Surgery, Rothwell

We are seeking a committed and enthusiastic full-time or part-time Salaried General Practitioner to join our friendly and progressive practices in South Leeds. Ideally covering between 6 and 8 sessions per week We offer:

- Superb, friendly & supportive team of GPs, nurse practitioners and excellent nursing team.
- Modern refurbished facilities and equipment using SystmOne.
- Competitive salary, MDU paid, 6 weeks holiday pro rata and 1 week study leave pro rata.
- Paid time for professional/personal development.
- CQC inspected: rated a 'good' practice.

Become part of an innovative and forward thinking practice with opportunities to develop specialist skills, leadership and contribute to our local CCG.

For informal visit/enquiries/application please email: joanne.ward7@nhs.net or telephone Joanne Ward (Practice Manager) on 07825 270908

Closing date: Monday 26th October 2018

#### Medical Receptionist / Secretary (new post) – Oakley Medical Practice

We are looking for an additional experienced, pro-active, enthusiastic and motivated Medical Secretary / Administrator to join our small, friendly Practice Team dedicated to providing high quality care to our patients.

The post holder will have excellent communication and computer skills, accuracy and ability to work under pressure. You will be expected to receive, assist and direct patients in accessing the appropriate service or healthcare professional in a courteous, efficient and effective way. A good telephone manner and an understanding of confidentiality is required. Experience in the use of the e-Referral system is preferred but not essential as full training will be given. In return we offer a friendly and supportive working environment. Applicants must be educated to GCSE C standard in English and Maths

#### 25 hrs minimum per week Normal working hours: 1pm – 6pm but flexibility between 8am – 6pm to meet the needs of the Practice will be required

Salary Dependent on Experience and Qualifications Option to join the NHS Pension Scheme

Please apply in writing with CV to: -Hilary Thompson, Practice Manager Oakley Medical Practice 12 Oakley Terrace LEEDS LS11 5HT Tel: 0113 2720900 The closing date is 22/11/18.

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