

# Worcestershire and Herefordshire Local Medical Committees Ltd NEWSLETTER

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**MARCH 2019**

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### **CQC – NEW INSPECTION PROCESS**

All practices will have received a letter from CQC explaining their new inspection process from 1<sup>st</sup> April 2019. It is intended that the new approach will lessen the burden on practices and make the process more fit for purpose.

Hopefully it is self-explanatory but for clarity, practices that are rated as good/outstanding will no longer be routinely inspected every two years, with their inspections changing to a maximum interval of five years. Instead these practices will have an annual regulatory review (ARR) including the outcome of a "provider information collection" (PIC) with an annual phone call to the practice, as a satisfactory IT solution for the PIC has yet to be developed.

Locally, Inspectors will make initial contact with practices to explain the process and

arrange a mutually convenient time to have their ARR conversation, which will take place around 4 weeks after the initial call. In our region, these initial calls will start taking place from 18 March so the actual ARR conversations will start taking place around the 15<sup>th</sup> April 2019. The ARRs will be spread over the course of the year so the practices may not all be receiving a call immediately.

There is updated guidance on CQC's website: [How we monitor GP practices](#) and a new page on the [questions that we'll ask on the calls](#).

There is also a blog from Steve Field that can be accessed here:-

[https://content.govdelivery.com/bulletins/gd/UKCQC-23316da?wgt\\_ref=UKCQC\\_WIDGET\\_4](https://content.govdelivery.com/bulletins/gd/UKCQC-23316da?wgt_ref=UKCQC_WIDGET_4)

### **LOCUM PRACTICE AGREEMENTS**

The BMA Model [locum practice agreement](#) has been developed jointly by GPC and the sessional GP subcommittee with the help of BMA Law.

This has been developed with the aim of benchmarking good practice for locums and practices, both in terms of having written T&Cs in place, which only 20% of engagements currently do. It is intended to minimise common disputes between locums and practices and clearly outline the type of work that will be undertaken by a locum when working at a practice. It covers practice and locum obligations, as well as practical issues such as invoicing.

It also protects both parties against locums being categorised as an employee or worker by HMRC for tax purposes, or by an employment tribunal for the purposes of statutory employment protection, as well as ensuring that there are appropriate arrangements in place for compliance with GDPR. It is up to practices and locums as to whether they wish to enter in to this legal agreement.

### **GP CONTRACT UPDATE EVENT - WEDNESDAY 3RD APRIL 2019 1.30PM - 4.00PM CHARLES HASTINGS EDUCATION CENTRE**

The LMC is very pleased to confirm that Dr Richard Vautrey, Chair of the General Practitioners Committee (GPC) has very kindly agreed to provide us with our own GPC GP Contract Roadshow on 3rd April at the Charles Hastings Centre from 1.30pm until 4.00pm.

This is a real opportunity to ask those questions that may be concerning you with regard to the new GP contract and what this might mean for practices. We hope that this will provide some clarity and that you will come prepared with questions and queries.

This is a free event supported by the LMC for all practices across both counties. We are expecting this to be a well attended event, please click [here](#) to book your place. The event commences at 1.30pm and the programme is as follows:-

1.30pm Tea, Coffee and Biscuits

2.00pm Presentation by Dr Richard Vautrey

3.00pm Question and Answer Session

### **ICS BRIEFING**

The BMA has published a [new briefing on Integrated Care Systems](#). This provides a background to the changing ways of planning and organising the delivery of health and care services in England. The briefing describes what they are, where across England they are being established, and what they mean for doctors, in both primary and secondary care. We would advise you to read this as we develop into a Shadow ICS locally.

### **SETTING UP A PRIMARY CARE NETWORK GUIDANCE**

Recently the BMA launched the [PCN handbook](#) which marks the start of a series of resources they will provide to support practices in establishing primary care networks. The handbook provides detailed guidance for those starting discussions about forming a network, with considerations, options risks and opportunities, and should be used to inform decisions around governance, structures, employment models, funding flows etc.

They also plan to provide practices and PCNs with practical tools and advice to tailor the content of the handbook to your specific needs. Read Krishna Kasaraneni's blog [here](#).

### **ANNUALISATION OF PENSIONS**

The government's recent [consultation](#) response on the NHS pension scheme contained positive news about fully covering the increase in employers superannuation payments. However it also included much more concerning plans to no longer ignore breaks of up to three months when setting an annual rate of pay for pensions purposes, with the result that GPs' annual rate of pay will now be based on the number of days of pensionable service that they have undertaken during the relevant scheme year.

The BMA believe this will have a major and unfair impact on GP locums' pension contributions and thus reduce the availability of GP locums resulting in an impact on patient care. They will be raising their concerns about the impact of these changes directly with government.

### **ICP CONTRACT IN ENGLAND**

The Department of Health and Social Care has published [statutory instruments](#) relating to the introduction of the ICP contract from April 2019, which define it in statute and sets out what they will apply to. Although the BMA believe that integration and greater collaboration is needed, they have several serious concerns regarding ICP, not least the potential that this leads to practices giving up part of all of their GMS contract, and with the risk of subsequent privatisation. You can read the briefing about ICPs [here](#)

NHS England have also published their [response to the consultation on the proposed ICP contract](#). This highlights the concerns raised by the BMA during the consultation and proposes to make changes to the contract to increase accountability and transparency of ICP organisations.

### **GP APPOINTMENT DATA**

There was regional coverage of recent GP appointment data released by NHS digital, which showed that January 2019 saw an increase of more than one million face-to-face appointments with GPs in England compared to the year before. It also found that the

percentage of people attending an appointment more than 28 days after booking rose from 2.3 % to 3.7 % over the same time period.

### **PHYSICIAN ASSOCIATES IN GENERAL PRACTICE**

As part of the GP contract agreement in England, there is going to be a significant push to expand the workforce to support practices via Primary Care Networks. Physician associates (PAs) are healthcare professionals who are trained in the medical model and can complement the work of GPs and the wider practice team. To help practices prepare, the BMA has compiled a list of considerations for practices to understand the role of a Physician Associate better. This resource also includes a series of case studies which outline the experiences of already practices working with and employing PAs. Read the guidance [here](#).

Health Education England has also launched a campaign to showcase the benefits of employing a physician associate in general practice. Toolkits with newsletter and social media copy aimed at GPs and PAs are available. You can also access images and videos to support the campaign and find out more [here](#).

### **CONSULTATION OPENS ON COMPETITION AND PROCUREMENT RULES IN THE NHS**

Last week NHS England announced a [new consultation](#) on proposals for legislative change to the current competition rules in the NHS in England. This is a significant development which recognises the BMA's campaign against the wasteful and pernicious rules introduced by the Health and Social Care Act 2012.

### **SEXUAL HEALTH SERVICES FOR PATIENTS**

Please see the link below to the Worcestershire Sexual Health website. The site is currently being updated but provides some clarity around the Sexual Health Services available to patients across Worcestershire. The Health and Care Trust have kindly provided this update as we received some queries about [the services available to practices](#).

<http://www.knowyourstuff.nhs.uk/worcestershire/>

### **FUNDING FOR INCREASED EMPLOYER CONTRIBUTIONS**

Following the recently concluded contract negotiations, it was agreed that additional funding would be provided to fund the expected rise in employer's superannuation costs. The DHSC (Department for Health and Social Care) has now published its response following recent public consultation. They have confirmed that for 2019/20 an employer rate of 20.6% (20.68% inclusive of the administration charge) will apply from 1 April 2019. However, the NHS Business Service Authority will only collect 14.38% from employers such as practices. Central payments will be made by NHS England and the DHSC for their respective proportions of the outstanding 6.3%. This will also apply to locum GPs. [Read the full consultation response](#).

### **INDEMNITY**

GPC England and NHS England have agreed the amount to cover the increased cost of indemnity for 2018/19. This will again be £60m and be paid on a per-patient basis equivalent to £1.005 per patient. Practices and individual GPs will need to discuss how this funding is distributed, in line with previous years. It now completes discussions related to the current indemnity scheme and represents a fair and final settlement. This is in addition to the state-backed indemnity scheme which begins next month. [Read our](#)

[indemnity guidance](#).

### **FIREARMS UPDATE**

Guidance relating to firearms has been updated and can be found here [GP support guidance about the firearms licensing process](#). Mark Sanford-Wood, GPC England Executive Team Member, has also written a blog about medical involvement in firearms to explain the clarifications which you can access [here](#).

Their guidance on Conscientious Objection has changed to:

*In our view conscientious objectors are not required to arrange for alternative provision of such a report. Where access to a firearm is a professional requirement – such as for gamekeepers and farmers – we would nonetheless encourage doctors to assist applicants in identifying a suitable colleague willing to engage in the firearms certification process.*

### **CONTRACT AGREEMENT FUNDING FIGURES AND FAQS**

The new values of global sum, QOF, out-of-hours adjustment and the new practice participation payment have now been published, and can be accessed on the [GP contract webpage](#) (in the 'practice funding and pay' tab).

The 1.4% additional investment to the practice contract includes a 1% uplift to global sum and a SFE payment, linked to practice participation in primary care networks, of £1.76 per weighted patient. This therefore delivers an extra £2.68 per weighted patient in to practice budgets for 2019/20. In addition specific vaccination item of service fees have increased, including seasonal influenza. Together with the removal of indemnity expenses this means practices will be able to deliver a 2% uplift to practice staff pay.

Please see the published [FAQs](#) which include questions about funding, primary care networks, digital access, indemnity and QOF. The guidance is available on the [GP contract pages](#).

### **GP PREMISES SURVEY RESULTS**

Practice premises remain a significant issue for many GPs. A major premises survey has been undertaken to highlight the scale of the problems and the results show that only half of premises in England are fit for purpose, with surgeries too small to meet the demands of a growing population. Over 1,000 practices took part in the survey and the findings help to build a fuller picture of the current landscape for GP premises and feed into the GP premises review which is led by NHS England and the Department of Health and Social Care. Key findings include:

- Only half of practices said their premises were suitable for present needs.
- Eight in ten practices said their practices were not suitable for future needs or anticipated population growth.
- GP premises are on average 35 years old, having been first built or converted in 1984.
- 7 in 10 practices are in purpose-built premises.

For more information please see [here](#).

### **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 [here](#).

### **LMC BUYING GROUP UPDATE**

All LMC Buying Group members, can get a Freedom 400 or B10 Recovery Oxygen cylinder with a mask and tubing for only £89 plus VAT.

This price will be available until 31 March and this price will be honoured if a practice completes a quote request form on the Baywater page on our website before the end date: <https://bit.ly/2srYxbD>.

If a practice is tied to a different provider at a higher cost, this price can be honoured for them for the life of their contract with Baywater. However they must complete a quote request form including a reminder services form:

<https://form.jotformeu.com/80594496492370> to ensure they can get the above price.

### **TWITTER**

The LMC is now on twitter so that we can share appropriate and relevant information with you in real time. Please follow us at: <https://twitter.com/Worcest46974991>

### **WORCESTER CITY VACANCY**

There remains a vacancy for an elected member of the Committee to represent Worcester. If there is anyone, either a Principal or Non-Principal, working in a practice in the City who is at all interested in joining the LMC, please contact to the LMC Office to discuss this further. Should you wish to attend an LMC Meeting to observe to get a better understanding of the work of the Committee please let us know.

### **LMC WEBSITE**

The following guidance has been added to the LMC website [www.worcslmc.co.uk](http://www.worcslmc.co.uk) during the last month:

#### **BMA/GPC:**

[Guidance on Unfair Comments on Websites](#)

[Return to Practice Brochure 2019](#)

[Guidance on proposed changes to the Human Medicines Regulation 2012](#)

[GP Contract Agreement 2019 FAQs](#)

#### **NHS:**

[Annual National Flu Programme 2019-20](#)

#### **CQC:**

[Letter to Providers re PIC and ARR](#)

#### **Other:**

[Adult Eating Disorder Guidance 2019](#)

[PCSE GP Bulletin January 2019](#)

# WORCESTERSHIRE AND HEREFORDSHIRE LMC LTD

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Wyre Forest – Dr R Fanous

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Helen Garfield, Representative WF PM  
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## **MEMBERS OF THE HEREFORDSHIRE COMMITTEE**

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### **Representatives:**

All 24 practices are represented at Committee Meetings

**Worcestershire and Herefordshire GPC Representative:** Dr S Parkinson

**THIS NEWSLETTER IS PRODUCED FROM THE LMC OFFICE AT  
ST STEPHENS SURGERY**

### **The next LMC meetings will be:**

Worcestershire – 28<sup>th</sup> March 2019  
Herefordshire – 10<sup>th</sup> April 2019