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Items marked \* in orange on the content list are highlighted either because of their importance or because they contain information you may not have seen elsewhere.

## TRAINING, EVENTS & OPPORTUNITIES

### Upcoming HYMS CPD Courses - including GP Update Course

#### Medically Unexplained Symptoms in Primary Care - A Practical Guide

Wednesday 14<sup>th</sup> November 2018,

Loxley Building, University of Hull

This full day workshop will be led by Dr Stella Morris, consultant liaison psychiatrist alongside several other members of the team at the Department of psychological medicine at Hull Royal Infirmary. It aims provide GPs and GP registrars an opportunity to reflect on their experiences in dealing with patients who have MUS. It will include communication and management strategies which give clinicians the tools and confidence to help their patients (and themselves) deal with chronic symptoms for which there is no identifiable organic cause.

#### The GP Update Course

Saturday 17<sup>th</sup> November 2018, 10:00-16:00

Ron Cooke Hub, University of York

Now in its fifth year, HYMS will be hosting the York-based version of the RCGP-accredited GP Update course. Clinicians from CCG areas other than York (and those from York who attended at the subsidised rate last year) can benefit from a considerably lower rate (£155) compared with the equivalent national course. Further discount is available for HYMS graduates, clinical tutors, GPSTs, practice nurses and advanced clinical practitioners - more detail is available on the [website](#).

#### Confidence with Hand and Wrist Injections

Wednesday 28<sup>th</sup> November 2018, 14:00-17:00

HYMS Building, University of York

Musculoskeletal problems of the hand and wrist are frequently seen and sometimes confusing. In this half day course you go back into the Anatomy Department to look at the commonly encountered conditions, de-mystify their diagnosis and management before focusing on injection skills. Led by a GPwSI and two experienced extended scope practitioners, the course provides access to prepared prosections which will help to refresh knowledge and understanding of anatomy as well as allowing useful rehearsal of injection skills.

### Paediatric Update

Wednesday 30th January 2019, 10:00-16:00

The Piazza, University of York

Treating children and their families is one of the cornerstones of British general practice and brings challenges to both new and experienced clinicians. This full day course, led by local paediatricians, will update and improve confidence in a number of areas relating to paediatrics including a session entitled 'things that usually aren't cancer'. The day will consist of short lectures and small group work with facilitated case-based discussion.

### Headache Made a Little Easier

Wednesday 13th February 2019, 14:00-17:00

The Piazza, University of York

This half day course, facilitated by local headache specialist Dr Manuela Fontebasso, will consider all aspects of headache in primary care with the aim of increasing clinician confidence. There will be advice on diagnosis and management, review of current NICE/BASH guidance as well as the opportunity to discuss challenging cases.

### Palliative Care in General Practice – Principles and Practicalities

Wednesday 20th March and Wednesday 10<sup>th</sup> April 2019, 09:00-16:30

St Catherine's Hospice, Scarborough

This comprehensive two day workshop is aimed at GPs, GP Registrars and other senior clinicians working in primary care who are looking to increase their skills and confidence in managing palliative care patients. Now in its sixth year with consistently excellent feedback, each day complements the other although both are suitable as stand-alone study days. The course maps to the RCGP curriculum and will provide detailed information on the MDT and other support agencies available. It will include facilitated small group work and case studies with the opportunity to refine skills between the study days and bring cases for reflection.

Booking and registration for all courses is via the following link:

<https://store.york.ac.uk/product-catalogue/hull-york-medical-school/hyms-short-courses>

Places on all courses are limited so please book early. For queries contact Jackie Houlton: [jackie.houlton@hyms.ac.uk](mailto:jackie.houlton@hyms.ac.uk)

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## Clinical Pharmacists in General Practice Programme

There is still funding available through NHS England Clinical Pharmacists in General Practice programme. The national programme supports practices with the cost of recruitment, employment, training and development of clinical pharmacists and the development of the employing / participating practices.

The next deadline for applications (wave 7) is **23<sup>rd</sup> November 2018**, with the deadline for wave 8 falling on **22<sup>nd</sup> February 2019**. More information, application guidance and forms can be found here:

<https://www.england.nhs.uk/gp/gpfv/workforce/building-the-general-practice-workforce/cp-gp/>

If your practice is interested in this opportunity you can contact Melissa Brolls, Project Officer for Primary Care at NHS England North Region for support with understanding the criteria and submitting an application via [melissa.brolls@england.nhs.net](mailto:melissa.brolls@england.nhs.net).

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## GP Expressions of Interest Sought for New North Lincolnshire Frailty Service

Safecare Network in North Lincolnshire will soon be providing a frailty service known as SAFE (Specialist Assessment of Frail and Elderly). This will be a GP led service with input and oversight from consultant geriatricians. The service will perform holistic geriatric assessments, identifying problems and determining interventions to treat them or lessen their burden, as well as developing care plans to support the management of deteriorating health.

Clinics will be held in GP surgeries, care homes and patient homes, dependent upon the needs of the patient. The service is expected to be implemented progressively across the 3 care networks during August and September.

Funding is available to support GPs in gaining accreditation as GPSIs in Geriatric Medicine, covering the RCP Diploma in Geriatric Medicine exam cost as a minimum. The service will offer “on the job” training and supervision for the GPs to promote high standards and assist in the accreditation process. All GPs involved will be encouraged to join a virtual and occasionally face to face team learning environment.

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There will be flexibility to the working arrangements available with both planned clinics and ad hoc patients to be seen. Provisional clinic plans are for 4 patients to be seen per 4 hour clinic. Patients will be booked in 45 minute slots with an hour at the end to allow for clinic overruns, admin and follow up issues. Evening and weekend clinic sessions and visits will be available to suit patients and their relatives, as well as busy GPs who have reduced availability during daytimes.

The pay rate will be £90/hour. Higher rates of pay will be negotiable for GPs accredited with GPwSI status.

Safecare Network is seeking expressions of interest from GPs as soon as possible. Please contact Safecare's manager, Julie Killingbeck via [j.killingbeck@nhs.net](mailto:j.killingbeck@nhs.net) or Safecare's chairperson Toby Blumenthal via [toby.blumenthal@nhs.net](mailto:toby.blumenthal@nhs.net) to express an interest or have a chat about potentially working for the service.

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## International GP Taster Weekend September 2018 – Call for Host Practices

CCGs in Hull and the East Riding of Yorkshire are planning a north bank Taster Weekend for recruitment of international GPs at the end of September 2018. Currently the itinerary is being firmed up and there is an opportunity for practices to get involved by hosting a doctor.

It is hoped that 16 doctors will be invited across for the weekend (8 East Riding and 8 Hull) so they can learn more about the scheme and the local area and how a chance to see how primary care is delivered in the UK.

Practices interested in hosting a GP on the Taster Weekend need to respond by **31<sup>st</sup> July 2018** by completing the [expression of interest form](#) which also contains further information about plans for the weekend and what is expected of host practices.

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## Legal Literacy Course for GPs

This one day masterclass is designed to enhance knowledge of the Mental Capacity Act 2005, and to ensure GPs are equipped to make safe decisions in both routine and complex cases where capacity and/or liberty is a presenting factor.



The course will look at how to keep records and evidence assessments that demonstrate high quality care and treatment and that protect individuals. Consideration will include the Mental Health Act 1983, The Care Act 2014, The Children Act 1989 and common law all interface with the MCA.

The course will be interactive, with small group work and discussions throughout. Realistic case studies and exercises will be used, but you are also invited to bring your own examples for discussion.

The course will run on various dates at a range of locations in September 2018, with the closest venue to our region being Leeds (Wednesday 12 September and Friday 21<sup>st</sup> September). Further information can be found on the [course flyer](#) (pdf).

This is a free event to attend, commissioned by NHS England North and to book a place please email: [England.northsafeguarding@nhs.net](mailto:England.northsafeguarding@nhs.net)

## PRACTICE MANAGEMENT

### Criminal Finances Act - Guidance for Employers

New offences known as 'corporate criminal offences' came into force on 30<sup>th</sup> September 2017, under which companies and partnerships can potentially be caught under the 'failure to prevent the facilitation of tax evasion' measures deemed to have been undertaken by employees and 'associated persons'. 'Associated persons' are employees, agents and others who perform services for or on behalf of the business, such as contractors, suppliers, agents and intermediaries.

Guidance including who could be affected by these rules and how employers can protect themselves from falling foul of the legislation can be found in an article by Justine Riccomini of ICAS (The Institute of Chartered Accountants of Scotland) which can be found [here](#).

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## NHS E Learning Programme for e-RS



New e-learning is available to help healthcare staff understand the NHS e-Referral Service.

The NHS e-Referral Service (e-RS) is a national NHS IT system that enables patient referrals, primarily from GPs to first hospital or clinic appointments, to be booked in to health care services at a location, date and time to suit the patient.

e-RS allows patients to choose their initial hospital or clinic appointment, book it in the GP surgery at the point of referral or book it themselves online or via a national telephone line. Patients can then cancel or change the appointment if required. It enables clinicians to provide the best care in the most appropriate place, transforms the referral process and improves the patient journey.

Health Education England e-Learning for Healthcare has worked with NHS Digital to develop learning content that will give NHS and healthcare staff a better understanding of e-RS and the functionality that is available to them. It will also show the benefits of using the system for both patients and professionals and how it can be used to support a streamlined referral process.

Content will continue to be developed by NHS Digital to expand the e-RS resources available to end users. Further information and guidance on the e-RS programme can be found on the [NHS Digital website](#).

For more information about e-RS and how to access the programme please visit:  
<https://www.e-lfh.org.uk/programmes/e-referrals/>

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## GPC Update on Premises

The General Practice Committee (GPC) of the BMA has reiterated its guidance to practices in NHS Property Services (NHS PS) and Community Health Partnerships (CHP) premises following coverage of the issue in Pulse.



In respect of current charges, the GPC's advice is that practices should only make payments to both the extent that they are both satisfied as to the legal basis upon which they are payable and also their accuracy. Their advice continues:

“GPC are aware that this issue is causing practices significant stress, and we would like to reassure you that GPC will stand with you in circumstances where, despite there being no legal basis to do so, NHSPS seek to enforce these charges. To this regard, if NHS PS take action to enforce charges against you please let us know immediately (email [gpcpremises@bma.org.uk](mailto:gpcpremises@bma.org.uk)).”

Further guidance and updates are available on the BMA website; please follow this [link](#).

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## The Potentially Avoidable Appointment Tool

NHS England has launched the new fully automated Potentially Avoidable Appointment Audit tool, which is free for all practices in England. The audit is a simple tool for reviewing workload within practices and exploring how things might be managed differently in the future. So far, more than 1,000 GPs across 400 practices have audited their appointments.

All practices can register for the audit by going to <https://pcfaudit.co.uk/login>. To find out more about why practices are using the audit, results so far, changes they have made, and case studies, see [here](#).

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## Tier 2 Visa Sponsorship – Opportunity to Express Interest in Funding

The NHS England National Team are looking at financially supporting any organisations who wish to become registered for Tier 2 Visa Sponsor. Any organisation which holds this status can then employ a doctor who is here training but needs a sponsor in order to remain.

If your practice is interested in becoming a Tier 2 Visa Sponsor, please email your primary care lead at your CCG and copy Helen Phillips at NHS England. The NHS local team will be collating numbers within the next couple of weeks so please act fast as support (as ever!) is likely to be limited to a certain number of organisations that are interested.

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If you would like to know more about employing a GP on a Tier 2 Visa, Northamptonshire LMC produced some really helpful notes last year which can be accessed [here](#).

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## **Violent Patients – GMS/PMS Regulation Amendments**

Following agreement in the last round of national negotiations, the amendments to the GMS and PMS regulations in England have now been agreed and laid before Parliament. These have been released on gov.uk but will not come into force until 1 October 2018.

One of the main changes is to the section around removing a patient who is violent; these changes have been made following the concern of LMCs and GPC that some practices were left vulnerable when patients with a recent history of violence registered with a new practice without the practice being aware of the situation. GPC was successful in agreeing two key changes to resolve this situation:

1. It has been agreed that a patient having a violent patient flag on their record, is reasonable grounds for a practice to refuse to register that patient (using paragraph 21 of part 2 of the regulations 'refusal of applications for inclusion in the list'). This is an agreement around interpretation of the regulations and can therefore be implemented immediately by practices.
2. There is a new addition to the regulations that if a practice does register someone with a violent patient flag on their record, they may remove them immediately by giving notice to the Board. This will come into effect in October.

## GUIDANCE & RESOURCES

### LMC Guide to Solicitors with Experience in GP Partnership Agreements



We have just published our new resource for practices – [Guide to Solicitors with Experience in GP Partnership Agreements](#) – which will help with accessing legal advice on producing a new partnership agreement, or with reviewing or updating an existing agreement.

Partnership agreements can be a cause of considerable problems for all parties involved if things go wrong or if the agreement is out of date, so it's crucial to get the right support with what can be a complex area of law. The guide presents details of legal firms with experience in supporting practices, along with information about their services and costs.

Download [Guide to Solicitors with Experience in GP Partnership Agreements](#) (pdf).

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### Patient Participation Group Resources

NHS Hull CCG and Healthwatch Kingston upon Hull have recently shared a number of resources which practices will find useful in working with their Patient Participation Groups. The [BMA's Patient and Public Involvement: A Toolkit for GPs](#) (pdf) provides guidance on how to involve patients and the public in healthcare planning and delivery. Healthwatch Reading's [Toolkit for Patient Participation Groups](#) (pdf) is a very comprehensive guide to help PPGs understand more about their role and work together more effectively.

The footer consists of several horizontal bars in different colors: a thick yellow bar, a thin orange bar, a thin red bar, and a thick teal bar.

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## Learning from Serious Case Reviews in Yorkshire and the Humber

NHS England North (Yorkshire and the Humber) have shared the following good practice regarding learning from Serious Case Reviews which practices may find useful. GPs and other primary care practitioners are urged to:

- Ask any adult attending with a child, where abuse is a possible cause for that attendance (such as repeated urinary tract infections, change in urinary continence, genital discharge, etc.), whether or not the adult has any concerns about other parties who care for the child at other times, and record that enquiry and any information obtained in the child's medical record.
- Seek and record the "voice of the child" as to the cause of their symptoms, where a child is old enough to provide a history, particularly when they may arise from an injury.
- Record detail of any safeguarding concerns in the record of the child concerned, and those of the rest of the family, using a suitable repository, such as the Safeguarding Node in SystemOne, or its equivalent in other GP IT systems.
- Enquire into any adverse impact that mental or physical health problems might be having on an adult's ability to care for any children for whom they are responsible.
- Record the identity of any adult attending with a child and relationship to the child, at all attendances and home visits.

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## Amesbury Incident Advice Update

Public Health England have issued guidance to be shared nationally following recent events in Amesbury in the form of a [factsheet for GPs](#) and more detailed advice on [diagnosis and early management in organophosphate chemical incidents](#).

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## Low Value Appraisal Guidance

A new guidance document on supporting doctors who undertake a low volume of NHS



general practice clinical work has been launched by NHS England and is available [here](#) (pdf). Mark Sanford-Wood, GPC England deputy chair, has also written a blog about the new guidance, which can be accessed [here](#).

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## New Clinical Roles Guide

[A guide to new clinical roles](#) has been published on the BMA website. It has been designed to provide members with a broad outline of the new clinical roles that are emerging across the NHS, such as Physician Associates (PAs), Advanced Clinical Practitioners (ACPs) and Clinical Pharmacists. It also provides suggestions of further reading.

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## CQC Recommendations on the Management of Controlled Drugs in Health & Social Care Services

The CQC has released their annual report on controlled drugs including four new recommendations:

1. Prescribers should ask patients about their existing prescriptions and current medicines when prescribing controlled drugs. Where possible, prescribers should also inform the patient's GP to make them aware of treatment to minimise the risk of overprescribing that could lead to harm.
2. Commissioners of health and care services should include the governance and reporting of concerns around controlled drugs as part of the commissioning and contracting arrangements so that these are not overlooked.
3. Healthcare professionals should keep their personal identification badges and passwords secure and report any losses as soon as possible to enable organisations to take the necessary action.
4. Health and care staff should consider regular monitoring and auditing arrangements for controlled drugs in the lower schedules, such as Schedules 4 and 5, to identify and take swift action on diversion.

Read the full CQC report [here](#).

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## CONSULTATIONS

### GP Partnership Review Issues Call for Evidence as Chair Visits Humber Region



*Dr Nigel Watson meets Humber region GPs at Humberside LMC (July 3<sup>rd</sup> 2018)*

The GP partnership review has issued a call for evidence, along with its key lines of enquiry, in the first publication to be produced by review chair Dr Nigel Watson.

The review will consider and make recommendations on:

1. The challenges currently facing partnerships within the context of general practice and the wider NHS and social care, and how the current model of service delivery meets or exacerbates these.
2. The benefits and shortcomings of the partnership model for patients, the population, partners, salaried GPs, locum GPs, broader practice staff and the wider NHS.
3. Drawing on 1 and 2, consider how best to reinvigorate the partnership model to equip it to help the transformation of general practice, benefitting patients and staff including GPs.

Dr Watson visited Humberside LMCs in July and met both the Committee and groups of other GPs but we are keen that any local GP who has views on the above should feed them in directly to the review team. This can be done via email

to: [GPPartnershipReview@dh.gsi.gov.uk](mailto:GPPartnershipReview@dh.gsi.gov.uk)

You can download the call for evidence document [here](#) (pdf) and read Dr Watson's latest blog about the review [here](#) (pdf).

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## The Future of QOF in England

A QOF review was established at the request of GPC and following debate at the LMC conference. A report has now been produced which outlines a number of potential options for the future. The report is intended to 'stimulate public discussion' and will inform, but not determine, negotiations between NHS England and GPC in the coming months. The report can be read here:

<https://www.england.nhs.uk/publication/report-of-the-review-of-the-quality-and-outcomes-framework-in-england/>

We would strongly encourage local GPs to read the report and send any comments to [england.gofreview@nhs.net](mailto:england.gofreview@nhs.net) before **31<sup>st</sup> August 2018**.

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## Future Funding Arrangements for Digital Services

GPC has persistently called for NHS England to take action to address the many concerns expressed about the model used by GP at Hand/Babylon in London. NHS England have outlined a number of changes that could be made to GMS funding which would reduce the payments per patient made to digital-first models of care provision. However some of these suggestions would have an impact on other practices, so the pros and cons need to be considered carefully.

The consultation document is less explicit about seeking views on a change to the out of area regulation. This is because such a change would require a much bigger formal consultation, but also there is strong political support for the ability of patients to choose their practice in this way. However we know that many GPs are concerned about this regulation and there is an opportunity to give comments about this in the first question of the consultation.

We would strongly encourage local GPs to take part in the consultation which can be accessed at <https://www.engage.england.nhs.uk/survey/digital-first-primary-care/>. The survey will close on **31<sup>st</sup> August 2018**.



If you are willing to share any comments submitted to the above consultations, we would be grateful if you could copy the LMC in via [humbersie.lmcgroup@nhs.net](mailto:humbersie.lmcgroup@nhs.net) so that we are able to understand fully the breadth of local views on these issues.

## GENERAL NEWS

### BMA Award for local GP, Dr Andrew Green



Dr Andrew Green has been awarded the BMA Association Medal in recognition of his outstanding and sustained national service.

Currently GPC policy lead for clinical and prescribing, Dr Green was previously the chair of the clinical and prescribing subcommittee. In both roles he has lead for the GPC and the wider BMA on a number of significant issues relating to the quality of general practice.

Supporting his nomination for the award, GPC UK Chair Dr Richard Vautrey said:

*"His expertise, wisdom and clarity of thought are all well recognised and respected. He aspires to support GPs and their teams provide holistic care that is personalised to individuals. As a committee chair, and now policy lead, he works to empower members of his group, giving them lead responsibilities and enables a sharing of the workload within the group. Andrew is an outstanding member of GPC and his LMC and his services fully deserve recognition."*

Our warmest congratulations to Dr Green for his award and our thanks to him for his

ongoing contribution to the LMC locally.

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## Find Us on Facebook

You can now get updates from Humberside LMC via our new Facebook page! We'll be using the page to post updates, information and tips for practices so give our page a like at [www.facebook.com/HumbersideLMC](http://www.facebook.com/HumbersideLMC).

We know that many surgeries in the Humber area are communicating via Facebook so this new Humberside LMC page gives us another way to communicate with practices in the Humber region.

[Visit Humberside LMC on Facebook.](#)

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