



The Humberside Group of Local Medical Committees Ltd

Newsletter: 10 October 2014

The LMC Newsletter is a round-up of interesting news and information for GPs and Practice Managers in Hull, East Yorkshire, North Lincolnshire and North East Lincolnshire. You can read from top to bottom or alternatively, use the contents section to jump to items of interest.

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FEES & CHARGES

Dispensing doctor feescale changes 2014-15

The dispensing doctor feescale, which includes an envelope of £174.2m for dispensing fees, has been published and came into effect from 1 October 2014 and onwards for England and Wales. The [feescale](#) and further information is available on the [BMA website](#).

GUIDANCE AND RESOURCES

Emergency drugs for GP practices

Nigel Sparrow is CQC's Senior National GP Advisor. He has drafted a number of guidance notes which are aimed at tackling some of the common myths about CQC inspections of GP and out-of-hours services. [This summary](#) addresses some questions about the emergency drugs that should be available to GPs in their practices and in the doctor's home visit bag.

LMC Advice Sheet – Curtains, Carpets & Hand Washing Signs in GP Surgeries

This [advice sheet](#) summarises the available guidance and offers practical advice in relation to curtains around examination couches, carpets and hand washing signs.

Advice & Information for Employers of Nurses and Midwives

The Nursing & Midwifery Council has produced [this guide](#) for all employers of nurses and midwives. It covers:

- your responsibilities as an employer
- how to use and check the NMC register
- what steps you should take during the recruitment process
- what the NMC means by 'fitness to practise', and
- how to proceed if you are considering making a fitness to practise referral to the NMC
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BMA Publishes FAQs in relation to GP Contract Changes 2015/16

A set of FAQs for the 2015/16 contract agreement have been published on the BMA website and can be accessed [here](#).

PRACTICE MANAGEMENT

GP electronic annual practice declaration (eDec)

NHS England has written to practices to inform them that the 2014/15 GP electronic Annual Practice Declaration (eDec) will be open for submissions over a five week period from **Monday 6 October** to **Friday 7 November 2014**. The letter included a set of FAQs. All GP practices are required to submit their eDec electronically through the [primary care website](#).

76% of the eDec has been pre-populated with responses provided from last year's eDec submission – including the catchment area and any updates which practices have since made to it when in the GPOS module. The remainder are new questions which relate to recent changes to the GP contract. It will be necessary for practices to check pre-populated responses, amending these where necessary, and also respond to the new questions in order to submit their eDEC.

An updated GP practice eDEC user manual has been published on the website. A link to this can be found on the website's introduction to eDEC web page. If you have any questions about the declaration please contact the NHS England Area Team.

GP Clinical IT Systems – Deed of Undertaking for Data Processing

A Deed of Undertaking for Data Processing has been published by the Health and Social Care Information Centre (HSCIC) in order to clarify the relationship between practices and system suppliers. General practices as data controllers are responsible for the data held within their GP clinical system, and for any decisions relating to accessing or processing these data. System suppliers have been commissioned to process data held on practice systems on behalf of practices.

The Deed of Undertaking is a generic agreement covering all data processing undertaken by suppliers on behalf of practices. A Deed has been signed by each general practice system supplier, and can be viewed and downloaded from the [HSCIC website](#). The document has been agreed in principle by the Joint GP IT Committee of the BMA and RCGP (JGPITC), as well as the Information Commissioner's Office, with input from the Medical Defence Organisations.

Choice of GP clinical system

The GPC has been made aware of instances of CCGs exerting undue pressure on practices to choose a particular clinical IT system.

Practices are reminded that the GP Systems of Choice (GPSoC) framework and GMS contractual arrangement entitles them to a guaranteed choice of clinical system from a range of accredited options. Also, CCGs are responsible for providing practices with equivalent levels of support following the exercise of their choice.

The LMC is not aware that this is the case in any of our 4 local CCG areas. However, if any practice does feel that they have been placed under inappropriate pressure by their CCG, please contact the LMC for advice.

TRAINING & EVENTS

Co-Commissioning – What does it mean for my Practice? An LMC Event for GPs and Practice Managers

Many CCGs are preparing to take on primary care commissioning roles. GP News reported recently that *“about 9 out of 10 CCGs have made a bid for a role in commissioning primary care and NHS England believes a third of CCGs are ready to take full control of primary care.”*

The stated aim of primary care co-commissioning is to harness the energy of CCGs to create a joined up, clinically-led commissioning system which delivers seamless, integrated out-of-hospital services based around the needs of local populations. It is billed as the beginning of a longer journey towards place based commissioning.

For this year, the scope of primary care co-commissioning is general practice. The four CCGs in our area (Hull, East Yorkshire, North East Lincolnshire and North Lincolnshire) were invited to submit expressions of interest in one of three possible models:

- 1) Greater CCG involvement in NHS England decision making
- 2) Joint decision-making by NHS England and CCGs
- 3) CCGs taking on delegated responsibilities from NHS England services

Clearly, the changes on the horizon will be different for each CCG area but are certainly of interest to all GP Practices.

The LMC is hosting a seminar on **22 October from 12 noon to 2.30pm** to provide more information about what co-commissioning is, the role of federations in taking on co-commissioned work, potential advantages & disadvantages, examples from around the country of how it is working, how conflicts of interest can arise and exploring some of the potential pitfalls and how to avoid them. There will also be input from the four CCG areas about their own decisions regarding co-commissioning and progress to date.

The cost of the seminar is £25. [Click here to book your place online](#) or [email us](#).

Representing Prison GPs Conference - 6 November 2014

Representing Prison GPs is a one day conference giving a comprehensive update on key issues for prison GPs. This conference will be of interest to all doctors performing primary medical services in prisons, including salaried GPs and independent GP contractors and is open to both BMA members and non-members to attend. Confirmed speakers include:

Nigel Newcomen CBE, the Prisons and Probation Ombudsman, and Kate Davies OBE, Head of Public Health, Armed Forces and their Families and Health and Justice Commissioning, NHS England.

For more information, please visit the [BMA website](#).

Induction & Refresher Scheme - Funding agreed to support GPs wishing to return to UK Practice

Yorkshire and the Humber School of General Practice has now secured funding to support GPs whilst they undertake the training which is for up to 6 months whole time equivalent. Those GPs on the scheme will be encouraged to train in areas of the School where there is the greatest need for GPs. Funding will be targeted to those who take up posts in these areas. The GP will be paid £46,166 WTE per annum, this includes NI and superannuation. The Trainer will receive the standard Trainers Grant.

The scheme defines two categories of doctor:

1. Those requiring INDUCTION training – any doctor with a CEGPR with no UK NHS or Defence equivalent experience.
2. Those requiring REFRESHER training – any doctors who have trained as GPs in the UK, but have not practiced for at least 2 years.

GPs wishing to apply for the scheme will need to follow the application process which is detailed on [the NRO website](#), with assistance if required from the local I & R Lead [Dr Andy Godden](#). Once the doctor has passed all stages and demonstrated the required competencies, the scheme lead will assist in finding a suitable placement in an approved training practice, with an approved GP Trainer supervising the training. There is an approved set of competencies that will need to be demonstrated by the end of training, which the Trainer will assist with. There is also an exit exam.

Over 50s Event for GPs – East Riding CCG Event

East Riding CCG is organising an event for the older GPs in the East Riding to review if there is anything the CCG can do locally to delay them from retirement.

This event is to take place on the 27 November @ 1pm – 5pm (lunch included) at the Beverley Conference Centre (Neill Room). If you are an East Riding GP interested in attending, please contact [Julie Joss](mailto:julie.joss@nhs.net) (julie.joss@nhs.net) to book your place.

CLINICAL ISSUES

NICE guidelines: the manual – publication

The [new manual](#) for developing NICE guidelines was published on 1 October 2014. The new manual will be used in future to develop all NICE guidelines, including clinical, medicines practice, safe staffing, public health and social care topics.

The manual will be implemented from 1 January 2015 for all guidelines that start from this date. Topics that are in the final stages will continue to be developed to their current processes and methods until completion. Other topics already in development will undergo a planned transition to the new manual, and NICE will be in contact with registered stakeholders regarding the implementation schedule for these topics.

GENERAL NEWS

NHS Innovation Challenge Prizes

The 2014/15 NHS Innovation Challenge Prizes, worth £650,000 in prize money with over £100,000 of in-kind mentoring from industry, opened on 15 September 2014. Applications must be received by 7 November 2014. This year's programme calls for innovations in the areas of diabetes, infection control, use of technology, rehabilitation and digital patient and clinician engagement. The judges are looking for small innovations that could make a big difference as part of their 'Acorn' challenges. [Click here to view the flyer](#)

Visit the [Innovation Challenge web page](#) for more information about how to apply and for examples of previous Challenge winners.

The state of medical education and practice in the UK report: 2014

This week, the GMC produced their annual report on [the State of Medical Education and Practice in the UK](#). Their aims in publishing this are to:

- use GMC and other data to provide a picture of the medical profession in the UK and to identify some of the challenges it faces
- promote discussion and debate about some of the practical steps the GMC and others could take in better supporting doctors and improving patient care

This year, the report provides a more extensive range of reference data, focusing on the shape of the workforce and patterns of complaints to the GMC.

In a change from previous reports, they also provide a more qualitative look at issues raised through feedback to the GMC's regional liaison service and offices in Northern Ireland, Scotland and Wales and explore potential areas of risk and opportunity in medical practice.

NHS Hull CCG award nominations

Improvements in local healthcare have led to NHS Hull Clinical Commissioning Group (CCG) being named as finalists for two national awards. The CCG has been shortlisted for the coveted Health Service Journal 'CCG of the Year' award and is in the running for the NHS Regional Leadership Awards 'Governing Body of the Year' for the Yorkshire and Humber area. The nominations come following the CCG's first year of creating a Healthier Hull; which has seen a number of CCG led innovative projects and partnerships.

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