JUNE 2016 NEWSLETTER

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The clock is ticking. The LMC Conference resolution S.20 required that the government agree to accept the BMA's 'Urgent Prescription for General Practice' by 20th August 2016 and in the event of their not doing so for the GPC to ask the BMA to ballot the profession on its willingness to sign undated resignations and take industrial action. There is much activity behind the scenes to take this forward, but we have no firm news yet.

What work falls outside the contract and can therefore be declined?

There are many services in England which are the subject of enhanced services agreements locally. Logically this would indicate that they do not fall within the essential and additional services covered by the GMS contract. You should look at this updated list (at https://www.bma.org.uk/advice/employment/gp-practices/quality-first/assess-and-negotiate-your-workload/enhanced-services) and consider very seriously whether your practice should continue to provide these services without payment. Perhaps, to make the transition easier, patients should be given notice (website, posters etc) of your intention to drop certain services.

Remember, the risk of taking on seemingly small bits and pieces of extra work is that:

- They all add up.
- They are occasional and therefore may be hard to do properly.
- Secondary care will draw back even more on the assumption that GPs will do it.
- It is the bottom line, not the top line, figure that matters most.

Out of hours service

In brief, you should be aware that SWAFST has decided that it must give notice on its contract for running the OOHs service in this area. The notice will expire in June 2017; until then the service will continue as planned. In the meantime it will be up to the CCG to decide how best to proceed.

Queen's Birthday Honours List

We congratulate **Dr Simon Opher** from the May Lane Surgery in Dursley on his being awarded the MBE for "services to healthcare and patients' wellbeing in Gloucestershire".

Appraisal records

<u>CQC Access</u>. For the avoidance of doubt, the CQC has no right to access the appraisal records of GPs. Appraisal documentation should be entirely confidential between the doctor, the appraiser and the responsible officer. The GMC is responsible for ensuring that individual doctors maintain appropriate standards. The CQC's duty is not to inspect individual doctors but to inspect practices. Any attempt, therefore, to pry into confidential information about individuals is inappropriate and wrong. If any CQC inspector suggests otherwise please dispute the assertion, take his name and give us an urgent call. This LMC will be taking a very tough line with any inspector who tries this on.

<u>Uploading the whole portfolio to RMS</u>. The LMC is challenging the requirement to upload the whole appraisal portfolio going forward and in retrospect. We will let you know how it goes.

GP funding changes

The BMA has produced a 'Focus on...' document about funding changes this year in general practice. You can read it here. It gives the figures, nationally, for the additional funding included to cover CQC fees, professional indemnity fees, national insurance contributions etc. It's good to know that the issue has been addressed, at least in part.

HR tips

Congratulations if you have managed to find a salaried GP to fill a gap. However, make sure that the contract (or at the very least the heads of agreement) are signed by that GP before he or she starts work. Similarly, when a new partner joins the practice a new partnership agreement must be properly signed by all partners before that new partner starts work. You may only discover how important these two things are if relationships break down; by then it will be too late.

News from the GPC

Implementation of the General Practice Forward View (GPFV). A series of one day workshops are being held around the country to enable LMCs and CCGs to address strategic and commissioning issues in the context of Sustainability and Transformation Plans (STPs), and for clinicians and practice managers to address issues at practice level. These two workshops will be held in parallel on the same day. The prospective place for our area is Bristol and the dates (yet to be confirmed) will be either 1st September or 12th September.

<u>GPs as specialists</u>. GPC <u>and</u> the RCGP have been working together to lobby for changes to primary legislation in the UK to ensure general practice is recognised as a specialty. They have been supported by the European Union of General Practitioners (UEMO). (How much ice this support will cut after Brexit remains to be seen.)

<u>Controlling workload</u>. For practical ways in which practices can manage workload to deliver safe care, the BMA has launched a Quality First Web Portal, aimed at LMCs, practices and individual GPs. This provides a single portal, including 'how to' guides, with real case examples of positive change. Following announcement at the LMC conference, the pages are now live on the new BMA website at

(<u>www.bma.org.uk/qualityfirst</u>) They cover areas including:

- Managing inappropriate workload
- Guidance on establishing or joining a GP network or federation
- Collaboration and working at scale
- Technology new ways of working
- Patient empowerment
- Assessing and negotiating workload

The GPC intends to add to and evolve this resource from feedback and new examples provided from around the country. The original template pack has been updated and also converted to Word, with additional SystmOne, EMIS and Vision web templates ready to be exported into practice systems with ease. This should enable automated letters to push back on inappropriate workload. In time, this site will become a dynamic noticeboard of LMC and practice views and ideas - part of creating a sense of empowerment and resilience for GPs and practices at a local and national level. GPs and practices can email GPworkload@bma.org.uk with examples of effective workload management so that the GPC can add them to the collection fr the good of all

BMA members can also share their experience via Connecting Doctors (formerly 'BMA Communities') and you can join the conversation on Twitter via #GPworkload which is the hashtag GPC will be using to promote this work and engage GPs around the country. Your feedback is valuable, will be listened to and taken on board, so do take the time to send your thoughts in to GPworkload@bma.org.uk.

<u>DWP guidance on providing medical reports</u>. The DWP has updated the guidance for Healthcare professionals on providing medical reports to DWP and <u>this is available online</u>.

Federation of LMCs Buying Groups

Reminder: all practices in Gloucestershire are automatically members of the Federation and can take advantage of the reduced prices charged by their authorised suppliers. There is no compulsion but if you are trying to reduce practice expenses, especially on frequently purchased items and services, you can hardly do better than to visit the <u>Federation's website</u>. 'Time spent in reconnaissance is rarely wasted' (military dictum).

Workload in UK primary care: a retrospective analysis of 100 million consultations in England, 2007–14 by F D Richard Hobbs, Clare Bankhead, Toqir Mukhtar, Sarah Stevens, Rafael Perera-Salazar, Tim Holt, Chris Salisbury, on behalf of the National Institute for Health Research School for Primary Care Research

What follows is a summary of the above paper, which you can read in full on our website if you have time.

<u>Background</u>. Primary care is the main source of health care in many health systems, including the UK National Health Service (NHS), but few objective data exist for the volume and nature of primary care activity. With rising concerns that NHS primary care workload has increased substantially, we aimed to assess the direct clinical workload of general practitioners (GPs) and practice nurses in primary care in the UK.

<u>Methods</u>. We did a retrospective analysis of GP and nurse consultations of non-temporary patients registered at 398 English general practices between April 2007 and March 2014. We used data from electronic health records routinely entered in the Clinical Practice Research Datalink, and linked CPRD data to national datasets. Trends in age-standardised and sex-standardised consultation rates were modelled with joinpoint regression analysis.

<u>Findings</u>. The dataset comprised 101,818,352 consultations and 20,626,297 person-years of observation.

- The crude annual consultation rate per person increased by 10. 51%, from 4. 67 in 2007–08, to 5. 16 in 2013–14.
- Consultation rates were highest in infants (age 0–4 years) and elderly people (≥85 years), and were higher for female patients than for male patients of all ages.
- The greatest increases in age-standardised and sex-standardised rates were in GPs, with a rise of 12. 36% per 10 000 person-years, compared with 0. 9% for practice nurses.
- GP telephone consultation rates doubled, compared with a 5. 20% rise in surgery consultations, which accounted for 90% of all consultations.
- The mean duration of GP surgery consultations increased by 6. 7%, from 8. 65 min (95% CI 8. 64 8. 65) to 9. 22 minutes (9. 22 9. 23), and overall workload increased by 16%.

Interpretation. Our findings show a substantial increase in practice consultation rates, average consultation duration, and total patient-facing clinical workload in English general practice. These results suggest that English primary care as currently delivered could be reaching saturation point. Notably, our data only explore direct clinical workload and not indirect activities and professional duties, which have probably also increased. This and additional research questions, including the outcomes of workload changes on other sectors of health care, need urgent answers for primary care provision internationally.

BMA Sessional GP Newsletter

The June edition of the sessional GPs e-newsletter was published on 9 June and is <u>available online</u>. The Chair's <u>message</u> focuses on the LMC conference and the motion that was successfully carried to reject plans for a fixed indicative minimum locum rate. Other blogs highlight rising indemnity costs and locum pre-employment checks and top

tips for working to time as a peripatetic locum. The e-newsletter also covered the GPs event at Westminster and highlighted BMA learning opportunities.

Ambulance Response Programme Clinical Coding Trial at SWASFT

We have lately (16th June) received a letter from the South Western Ambulance Service NHS Foundation Trust announcing that there 'is to be' a 12 week (minimum) trial of a new call coding set 'starting in April 2016'. We have been asked to tell you about it! If this news has not already reached you and if the trial is still on-going (I am still trying to find that out) the details are now on our website.

Occupational Health service for GPs etc

NHS England is expected to commission a new national occupational health service in September which will fund:

- Occupational Health assessments for doctors and dentists on the National Performers List (NPL) and virology, vaccinations and immunisations for doctors (GPs), dentists and optometrists on the NPL.
- Advice on exposure to Blood Borne Viruses for all primary care staff (including trainees) including specialist management of those that have Blood Borne Viruses.
- Where doctors and dentists applying to join the NPL need additional Occupational Health clearance due to a specific health need/s, NHS England will fund an enhanced Occupational Health assessment and fund support for work related health issues once on the list.

A new bowel cancer home testing kit

The Faecal Immonochemical Test (FIT) tests for hidden blood in stool samples, which can be an early sign of bowel cancer. Following a successful pilot involving 40,000 people, the UK National Screening Committee recommended the test should be rolled out nationally. The test will now be offered to all men and women aged 60 to 74, every 2 years. It is said to be easier to use than the current home testing kit and is therefore expected to increase the response rate from the current 58% by approximately 10% (about 200,000 more people nationwide).

Interoperability of GP systems

We understand that there is, or shortly will be, interoperability available between EMIS Web and SystmOne and between Vision and EMIS Web. It may save you the unnecessary bother of changing suppliers unless you are planning a full merger with another practice

Forthcoming events

ACAS Training highlights in Gloucestershire over the next few months:

- 5 July <u>Managing Discipline & Grievance</u> Cheltenham
- 14 July <u>Human Resource Management for Beginners</u> Cheltenham
- 5 August Managing Absence at Work Gloucester
- 9 August Equality, Diversity and Discrimination: The Essentials Gloucester
- 10 August **Essential Skills for Line Managers** Cheltenham

Job opportunities

A list of recent job opportunity notifications is at Annex A. A full list of unexpired job adverts is at http://www.gloslmc.com/blog-job-vacancies.asp and links to them are also at Annex A for ease of reference.

Max's Musings

As his soldiers crossed the river Rubicon, thereby violating strict Roman laws forbidding generals from bringing their legions to Rome, Julius Caesar is reported to have said: 'alea iacta est' ('the die is cast'). Just so. For better or worse the UK is now committed to leaving the European Union. Everyone is now talking about preserving stability in such 'interesting times'. As the old adage goes: 'festina lente' ('make haste slowly').

The impact on the NHS in general and on general medical practice in particular can only be guessed at. The trumpeters of doom from both sides were playing shrilly enough, but will the 'Remain' side's predictions come true? Only time will tell. For myself I intend to hunker down and let those at a higher national level than I shall ever attain continue to fight for proper funding for us all, or a national system for moderating the incessant and unacceptable level of demand we all face.

Ah, yes. I can just remember the days when the motor car and public transport were not so widely available in our then-depressed rural area. That alone, I suspect, reduced the number of patients attending my surgery. Mind you, as I was the one with the car, I had more home visits to make – the telephone was unavoidable, even then. Now of course the rich and famous live here and even the less well-to-do have access to transport and to mobile phones (when the coverage works). So there is no escape.

More closely to home the appropriate adage might be: 'The floggings will continue until morale improves!'

And finally, to end on a Latin theme:

Semper suivus in excretam; sed alta variat (Always in it; only the depth varies).





JOB VACANCIES

The full list of current vacancies is at: http://www.gloslmc.com/blog-job-vacancies.asp.

GLOUCESTERSHIRE			Date posted	Closing Date
Corinthian Surgery	Cheltenham	Practice Nurse	8 Jun 16	26 Jul 16
Coleford Health Centre	Forest of Dean	Salaried GP or partnership	31 May 16	15 Jul 16
Drybrook Surgery	Forest of Dean	Partner or Salaried GP	23 May 16	16 Jul 16
Forest Health Care	Cinderford	Salaried or Partner GP	23 May 16	Open
Lechlade Medical Centre	Lechlade	Long-term Locum or Salaried GP	6 May 16	Open
Stroud Valleys Family Practice	Stroud	Salaried GP	26 Apr 16	Open
Church Street Practice	Tewkesbury	Locum GPs	19 Apr 16	Open
HQ ARRC	Innsworth, Gloucester	Locum GPs	19 Apr 16	Open until 4 Jul 16
Dockham Road Surgery	Cinderford, Forest of Dean	Partner or Salaried GP	19 Apr 16	Open
<u>Leckhampton</u> <u>Surgery</u>	Cheltenham	GP Partner	18 Apr 16	Open
Tewkesbury	Gloucestershire	Choice+ rota	9 Mar 16	Open
Rowcroft Medical Centre	Stroud	Partner or salaried GP	11 Feb 16	Open
Frampton on Severn	Glos	Full time partner	2 Feb 16	Open
Church Street Practice	Tewkesbury	Salaried GP or Partner GP	20 Jan 16	Open
GP Retainer Scheme	Gloucestershire	GPs (plural)	13 Jan 16	Open
<u>Brockworth</u>	Gloucester	Partner or salaried GP	5 Jan 16	Open
ELSEWHERE				
Frome Medical Practice	Somerset	Home working GPs	22 Jun 16	30 Sep 16
Saltash Health Centre	Cornwall	Partner or salaried GP	21 Jun 16	30 Sep 16
Windrush Medical Centre	Witney, Oxon	GP	21 Jun 16	30 Sep 16
Close Farm Surgery	South Gloucestershire	GP Partner	14 Jun 16	16 Jul 16
Clarence Park Surgery	Weston-super-Mare	GP Trainer and a Salaried GP	2 Jun 16	1 Oct 16
Kineton & Tysoe Surgeries	South Warwickshire	Salaried GP	4 May 16	1 Aug 16
St Johns House Med Centre	Worcester	2 x GP Partners	Updated 7 Apr 16	Open

<u>REMINDER</u>: If you are advertising with us and fill the vacancy please let us know so we can take the advert down.

Coleford Family Doctors

Coleford Health Centre, Forest of Dean, Glos

SALARIED GP, or partnership for suitable applicants

Our friendly, democratic practice seeks enthusiastic GP. The post will initially be salaried for a mutual assessment period.



We are located at the gateway to the ancient Forest of Dean, close to the beautiful Wye Valley and the Welsh Borders.

- Two experienced partners and two salaried GPs, happy to mentor newly qualified GPs or returners.
- 7,000 patients
- EMIS Web
- Full QOF points achieved 2015-16
- Excellent Nurse Triage and Nurse Prescribing
- Generous annual and study leave
- Salary dependent upon experience
- Flexible start date, willing to wait for suitable candidate
- Part dispensing
- Modern, purpose-built & recently refurbished health centre, owned by NHS Property Services. No buy in costs to potential partner
- Good road links to rest of Gloucestershire , South Wales and Bristol

Informal enquiries and visits welcome.

To apply, please send CV and covering letter to:

Bridget Docking, Practice Manager, Coleford Health Centre, Railway Drive, Coleford, Glos. GL16 8RH Tel: 01594 838101

or email: bridget.docking@nhs.net

Closing date: Friday 15th July 2016 www.colefordhealthcentre.nhs.uk

Practice Nurse / Nurse Prescriber Corinthian Surgery St Paul's Medical Centre

20 hrs over 5 days Monday - Friday. Salary according to experience

An opportunity has arisen for a well-motivated and enthusiastic Practice nurse to join the nursing team in our friendly surgery.

The role will include a mixture of Treatment Room, the management of Chronic Disease, and Minor Illness Clinics (Triage).

The ideal candidate will be an experienced Practice Nurse with Minor Illness qualifications.

Applicants will need to be proactive in the development of nurse competencies to meet practice needs.

Please call 01242 215423 for an application pack

Closing date for applications 20th July 2016



The Locality Health Centre & Clarence Park Surgery Weston-super-Mare



"Outstanding" and "Good" CQC rated practices are seeking: an Entrepreneurial GP Trainer and a Salaried GP (each for 6-8 sessions a week) NHS pension + MDU Costs Negotiable package including possible relocation costs

The Locality Health Centre, Weston-Super-Mare, is a thriving social enterprise improving access to high quality medical services and reducing health inequalities. We are now collaborating with Clarence Park Surgery to work more closely together to deliver a better and more accessible quality service across both practices. The practices have a shared belief in continuity of care and putting the patient at the centre of what we do.

Join our team where your clinical skills will be highly valued, your views and experience on how to provide the best, most effective care will shape the service and your treatment of patients will make a real difference. There will be opportunities to work across both sites with a real breadth of patients.

As a Social Enterprise there are no Partner GP's or shareholders, all money from the NHS is reinvested in the service. We are looking to extend this model to Clarence Park Surgery over time.

This post is central to those changes as we have created a clinically led practice for the 21st Century, with Principal GP's, Specialist Nursing team, prescribing pharmacist and a supportive admin. We are building on the excellent team approach creating a smarter service. The administrative, financial and staffing functions are managed by the social enterprise. The LHC is integral to a dynamic Healthy Living Centre which provides a range of additional health and wellbeing services to support the local community and patients.

- Combined list size of 10,000
- EMIS Web
- Strong and effective nursing team
- Prescribing Pharmacist
- Supportive and efficient admin team
- Active links with outside agencies

We are looking for a GP who will be committed to co-creating an innovative approach alongside a lively and supportive clinical and non-clinical team.

Weston-super-Mare is 40 minutes from Bristol and Taunton, with stunning countryside on its doorstep.

For further information and an informal discussion, please contact: Shirley Smith (Practice Manager) 01934 427513

shirley.smith@gp-L81670.nhs.uk

Shirley.smith17@nhs.net

www.localityhealthcentre.org.uk

Application deadline is 1st October 2016

GP Partner 6-8 sessions per week BRISTOL/BATH

www.closefarmsurgery.co.uk

Come and join our friendly and supportive team – an opportunity has arisen from 1st September 2016. Special interests are welcome. We are flexible regarding sessions worked but require Fridays to be covered.

Our part-dispensing PMS practice is based midway between the historic cities of Bristol and Bath with good links to the motorways and easy access to stunning countryside. We offer a modern family practice in a traditional setting. We have 3 partners (2.5 WTE) and 3 salaried GPs (1.5 WTE) complemented by nursing, dispensing, managerial and admin support with a list size of 7000+ patients. Our team uses EMIS Web.

If you are interested, please contact Mrs Linda Marshall, Practice/Business Manager, Close Farm Surgery, 47 Victoria Road, North Common, Warmley, South Glos. BS30 5JZ. Tel: **0117 9321321** or email: Linda would be happy to arrange an informal visit, send you a practice profile or just answer any questions you might have.

Closing date for applications: Friday, 29th July, 2016 Interviews to be held on 9th and 11th August, 2016

The Windrush Medical Practice, Witney, Oxfordshire (Edge of the Cotswolds and 13 miles from Oxford City)

Full/ part-time Partner, Salaried GP or Locum

Excellent opportunity for doctors wishing to practice high quality family medicine with continuity of care.



- Expanding practice currently 14,600 patients, 10 GPs. (17% dispensing)
- GP owned purpose built health centre opened March 2012
- Training practice with two trainers and undergraduate teaching
- Supportive MDT with nurse prescribers and minor illness clinic
- CQC rated outstanding
- 99%+ QOF achievement
- Adjacent community hospital, minor injuries unit, radiology and physiotherapy
- Endoscopy, ultrasound, echocardiography on site
- NIHR supported research practice.
- No out of hours commitment
- Part of an active federation with PMCF pilot GP access hub and home visiting service

We welcome enquires or informal discussions: Please contact Morag Keen, Practice Manager on 01993 894444 or email morag.keen@nhs.net

For further information including practice profile and how to apply, please go to http://www.windrushmedicalpractice.co.uk/vacancies

SALTASH 'THE GATEWAY TO CORNWALL'

Situated on the west bank of the river Tamar, Saltash acts as a gateway between Cornwall and Devon, whether travelling by road, rail or river.

Saltash is close to the sea, Dartmoor and to the major city of Plymouth. Our main hospital for secondary care, Derriford Hospital (Plymouth Hospitals NHS Trust) is just 15 minutes away. We have a local Community Hospital, St. Barnabas. There are excellent Primary Schools in Saltash and surrounding area. Saltash.net Community School is a mixed 11 to 18 Academy School, and there are Grammar schools nearby in Plymouth.

SALTASH HEALTH CENTRE

Well organised practice seeking a new **partner or salaried GP** to join our well remunerated and thriving practice. We are looking for a full-time or part-time GP to replace a retiring partner.

- 6 Partners and 1 Salaried GP
- Rising list size of 13,000 patients
- Fully supported by nursing, administrative and management teams
- Well-located purpose built partner-owned premises
- Excellent reputation and consistently high QOF achievement with wide range of LES and DES
- Enthusiastic involvement with Undergraduate & Postgraduate Medical Education
- TPP SystmOne clinical system
- Active involvement with local commissioning

We are looking for an enthusiastic, pro-active, team player with a strong patient-care focus who will share our supportive, friendly ethos and commitment to high quality care.

For further details contact:

Lynn Chenery, Practice Manager, Saltash Health Centre, Callington Road, Saltash, Cornwall, PL12 6DL. Telephone: 01752 842281. Email: Lynn.Chenery@nhs.net

Informal enquiries / visits welcome. Website: www.saltashhealth.co.uk

Home Working General Practitioners Flexible Hours or scheduled hours to suit successful applicants



Recently awarded 'Outstanding' by CQC, the Practice is looking to recruit Home Working GPs to respond to the rapid changes within primary care services in the UK ensuring a continuity of care to our patients.

The Practice is one of the biggest integrated primary care centres in the UK delivering primary care services to 29,000 patients. This is an exciting opportunity to be part of our innovative and forward thinking team.

You will be highly self-motivated; a team player who can add value in this newly created position.

Requirements to include but not limited to:

or telephone Caroline Neale on 01373 468102.

- Results and mail processing
- Chronic disease reviews
- Email consultations
- Potential for telephone or skype consultations

Applicants would need to be GMC registered and on the UK's performers list but not necessarily resident in the UK.

For more information watch the video link at https://vimeo.com/145962235 (password FMP), visit our website:
www.fromemedicalpractice.co.uk/information/job-vacancies

If you are interested in this post, please forward your CV and covering letter to Caroline Neale, Frome Medical Practice, Enos Way, Frome, Somerset BA11 2FH or email Recruitment@fromemedicalpractice.nhs.uk