

JULY 2016 NEWSLETTER

LOCAL MEDICAL COMMITTEE

LMC
GLOUCESTERSHIRE

Our website: <http://www.gloslmc.com>

Twitter: @GlosLMC

Dr. Phil Fielding - LMC Chairman
phillip.fielding@nhs.net

Mike Forster - LMC Lay Secretary
mike@gloslmc.com

Shelina Jetha - LMC Manager
shelina@gloslmc.com

Sue O'Sullivan - Administration
sue@gloslmc.com

Tel: 01452 310706

Fax: 01452 386503

Should Brexit be likened to an earthquake or a stone flung into a pond? The post-Brexit ripples are dying away – no aftershocks. The Secretary of State for health remains in post. The summer holiday season is upon us and the sun is shining (sometimes). Things will probably change in the autumn as the CQC rushes to finish its planned first inspections of all GP practices before the end of the year, the Sustainability and Transformation Plans (STPs) are implemented and, perhaps, a solution to the problems of general practice is found. We must wait and see.

LMC Website changes

Our website has changed slightly:

- Job Vacancies and News Items are now listed separately under the main heading of 'News'.
- Under 'Support - for GPs' there is a 'Practice List' to help incoming GPs and locums find work.
- Similarly, those GPs listed on our website as 'Locums' now appear on a separate list under 'Support - for Practices ->Locum Listing' to help practices find a locum. Locum GPs can edit their profile to show whether they are available or not available – the default being 'not available'.

Important: It is up to practices to ensure that the person advertising themselves on our website is properly qualified and entitled to practice.

24 Hour retirement – no CQC implications

The CQC, the BMA and NHS England agree that when a GP who is a partner in a CQC-registered partnership takes 24-hour retirement from their NHS contract, they retire from their NHS contract for that period but do not retire from their responsibilities as a partner of the CQC-registered partnership. They remain accountable, along with the other partners, for providing regulated activities by the CQC-registered partnership over the 24 hour period. Consequently, GP partners do **not** need to inform CQC or take any other action regarding their CQC registration when they take 24-hour retirement.

GMC List of Registered Medical Practitioners – possible changes

You have until 7th October 2016 to suggest ways in which the register can be improved. Currently it only shows the mandatory information, such as a doctor's name, qualifications, gender and licence status. Should doctors be able to add further voluntary information to make it more useful for them and their patients? Suggestions which have been made to the GMC include:

- Higher qualifications
- Scope of practice
- Declaration of competing professional interests
- Languages spoken
- Practice location
- Photographs to demonstrate identity

More information is at www.gmc-uk.org/LRMPconsultation

A potential step in the right direction – ‘NHS GP Health’ (GPH) service

NHS England is commissioning the [NHS GP Health service](#) to support practitioners working in general practice who may be suffering from mental ill-health including stress and burnout and supporting those wishing to return to clinical practice after a period of ill health. It is part of the wider package of support for general practice set out in the General Practice Forward View. GPH should be a nationally consistent offer across England, delivering to consistent national standards but allowing local flexibility to best support local population needs. The GPH service delivery model has been designed with 4 main principles/strategic objectives in mind:

- To retain a healthy workforce and support return to clinical practice after a period of sickness.
- To reduce the perception of stigma amongst GPs who may be helped presently, or in the future, through accessing mental health services.
- Maintain a visible nationally consistent offer across England.
- To promote easy and timely access the service, ensuring Service User confidence and confidentiality.

Expected milestones are: contract award in early October 2016, followed by a service commencement date of 1st January 2017. The contract will last for 2.5 years but NHS England may extend the contract for up to a further 2 years.

Zika virus

FourteenFish have teamed up with GP and medical educator Dr Mark Coombe to bring you a **free 7 minute update** video on Zika Virus. The video is available to anyone free of charge on their [YouTube channel](#) .

E.coli O157 outbreak

Update as at 21 July: Public Health England (PHE) is continuing to investigate an outbreak of E. coli O157, which is associated with eating mixed salad leaves including rocket leaves [possibly imported from the Mediterranean area. The South West of England has been particularly affected. Latest figures suggest that the outbreak is now subsiding, but the outbreak control team remain vigilant to further cases and to the risk of those affected passing the infections on to others. Work continues with partners, including the Food Standards Agency (FSA), to investigate the source. During the outbreak 160 cases of this strain of E. coli have been identified (figure correct as at 21 July 2016). This is 153 in England, 6 in Wales and 1 in Scotland. You can find more information at: <https://www.gov.uk/government/news/update-as-e-coli-o157-investigation-continues>

NHS England short contract form

For 2016/17 NHS England is publishing a shorter-form version of the NHS Contract, for use in defined circumstances. These include: non-inpatient mental health and learning disability services; any community services, including those provided by general practices, pharmacies, optometrists and voluntary sector bodies; hospice care / end of life care services outside acute hospitals; care provided in residential and nursing homes; non-inpatient diagnostic, screening and pathology services and patient transport services. The shorter-form contract may not be used for any service for which the National Tariff guidance sets a mandatory national price (whether or not that mandatory national price is to be the subject of a Local Variation or Local Modification).The relevant documentation is available here:

<https://www.england.nhs.uk/nhs-standard-contract/16-17/>

TPP QRISK2 error

Nationally about half of practices affected by this issue have not accessed the lists that NHSE has provided them of their affected patients. It would be difficult to defend a practice that has not done so. NHS England, with the GPC's approval, now intend to send a reminder to those practices which have not accessed this information, and also to encourage them to fill in a workload survey which will be used in negotiations with TPP to try to secure recompense for the work involved. If you have not yet accessed

your list please do so. Obviously, once you know the situation it will be up to GPs to prioritise this work in accordance with their other clinical duties.

CQC access to appraisal documentation

Further to last month's advice on this subject, the CQC's Regional Inspector (Odette Coveney) has now stated that it is "inappropriate for CQC to request sight of [appraisal] documentation when they are visiting and inspecting practices". To repeat our advice, should it be necessary, practices and GPs should never feel obliged to let CQC have sight of this highly confidential material. Should you ever feel pressurised in any way on this matter, then contact the LMC immediately.

GPC Advice – GP involvement in child safeguarding

There are on-going problems around the obligations and entitlements of General Practitioners who are asked to attend child protection case conferences or to prepare written safeguarding reports for use at them.

The provision by GPs of the relevant safeguarding services falls outside the scope of the range of essential, additional or enhanced services provided for in parts 8 – 12 of the standard GMS contract. Clause 19.1.2 (a) of the GMS contract specifically permits the contractor to demand or accept a fee or other remuneration '*from any statutory body for services rendered for the purposes of that body's statutory functions*'.

GPC has obtained external legal advice on the best way forward if it is impossible to reach a resolution through negotiation with NHS England. GPC's position, having taken such advice, is that GPs do have an obligation to comply with their statutory safeguarding duties, but equally that they are entitled to a fee.

GPC's advice is therefore to provide the relevant services, but on the basis that a fee will be sought for the same, indicating the rate of charge ahead of the provision of the report or attendance at the case conference as the case maybe. The commissioner of the service (i.e. the organization demanding the report or attendance) should be notified that acceptance of such services will be treated as signifying a willingness to engage the GP on the stipulated terms. In the event of non-payment a claim for the fee could then be pursued, if necessary through the small claims court.

The whole issue of who pays for collaborative work is being negotiated nationally and further advice may be available in due course.

Significant event – NHS SBS

During the preparation for handover of SBS operations to the new provider (Capita) it was discovered that a backlog of clinical correspondence and results stretching back over several years remained in storage areas and had not been processed. Many apologies have been made. More concretely, this is being dealt with by NHS England as a significant event. The correspondence includes temporary resident forms, duplicate documents or some results and communications about treatment steps.

NHS England have undertaken a clinical review to assess any high-risk correspondence, which might need action, such as those that have involved an oncology history, or child protection issues. Appropriate safeguarding teams have looked at child protection issues. Dealing with any high-risk case is likely to involve additional work and GPC have insisted that this is remunerated. NHS England have included a remuneration package and also a background support package. Relevant GPs are being notified so that in the small number of cases where it may be needed they can take steps to follow up with their patients. If you don't hear from them you need not be greatly concerned.

The rest of the items will need to be sent to relevant GPs for review and filing – the GPC are currently discussing a remuneration and support package for practices for this process.

GPC Sessional Newsletter

Here is the link to the SGPs July enewsletter: <http://bma-mail.org.uk/t/JVX-4DGLH-1BJCJOU46E/cr.aspx>

Firearms certification – change in BMA advice

There has been much adverse feedback to the present arrangements. The BMA have taken that on board and now [say](#):

“The new process for GPs to share information with the police on a firearms licence application involves work that is not a condition of the GP contract and therefore a fee can be charged.

However, the British Association for Shooting and Conservation (BASC) are advising their members to refuse payment to GPs for responding to the initial police letter which asks to check and place a marker on the medical record.

We are now advising GPs to return the letter to the police **without delay** explaining they are unable to undertake the work due to a lack of funding or for a conscientious objection to gun ownership.

N.B It is not acceptable to:

- disregard the letter
- not inform the police
- delay a reply

In doing any of the above, you could place yourself at professional risk.

Where there is a reasonable belief that an individual, who is either applying for a firearm or shotgun license or already holds one, may represent a danger to themselves or others, we strongly advise doctors to encourage the applicant to reconsider or revoke their application.

If the applicant refuses, you should consider breaching normal confidentiality and inform the police firearms licensing department as a matter of urgency.

Again, note that this advice only relates to the initial letter asking GPs to add a marker to the patient record. Applicants are still being advised by BASC to pay their GP for any full medical report being requested by the police as part of their application.”

We suspect that this is not the end of the matter, but that is how things stand at the moment!

Forthcoming events

ACAS Training highlights in Gloucestershire over the next few months:

- 5 August [Managing Absence at Work](#) Gloucester
- 9 August [Equality, Diversity and Discrimination: The Essentials](#) Gloucester
- 10 August [Essential Skills for Line Managers](#) Cheltenham
- 20 October [Contracts of Employment - How to get it right](#) Stonehouse
- 27 October [Performance Management & Appraisals](#) Cheltenham
- 4 November [Employment Law Update](#) Cirencester
- 23 November [Conducting Investigations](#) Gloucester
- 1 December [Managing Holidays](#) Gloucester
- 15 December [Essential Skills for Line Managers](#) Gloucester

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

There is a group of strolling players called the Handlebards. Well, actually they are mounted on bicycles. They cover about 1,000 miles each summer carrying or pulling all their props to perform Shakespearean plays in the open air around the country. However, there are only four actors. Frequently there have to be more characters on the stage than four so they have devised a curious but clever solution. Each character has something distinctive, such as a hat or moustache which is mounted on a stick. Having delivered his speech as one character he hands the stick to someone else and dashes off to pick up the stick of the persona of the next character he has to represent. It works, and the pace is so frenetic that even Hamlet seems like a comedy. If all else fails they drag members of the audience onto the stage to represent even more characters.

The whole thing reminded me so much of our busy practice: the dashing to and fro, the sense of organised chaos, the occasional slip-up, but above all the bubbling sense of humour that underlies everything we do. Frankly, when faced with the situation we find ourselves in one has to laugh.

Anyway, the first splitting wedge has been driven into the EU carcass by Britain but there seems to be little major change yet. The world continues to turn. The transfer of power internally seems to have gone quite well. Our new PM is clearly following the line that if you have created a situation you can set about sorting it out. Let us hope that she gives sensible direction to her ministers. The NHS is clearly unstable, not least because general practice, the foundation on which the NHS rests, is as wobbly as my tummy. It needs sorting out, as my personal trainer keeps saying.

And finally,

To err is human; but to really foul things up you need a computer.



**This newsletter was prepared
by Mike Forster, LMC Lay
Secretary & the LMC Office**



LOCAL MEDICAL COMMITTEE
LMC
GLOUCESTERSHIRE

Gloucestershire

GP SAFE HOUSE

*Online support for
professional challenges*

www.gpsafehouseglos.co.uk

JOB VACANCIES

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

GLOUCESTERSHIRE			Date posted	Closing Date
Partners in Health	Gloucester	Partner/Salaried GP	20 Jul 16	Open
Phoenix Surgery	Cirencester	Part-time Partner	19 Jul 16	Open
Winchcombe	Nr Cheltenham	Salaried or Retainer GP	18 Jul 16	2 Sep 16
White House Surgery	Moreton-in-Marsh	Salaried GP	11 Jul 16	Open
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
Dockham Road Surgery	Cinderford, Forest of Dean	Partner or Salaried GP	19 Apr 16	Open
Leckhampton Surgery	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	Gloucestershire	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
Brockworth	Gloucester	Partner or salaried GP	5 Jan 16	Open
ELSEWHERE				
Air Balloon Surgery	Bristol	Partnership and salaried	20 Jul 16	7 Aug 16
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
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

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

The White House Surgery

Four Shires Medical Practice, Stow Road, Moreton in Marsh, Gloucestershire, GL56 0DS
Telephone: 01608 650317. Email: Angie.hope@nhs.net

SALARIED GP VACANCY **5\6 sessions per week**

We are a busy 4500 patient dispensing practice with contracted responsibility to our Community Hospital which includes Ward Rounds.

We are a fully integrated TPP SystemOne practice, high QOF achievers and offer a wide range of Enhanced Services. This is a great opportunity to join a well-established North Cotswold Practice with the very best of support staff who are all dedicated, friendly and efficient.
NHS Pension Scheme/ Defence Union paid by Practice.

For further information or if you wish to have an informal visit contact Angie Hope the Practice Manager or Apply in writing with CV to Angie.Hope@nhs.net



Winchcombe Medical Centre

Require a **Salaried or Retainer GP**

This is an excellent opportunity to join a friendly, rural, teaching practice and become part of a great team serving the patients of Winchcombe and the beautiful surrounding Cotswold villages. Find out more about the practice at www.winchcombemedical.nhs.uk.

The post will be **4-5 sessions** to be decided with the successful applicant. The Practice has recently expanded to accommodate the growing patient population. We work from bright, spacious, modern premises.

Winchcombe Medical Centre prides itself on being a progressive, innovative and well organised Practice that fully supports its staff.

We are a friendly professional team of 5 GP Partners, 1 Salaried GP, 1 Registrar, a Nurse Practitioner, 3 Nurses and 2 HCA's. We also host Midwife, Podiatry and Phlebotomy clinics weekly.

Interested parties should contact Clare Burton / Jane Parry Locum Practice Managers on 01242 604147 / 609609 or clare.burton1@nhs.net or jane.parry5@nhs.net for a comprehensive practice profile and application pack and for informal visit requests.

Closing date for applications : **Friday 2nd September**

Interviews to take place w/c 19th September



**Award Winning Cotswold Practice Requires a
Three/Four session GP Partner**

Fully personalised lists providing continuity of care and high patient* and doctor satisfaction

A mix of urban, rural and university General Practice

A friendly, energetic and social Partnership with equal voice

Self-owned premises, practice dispensing and very competitive drawings

An innovative Practice with fresh ideas adopted by the local health community

High quality in house governance and patient safety

Home visiting frailty nurse and therefore low GP visiting rate

8 Partners (6 full working time equivalent)

A growing patient list, currently at 13,000

Eleven out of twelve Friday afternoons off



Please apply with covering letter and CV to:

Julia Maclean, Practice Manager, Phoenix Surgery, 9 Chesterton Lane,
Cirencester, Glos GL7 1XG. Email : juliamaclean@nhs.net Telephone : 01285
652056

*98% of patients would recommend or highly recommend the Phoenix Surgery to friends and family June 2016

Royal Forest of Dean, Gloucestershire

PARTNERSHIP or SALARIED GP VACANCY

For 4 to 8 sessions (WTE 8).

We are flexible and would be happy to consider all applications, ideally for partnership, although a salaried position would also be considered.

FOREST HEALTH CARE is a friendly and enthusiastic GMS dispensing practice with a strong team-working ethos. We are situated in a beautiful rural part of West Gloucestershire, between the Wye Valley and the Severn Estuary. The counties of Herefordshire and Monmouthshire border our catchment area, with easy access to the M4, M5 and M50. Outstanding scope for hiking, biking and river sports. Great location for quality family life with access to excellent schools.

The practice offers:

- A democratic supportive partnership, currently 4.25 WTE partners;
- Town centre location and a branch surgery in a nearby village;
- Training practice with a list size of 7,800 of which 2,300 are dispensing;
- Nurse-led clinics and chronic disease management;
- No out-of-hours duties required (option available);
- High QOF Achievement and a wide range of Enhanced Services;
- Daily coffee together, along with regular social events.

Why Gloucestershire?

Find out: <https://jobs.bmj.com/minisites/beagpinglos/>

Why Forest Health Care?

Check out our website: www.foresthealthcentre.nhs.uk

To find out more or arrange an informal visit, contact the Practice Manager:

Mrs Sally Charlton sally.charlton@nhs.net

Forest Health Care, The Health Centre,
Dockham Road, Cinderford, Gloucestershire. GL14 2AN
01594 820820

AIR BALLOON SURGERY, St George Bristol



Partnership and Salaried GP opportunities

Two opportunities have arisen to join our GP team. Our senior partner is planning to retire after more than 26 years with the practice, and we also have a vacancy for an Associate (Salaried) GP, who moved to work closer to home.

We can support and develop Associates to make that next move into Partnership.

We are looking for team players with a “can do” attitude, and exemplary clinical and interpersonal skills to join our friendly, dedicated and hard working team. For the partnership position we would expect candidates also to be able to demonstrate business acumen, strategic thinking and political awareness.

About us:

- Five partners and 4 Associate (salaried) GPs, growing list size of over 13,600
- Mentoring scheme for Associates
- In-house clinical education and development
- Demographically mixed and clinically interesting, appreciative patient list
- Extensively skill mixed and experienced clinical and support team
- Prescribing clinical practice pharmacist - senior in the local pharmacy pilot
- Nurse prescribers
- Modern, spacious, purpose built premises
- Undergraduate teaching- we are planning Registrar training
- Well developed and organised IT (Emis Web)
- Active member of OneCare Consortium
- Research practice- level 2 in the local network
- Numerous national and local service pilot projects
- CQC rated as “good” and some areas “excellent”

More information

For more information and informal enquiries or to arrange to visit the practice, please contact Kate Francis at KFRANCIS@GP-L81038.NHS.UK or Tel: 0117 9086668, or Miffy Saunders at MIFFY.SAUNDERS@GP-L81038.NHS.UK or tel: 0117 9099516.

How to Apply

Applications can be made by submitting your CV and short supporting letter, which can be emailed to kfrancis@gp-l81038.nhs.uk. Closing date for applications: **midnight on Sunday 7th August 2016.**

<http://www.airballoonsurgery.co.uk>

See us on YouTube - <https://youtu.be/d50UPS5gyus>