

PENSION GUIDANCE

The GPC has published four new guidance notes on GPs' pensions, following changes arising from the new GMS contract negotiations.

[http://www.bma.org.uk/ap.nsf/content/ HubGMScontractguidance](http://www.bma.org.uk/ap.nsf/content/HubGMScontractguidance)

These are:-

Focus on pensions: an overview

Focus on pension flexibilities

Focus on the dynamising factor

Focus on Superannuation contributions - 2

THE INSIDER'S GUIDE TO THE NEW GP CONTRACT

Edited by Simon Fradd this book is a useful source of reference with practical guidance to the New GMS contract.

HEP B VACCINE FOR FOREIGN TRAVEL - CORRECTION

A practice correctly informs us that the flow chart included in the last newsletter is wrong when it states that Hepatitis B required for Travel purposes cannot result in a charge to the patient. Immunisation against Hepatitis A is available free of charge on the NHS in connection with travel abroad. However Hepatitis B is not routinely available free of charge and therefore GPs can charge patients for this vaccination when requested in connection with travel abroad.

A new guide is enclosed. The LMC Secretary is always happy to receive any corrections or comments on the Newsletter.

PRIVATE CHARGES

The LMC has received several queries about charging NHS patients for non-NHS services. Please refer to page 18 part 178 of the Standard General Medical Services Contract re fees and charges. Paragraph 483 states that "The Contractor shall not, either itself or through any other person, demand or accept from any patient of it's a fee or other remuneration, for its own or another's benefit, for (a) the provision of any treatment whether under the Contract or otherwise; or (b) any prescription or repeatable prescription for any drug, medicine or appliance, except in the circumstances set out in schedule 5."

Schedule 5 describes the significantly restricted areas where we can charge. The current Government has made it quite clear that they do not wish GPs to be charging NHS patients other than those outlined in the GMS Contract. However, as you may have seen the LMC Conference did pass the following motions on patient charging on 17th June 2004:

Motion 37: That conference instructs the GPC to consider a challenge in the European courts as to the validity of clause 483 pf the nGMS contract.

Motion 38: That conference instructs the GPC to renegotiate clause 483 of the standard nGMS contract such that it is amended to allow GPs to charge patients a private fee for:

- i. Services neither provided nor commissioned locally by the NHS
- ii. Services provided out of core hours of 08.00 – 18.30 where the practice has opted out of out-of-hours provision
- iii. All travel immunisations
- iv. Advice or services related to the patient's occupation.

GLOBAL SUM PAYMENTS

South Western Staffordshire PCT provides a range of Shared Financial Services to other PCTs in South Staffordshire, one of which is the calculation of GMS payments.

GMS payments are processed using the NHSIA (Exeter) system which has been developed nationally and fully complies with the requirement of the Statement of Financial Entitlements.

Ann Fereday, Head of Shared Financial Services, reassures us that the Global Sum has been recalculated each quarter using the revised contractor weighted population for that quarter and that this will continue each quarter.

GPs who have a particular issue regarding their own practice list size should contact Margaret Hughes in Mellor House (01785 220004) or if they have queries regarding their payments, contact the relevant PCT accountant or the Finance Team in shared Financial Services in Mellor House with the details.

PAYMENT FOR CHILD PROTECTION WORK

The BMA's Ethics Department have recently been receiving an alarming number of queries relating to GPs refusing to undertake child protection work until they have been paid. As a result of this, they have produced the following statement of guidance:

“The BMA has recently received a number of inquiries relating to GPs refusing to undertake child protection work, such as responding to Section 47 enquiries, until they have received a fee. This has arisen as a result of sometimes protracted delays in doctors being paid for this work in the past. The BMA believes that in all cases relating to the care and welfare of a child, a doctor's ethical duty is to put the interests of the child first. Where a service falls outside a doctor's terms and conditions of service, it is unacceptable to withhold information relating to vulnerable children that has been requested by proper authorities until payment has been received. Having said this, the BMA believes that local authorities, and other bodies who commission such work should provide payment promptly, and certainly no later than 28 days from receipt of the information.”

PNEUMOCOCCAL VACCINE FOR OTHER RISK GROUPS

The LMC has requested a LES for other risk groups outside the current payment arrangements for over 75s. The response from PCTs has been positive so we hope for

information soon as the 'flu vaccination is underway.

REMOVAL OF PACEMAKERS

A local GP recently removed a pacemaker from a deceased patient and expected payment from the Undertaker. BMA advice is that the funeral director is responsible for the fee requested by the doctor and the funeral director is then responsible for claiming it back from the PCT or Hospital Trust. Unfortunately in this local case the undertaker declined to pay the GP so it is advisable to clarify in writing before performing this procedure. The GPC inform us that the Department of Health guidance is 20 years old and is being updated.

CHOICE AND BOOKING AT POINT OF REFERRAL

There is no obligation whatsoever as the moment to take on this elective booking workload. LMC advice is to decline until the national situation has been clarified. Discussions are ongoing with the GPC but nil has been finalised to date.

NHS PENSION MEETING

Date: Tuesday 26th October 2004
Speaker: Dr Andrew Dearden
Venue: Stoke on Trent Moat House, Festival Way, Etruria
Time: 7.00 for 7.30 start (Buffet provided)

This is being arranged by North Staffordshire LMC so please contact Sylvia Mahoney at 01782 265666 if you would like to attend.

QOF VISITS AND PATIENT CONFIDENTIALITY

The QOF visits will mean that patient records are the subject matter of audit for financial or probity purposes and as such, third party assessors will have access to patient identifiable information. The GPC is working with the Department of Health and lawyers to clarify this complex area of the law and will issue guidance very shortly.

In the interim the GPC view is as follows:

- under the Data Protection Act, under most circumstances, there is a requirement that, in order to allow access to patients records, either express and informed consent is obtained from the patient, or patient records are completely anonymised
- if records cannot be completely anonymised and there is a resultant breach of confidentiality or if patients have not given express and informed consent, there may be a significant level of medico-legal risk to practices
- if practices anticipate difficulties with confidentiality, they should seek advice from their Local Medical

Committee, and discuss any planned course of action with their PCT.

DOCTORS FOR DOCTORS

Doctors for Doctors is a new BMA initiative that has been set up to offer support to those members who have concerns about their mental health and well-being.

It is committed to providing support for doctors in distress and difficulty by helping them make informed decisions about their health. It also aims to work with them to gain insight into their problems, facilitating access to appropriate care and supporting them through this process.

For more information or a resource pack log into <http://www.bma.org.uk/doctorsfordoctors>