

Introduction

The LMC recently underwent an outside assessment of its structure and function by Dr Judy Gilley, a former Deputy Chairman of the GPC. Overall her comments were positive and the report is available in the LMC office if you wish to read it.

We will gradually introduce a lot of her recommendations but one of the first you will notice is a column in the newsletter which can be contributed on an anonymous basis by anyone who wishes to discuss an issue that is causing them concern, interest or satisfaction. However, it must not be libellous or defamatory and should uphold the ethics of modern general practice. This month we welcome the comments from Dr V. Spleen.

Enhanced Services

The Department of Health has instructed PCTs that the LMC must approve and sign off plans for the use of Enhanced Services Floor underspends.

We are pleased to report that Burntwood, Lichfield and Tamworth PCT have acknowledged the shortcomings in their plan and we look forward to the GPs in that area being able to deliver Enhanced Services to their patients that are comparable to the other three PCTs.

It is being commented that Enhanced Services have been a huge amount of work, aggravation and dispute for LMCs considering the relatively small amount of money they constitute in the contract (4% of practice incomes in 04/05). The LMC believes that the workload control aspect of Enhanced Services is more important than their earning potential, certainly in the initial stages. Much of the problem is that in trying to draw a line in the sand in terms of no more work without more resources, many of the arguments have centred around whether the line can be pushed further back to cope with all the un-resourced work we have taken on over the years. We must not underestimate the fact that a line has been drawn and that there is a change – albeit a gradual and hesitant change by some – of mind set and that no longer is general practice expected to take on new work without appropriate resources.

Payment for Vaccines

We are pleased to be able to recommend the document “Payment for Vaccines” prepared by the Kent LMC for GP practices in Kent. This has now been placed on the South Staffordshire LMC website. Regulations surrounding vaccinations, and in particular travel vaccinations, have been confused for some time. You will be able to read what can and cannot be charged for under the present arrangements and we commend this document to you.

Pensions

The Pensions Agency published the documentation on the Assessment of GPs Pensionable Earnings and this is available at:

<http://www.nhspa.gov.uk/library/tn2005/htm/TN3-2005.htm>.

A number of queries have been raised by accountants and GPs, particularly the impact on handling practices' accounts and the tax implications. These issues are very specialised in nature so the GPC is currently holding discussions with a specialised firm of accountants about producing some FAQs in response to these queries. We therefore hope this guidance will be available shortly.

Three GPC guidance notes relating to pensions can be found at:

<http://www.bma.org.uk/ap.nsf/Content/HubaskpensionsGP>.

The first, "Focus on... assessment of GP pensionable earnings", is to help us understand the new certification arrangements for declaring GPs pensionable earnings for the purpose of assessing pension contributions. This guidance summarises the main issues in the NHS Pensions Agency documents. Please also refer to the frequently asked questions with answers on the Pensions Agency website.

The second is an Information note to help GPs understand non-GP partners pension contributions and the issue of tax relief.

The third is an updated version of the GPC guidance note, "Focus on... the dynamising factor".

Global Sums

The LMC is aware that PCTs are not breaking down the Global Sum payments in order for us to check their origin. We have written to the four Finance Directors requesting breakdowns of global sums each quarter. We would therefore advise all Practice Managers to examine their global sum payments carefully each quarter.

The traditional breakdown of Global Sum was £54 x Patient Numbers. This has been replaced by £54.72 x Patient Numbers as of April 2005 which includes a Superannuation premium of £0.46 and an appraisal premium of £0.26.

Choose & Book

A request for Local Enhanced Service funding from the Enhanced Service Floor has been rejected by the LMC because we believe Choose & Book is an administrative process and not a patient service.

When considering the funds offered by a PCT GPs must ensure that appropriate costing has been made for staff time, supervision and accommodation.

Aspiration Payments

We should have all received our quality payments for 2004-05 which were increased to £77.50 (to incorporate superannuation funding) per point for the average practice. For 2005-06 the points value increases to £124.60.

For aspiration payments we would like to remind you that the choice of payment is: -

- 60% of contractor's previous year's Achievement Payment i.e. 60% of 2004-05 total at 2005-06 rates paid over 12 months.
 - Aspiration Point Total method: 1/3 of Aspiration Points x £124.60 x contractor's CPI paid over 12 months.
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Removal of Patients from GP Lists

Attached is an updated version of guidance first issued by the GPC in 1999 and reflects the changes to the registration process following the introduction of the New Contract. This is an important document to read.

Final PGEA Payments under the 1990 GMS Contract

Also attached is guidance from the GPC for those who believe they were paid annually in arrears.

Documents from the GPC

The following documents have been produced by the GPC and as stated before we recommend that your Practice Manager obtains a copy.

·Freedom of Information Act 2000 – frequently asked questions. Available at:

<http://www.bma.org.uk/ap.nsf/Content/Hubgeneralpractitionersfaqs>

·Medical Performance List for GPs applying as individuals. Available at:

<http://www.bma.org.uk/ap.nsf/Content/Hubmanagingyourpractice>

·Practice Based Commissioning: GPC guidance for GPs and LMCs. Available at:

<http://www.bma.org.uk/ap.nsf/Content/Hubthefutureofgeneralpractice>

There is also a useful document published by the Department of Health on –

Confidentiality and Disclosure of Information: GMS, PMS and APMS, available at _

http://www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsPolicyAndGuidance/PublicationsPolicyAndGuidanceArticle/fs/en?CONTENT_ID=4107303&chk=GiJc0B

It makes explicit existing legal and ethical obligations of confidentiality, placing them in the context of the new primary care contractual arrangements.

Free Access to Microsoft Products

Another reminder that GP Practices are covered by the National License for Microsoft and are therefore entitled to free access to Microsoft products – Word, Access, Excel, Outlook, Powerpoint and Front Page. Practices should contact their PCT if they wish to take up this offer.

Medical Reports for Gyms and Health Clubs

As a result of the NHS campaign to encourage the general public to take more exercise, there have been a number of queries about GPs' obligations to provide medical reports to certify fitness to exercise and how to respond to requests for information from gyms and patients advised to see their GP before using the gym facilities.

In most cases the statement of patient's fitness from a GP is required for the liability insurance cover of the health club or gym. It is the BMA view that unless there is a direct clinical referral of the patient to the gym/health club as part of the patient's rehabilitation programme, then a charge is reasonable. This service is not covered under the new GMS Contract and therefore the GP should be properly remunerated for the work which often involves screening of the full patient medical record. The BMA is able to suggest fees for this work which can only be done by the patient's own GP or other attending doctor. The BMA suggested fee for this work is currently £11.50 for a straightforward certificate of fact and £19.50 - £41.50 for more complex certificates. Revised fees are due to be announced shortly. The GP does have the discretion to waive the fee after considering the implications to the doctor-patient relationship.

Agenda for Change

The present nGMS deal is for the three years up to April 2006. Initially, some elements were built into the cost of the Global Sum that would have taken some account of Agenda for Change but these were eroded by the subsequent deals on MPIG.

GP practices are under no obligation to implement Agenda for Change for their staff. We work in a competitive market so we have to try to ensure that we offer attractive terms and conditions if we are to continue to recruit and retain good quality staff.

It is this LMCs advice that practices should consider the implications of Agenda for Change and their ability to recruit.

LMC Elections

Attached are the results of the recent elections to South Staffordshire Local Medical Committee.

You will note that there are vacancies in several areas and we would be happy to co-opt anyone interested.

Dr V Spleen

Dr V Spleen

Dear Reader

My PCT offered me a credit card last week. A Smart Card! Called it C & B. All our staff were offered one as well.

Sounded good. It had 0% interest!

Reward scheme even included travel scheme to send our patients to places we've never heard of (holidays from hell?).

I asked if they do credit checks. She just laughed and said "Can't afford it mate, we've got a £4m deficit".

I think I'll give it a miss.

Conceive and Botch!

Yours sincerely

Venture