

Brent LMC News Update

August 2017

Chair: Dr Prakash Chatlani

LMC Secretary: Dr Katie Bramall-Stainer

1. Sessional GPs and Indemnity Reimbursements from NHS England

As part of the 2017/18 GP contract agreement, it was agreed that £30m would be paid to practices to cover 2016/17 rises in indemnity insurance costs for all doctors delivering GMS work.

These payments are made to practices on the assumption that, where salaried GPs (and principals) are paying for part, or all of their indemnity costs, the practice will reimburse to them, from the payment received, an appropriate proportion of the amount which the GP has paid for their cover.

The reimbursement amount should be based on the proportion of GMS services which the GP is providing for the practice. It is recognised that every practice will have its own arrangements in place.

See [LLMC guidance](#) for further information on this and advice for locum GPs.

2. Shared care protocols

Shared care protocols are increasingly used to transfer care from hospitals into general practice, including the prescribing of specialist medication.

It is important to note practices are not obliged to participate in shared care arrangements, which are voluntary. Shared care arrangements require additional competencies, and it is important that GPs do not undermine care for patients by feeling pressured to treat beyond their knowledge and skills. Shared care arrangements also require additional GP, nurse and administration time, and it is important that practices do not take on this additional optional work beyond their capacity to deliver. Practices should receive resources to provide this extra service, so that current staff are not diverted away from providing core needs of patients.

If the GP decides not to participate, the clinical responsibility for the patient remains with the specialist service. See LLMC's [GPSOE resources](#) for further information and a template letter which you may use to refuse a request.

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Brent LMC

Dr Amanda Craig
Dr Milind Bhatt
Dr Prakash Chatlani (Chair)
Dr Jahan Mahmoodi (Vice Chair)
Dr Nisheeth Rajpal
Dr Neeta Ghosh-Chowdhury
Dr Etheldreda Kong
Dr Ashwin Patel
Dr Shazia Siddiqi
Mary O'Connell (Practice Nurse Observer)
Shahla Jamal (Practice manager observers, job share)

To contact the Chair, any committee members or the Secretary please contact the [LLMC office](#).

Visit www.GPSOE.org.uk to help you through this state of emergency

- Letter templates
- Guidance
- Posters

3. Premises – Lease negotiations

If you are coming to the end of your lease or have been offered a (new) Heads of Terms or a new lease (including those based on the national template lease negotiated between the BMA and NHSPS) it is vital that you do not sign unless and until you fully understand and are content with your potential liabilities. If you already have a lease, the terms may include a section covering 'holding over' with terms/conditions that apply until a new lease has been agreed. You are advised to contact gpsupport@lmc.org.uk in the first instance to discuss this further. A lease is a legally binding document with significant legal and financial implications for the practice, so you are also advised to obtain your own independent legal advice on your individual circumstances before you sign. Please ensure you use specialist lawyers with expertise in GP premises issues

4. Training opportunities for practice staff

Londonwide Enterprise Ltd (LEL) was set up to provide affordable, high quality training and educational events for practice teams. Please see the list of upcoming events:

- Child and adolescent learning disabilities awareness training - FREE EVENT
10.00am to 2.30pm Thursday 28 September 2017
- Child and adolescent learning disabilities awareness training - FREE EVENT
10.00am to 2.30pm Wednesday 8 November 2017

5. NHS Standard Hospital Contract – Changes 2016/2017

NHS England has accepted a number of changes for the new NHS Standard Contract, most notably:

- Results of investigations requested by hospital clinicians should be communicated by the hospital directly to patients.
- Hospitals should directly liaise with patients should they miss an outpatient appointment rather than ask GPs to re-refer.
- Hospitals should make direct internal referrals to another department or clinician for a related medical problem rather than send the patient back to the GP for a new referral.

The changes are designed to further reduce inappropriate workload on GP practices, and also improve patient care across the primary/secondary care interface. Read the details [here](#). Practices should feedback any secondary care issues to their locality commissioning lead and copy in their [LMC](#) so that it is aware of any trends which should be taken up with the CCG at its regular liaison meetings.

PMS review

Your LMC and LLMC will be sending out regular communications on this which you are advised to look out for.

PCSE/Capita issues

KCW LMC Vice Chair and GPC Sessional Subcommittee deputy Chair provides an update in his blog on discussions with NHSE/PCSE which are particularly relevant for sessional GPs. His blog available on the BMA website. Read it [here](#)

GP contract changes for 2017/18 - National diabetes audit (NDA)

Whilst most practices are already taking part in this annual audit, from July 2017 all practices will be contractually required to allow collection of data relating to the NDA

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[Brent Local Medical Committee, Londonwide LMCs, Tavistock House, Tavistock Square LONDON WC1H, 9HX. \[www.lmc.org.uk\]\(http://www.lmc.org.uk\)](#) The next Brent LMC meeting takes place on 7 September

[Brent LMC Team](#)

[Dr Prakash Chatlani](#) – Brent LMC Chair

[Dr Katie Bramall-Stainer](#) – Medical Director/LMC Secretary

[Jane Betts](#) - Director of Primary Care Strategy

[Lesley Williams](#) - Assistant Director of Primary Care Strategy

[James Winstanley](#) - Committee Liaison Executive

[Caroline Mayberry](#) - Communications and PR Officer (Media enquiries)

[GP Support](#) – For advice and support