

Oxfordshire Practice Managers

ROUND-UP OF ON-GOING BUSINESS NOV 2007

Practice Managers' CONFERENCE

- Postponed to **23 Jan** as per Janet Newman email
- **Flyer now published – contact Janet Newman janet.newman@gp-k84037.nhs.uk if you have not had details**
- **The one day in the year designed entirely for the benefit of practice managers. An interesting agenda is in prospect and all for a very modest price (under £30)**
- **All Practice Managers (and deputies as well) encouraged to attend**

WORKING WITH THE LMC AND USING THEIR RESOURCES

From Janet Newman: From a purely personal point of view I had not realised quite how important it is to keep LMC informed of things and would just remind fellow managers that they are there to represent the GP's, and also us, on matters that may not be being resolved. A lot of matters are discussed openly and moved forward at LMC/PCT Liaison Meetings.

NEW REGISTRATION PROCESS

- From Apr 2008
- Practices connect directly with PDS
- Role of TVPCA much reduced
- New and much enlarged GMS1 registration form, including patient signature for eligibility for free NHS treatment
- **PCT/TVPCA have been asked to run workshops to brief practices on the changes**
- **Clinical system suppliers are expected to provide training on any detailed changes to the registration process**
- **More unfunded additional workload for practices.**
- **Concern expressed at LMC that significant workload going to be imposed on practices without consideration of the implications**

Checking patient's eligibility for NHS treatment

- Many practices already ask for proof
- In the future, best practice is going to be to ask for documentary proof
- **Will tie in with revised registration process**

- Ginny Hope will issue a poster/info sheet for patients to all practices
- Rules are ambiguous and still difficult to interpret (FPM's protocol helpful)

CRB CHECKS FOR PRACTICE STAFF

- Still not a contractual or regulatory requirement
- Likely TVPCA will be offering the service (for a fee) if current pilot in Newbury area successful

PCT STRATEGY

- Has been out for consultation
- 3 priorities for 2008/09:
 - Breaking the cycle of deprivation
 - Better deal for older people
 - Commissioning excellence

CHOICE & CHOOSE & BOOK

- Early mutterings about C&B are now down to a dull roar as technical problems with the system have largely been addressed (but it is still notoriously slow)
- Some practices still have practice-specific technical problems
- Oxon now amongst highest users of C&B
- NOC not playing the game by refusing to book appt before referral letter received – being addressed by PCT
- Choice & Booking DES almost certainly will not continue in 2008/09; PCT asked to look at a LES to provide incentive for practices not to drift away from C&B

HEALTH VISITING STRATEGY

- Still not entirely clear but main points seem to be:
 - More even spread of resources across county
 - Nobody has a working model upon which to base calculation of HV resources required
 - But resources required almost certainly exceed resources available
 - Skill mix so that G Grade qualified HVs are mixed with staff nurses to form teams
 - Now acknowledged that PCT's overall strategy to address deprivation may lead to further re-deployment of HVs in the future

PCT REIMBURSEMENT POLICY FOR MATERNITY LEAVE

- Currently based on £108 per locum session and PCT currently will not budge on this, despite SFE allowing up to £167. The problem is that all PCT funding is discretionary
- At some point in the future, PCT reimbursement likely to be on a sliding scale based on size of practice on the assumption that larger practices can absorb some/most of the workload without having to engage full locum cover
- Reimbursement for the very large practice in the future could be as little as £50 per session
- Meantime LMC have agreed a moratorium (12 months) with PCT ie. no change yet. Clock will not start on the 12 months notice until there is an agreement between LMC & PCT – there is no agreement at the moment
- Practices strongly encouraged to review partnership agreements as a result as impact on an individual partner in a larger practice, particularly where the partnership agreement states that the absent partner receives the benefit of the PCT reimbursement but is also responsible for full locum costs, will be significant.
- LMC has circulated PCT's draft proposals and link to BMA's current best practice advice on partnership agreements. See LMC/PCT Liaison Mtg minutes from 11 Oct 07
www.bbolmc.co.uk/lmc/oxonlmc/oxonlgmin/oxonlgmin1007.pdf

ACCESS & EXTENDED HOURS/DARZI REPORT

- The new health centres opening 7 days per week, 8 to 8, are unlikely to be seen in leafy Oxfordshire, although recent statements indicate that every PCT will get one, needed or not
- PCT/LMC emphasis is maintaining current high standard of access in contracted hours and addressing a few issues in individual practices where patient survey scores were below the local average
- PCT Board workshop to be held in Dec 07 to consider issues of Access and Extended Hours
- However LMC feel that politics will drive us towards some form of extended opening to cater for routine treatment of patients who commute away from the practice area to work
- Meanwhile practices should stand firm on the current contracted hours of 08.00-18.30

IM & T

- Choose & Book as above

- GP2GP great when it works, but only working with same clinical system practices at present
- EPS – full implementation **autumn 2008**
- Data accreditation – **timetable has been issued by Mike Stranks**
- Care Record Service – thought to be some years away
- Apollo data extraction – on-going saga **but note that Apollo is not going to be used to extract patient data for 2008 patient survey**
- NHS Choices website – shambolic implementation **but now we can input our data ourselves. Early feedback not entirely favourable**
- PCT IM&T Strategy for Primary Care to be worked up over next 3 months
- **Peter Aberly (Malthouse Surgery, Abingdon) to represent managers on IM&T Strategy Group**
- Desperate need for a better website to replace OXWEBS
- **For those unable to attend the recent workshop (13 Nov), see presentations emailed by Mike Stranks for useful updates on GPSoc, EPS, etc**

PRACTICE BASED COMMISSIONING

- Concern that LMC has had little involvement with PBC to date and that some important strategy papers eg. FURs policy, have gone through without the benefit of LMC Secretariat scrutiny
- LMC Secretariat will now be on circulation for all important papers
- Felt that exchange of information on what is going on between consortia is patchy.
- Consortia and non-aligned practices encouraged to share newsletters, strategy documents, etc which do not involve any commercially confidential information with other consortia (Do we even know who the points of contact are in the other consortia?)
- Issues around commissioner/provider split and potential conflicts of interest still foggy

BALANCED SCORECARD

- Format has been reviewed by LMC reps and Oxon PM Ctte. Scorecard much simpler, apparently, than in other parts of the country
- Much of the data will be populated by the PCT; the bits for practices to fill in will be relatively straight-forward

GPs' SUPERANNUATION and AVCs

- Recent concerns that AVCs paid by GPs were not be correctly handled and credited to GPs' accounts

- Very recent further investigation has shown that the problem which highlighted the concerns originally was a unique case which does not, it is believed, apply to any other GP in Oxfordshire

ENHANCED SERVICES

- The ES involving shared care protocols are, at last, being tidied up
- The PCT has amended the Flu DES for this year to include MS and neurological conditions ie. Stroke/TIA, as per this year's CMO letter
- We are trying to avoid one-off claim systems eg. PVC and Hib, and do it all through Miquest
- PCT will be reviewing the ES package for 2008 with a view to some rationalisation
- Testagel LES has been agreed and will be back-dated to Apr 2007

QOF 2007/08

- QOF visits seem to be going well
- Don't forget 31 Jan 08 is deadline for most evidence to be submitted

DIABETIC RETINOPATHY

- Coverage of patients has got worse since ODESS took over management of screening process
- ODESS needs to advise practices when recalls have been sent for their patients so that non-responders can be QOF exception coded

OPEN BUT FULL LISTS

- Following recent concerns around list management in Banbury, feeling that any Open But Full situation should be temporary – 3 months max
- Those 3 months should be used by the PCT and the practice(s) concerned to find a solution
- Concerns that the Global Sum does not introduce enough additional funding into practices to cover GP and staff costs for increasing list. This will make the management of population growth in Oxon difficult (known national problem)
- At the same time, we do not want current practices saying they cannot cope so that PCT then brings in an APMS contractor to fill the void
- PCT to issue a policy document

NOMAD boxes (groan...)

- There should be a properly funded scheme from Apr 2008
- Meanwhile majority of practices seem happy to issue weekly scripts

EXCESSIVE PRESCRIBING INITIATIVE

- Recent publication by PCT based on savings to be made by prescribing generically felt to be not telling the full story
- Many generic drugs now more expensive than proprietary and thus picture is more complex than may have been indicated by PCT paper
- Further work to be done

PRIMARY CARE PREMISES

- Stocktake across county complete
- Scoring system now to be applied to draw up priority list
- Meanwhile practices can bid for either minor capital grants and/or FURs
- PCT should publish results of review shortly

ORH CAPACITY

- Major concern that JRH seems to be on almost permanent divert, even before winter sets in
- Does the ORH have the capacity required?
- LMC has asked for meeting with key PCT Directors and ORH clinical leads
- Now hit by norovirus just to compound all previous problems

OCCUPATIONAL HEALTH SERVICE FOR GPs

- It still exists – contracted with Mental Health Trust
- PCT have re-advertised details of current service
- But service likely to be put out to tender

PENSION SCHEME

- Practices will have to administer 2 schemes from 1 Apr 2008
- Plus tiered employee contribution rates
- What fun!

FINANCES

- Next year's baseline uplift (or otherwise) unknown as yet but could well be zero (again)

- Impact of revised QOF unknown
- Future of Access and Choice & Booking DESs – now looks like they will cease but some form of extended hours funding introduced
- From recent workshops, PBC incentive scheme looks set to run again
- So financial picture for 2008/09 impossible to predict
- Therefore practices reluctant to invest

KNOWING WHAT IS GOING ON

How best to stay in touch? It can be very difficult to find out just what is going on both in the county and nationally. However there is a lot of useful information on websites if you know where to look. The following sources are recommended. They are not exhaustive but a quick scan through the following, say just once a week, will keep managers in touch with most of the important things:

LMC	www.bbolmc.co.uk	Under Oxfordshire, read minutes of Liaison Group (where all on-going business between the PCT and practices is recorded) and the County LMC minutes. Also read the Latest section for useful updates on many topics
Oxon Practice Managers' Committee		Read the emailed minutes. Much of the business is also ultimately reflected in LMC minutes
First Practice Management	www.firstpracticemanagement.co.uk	Fortnightly summaries particularly useful
Dept of Health	www.dh.gov.uk = Nightmare website but just 2 pages will give early warning:	
	http://www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/Dearcolleagueletters/index.htm	Dear Colleague letters. This is where many of the significant policy issues emerge
	www.dh.gov.uk/en/News/index.htm	In News section, click on What's new on the site
GP Bulletin	www.dh.gov.uk/en/Publicationsandstatistics/Bulletins/GPbulletin/index.htm	Whilst very politically correct, it does indicate what the Dept of Health thinks is important for GPs. Contains lots of links to other information
		Hint: if trying to search for something on the Dept of Health website, the search facility is hopeless. Google it instead
Oxon PCT	http://www.oxfordshirepct.nhs.uk/about-us/how-the-pct-works/trust-board/board-papers/default.aspx	See PCT Board papers, published a few days before each meeting. Some are very boring; some give a valuable insight into what is going on
Comics	Read Pulse, GP, Doctor. Subscribe to	Not always right but give you a

	Health Service Journal	useful picture of what is going on across the country
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