

September 2017

PCSE claims guidance	1
Letters to GPs from housing departments	2
LMC/RCGP AGM	2
Christmas and New Year opening 2017/18	2
Lincolnshire Practice Managers Conference	3
LMC Buying Group AGM – save the date	3
Letter from Dr Ian Hume	3
Medical and Health Coaching Academy	4
Practitioner's Programme	
Examples of learning points requested	5
Vacancies	5

PCSE claims guidance from the BMA - August 2017

We are aware that practices and individual GPs continue to experience unacceptable incidents relating to PCSE (primary care support services in England), commissioned by NHS England and provided by Capita. The issues have been ongoing for some time and we are aware of cases where practices have not received payments, or have received incorrect payments. It is never acceptable for payments to be delayed and we advise practices to follow the below process to ensure incorrect payments are corrected.

Similarly, we are aware that practices or individual doctors may have suffered losses due to the failing of these services and again we advise to follow the below process.

Process: If a practice or individual has any issue due to the service provided by PCSE, such as delays or errors in payment, they should contact PCSE in the first instance to resolve the issues pcse.enquiries@nhs.net, or you can make a complaint to PCSE by emailing pcse.complaints@nhs.net.

If the issue is not resolved by PCSE in a timely manner you should contact NHS England to make a claim at their designated email address pcse.ppinfo@nhs.net. Every case is different, and the BMA cannot advise on individual cases, however we suggest that you include the following details in your email:

- Your name and address (or the name of the practice and its address)
- The reason for your claim
- A clear explanation of the facts
- What losses are you are claiming (these may be direct losses such as your contractual payments, or indirect losses such as costs incurred as a result of having to take out a loan to pay for practice expenses)
- Attach any supporting documents which verify the facts in the letter and the amount claimed
- A date by which you want a full response, we recommend 28 days
- Any other relevant information

NHS England should then be in contact about your claim. You should note that by accepting an offer of compensation it could mean you forego the right to seek any further redress, so please consider fully all losses that you suffered as a result of failings by PCSE.

If you cannot reach agreement with NHS England over your claim, please contact GPC England (info.gpc@bma.org.uk) and we can escalate the issue on your behalf. Please include the previous correspondence and a clear outline of the issue and then desired outcome.

You may also wish to consider taking up your claim via the small claims court, however not all claims are suitable for this route.

If you are unsure about the terms of any offer or your legal rights you may wish to seek independent legal advice, however, depending on the financial loss you have suffered, this may not be financially prudent.



BMA Law offers expert legal advice at preferential rates for BMA members. They can be contacted on info@bmalaw.co.uk or 0300 123 2014.

Background: Capita has been responsible for the delivery of NHS England's primary care support services since 1 September 2015, under the name PCSE. GPs and LMCs identified serious issues with the service from the outset, with patient safety, GP workload and GP finances being affected.

GPC have been meeting with NHS England and Capita to highlight the ongoing issues, and some progress has been made following our lobbying. However, services still fall short of what is acceptable and there is still an urgent need to resolve these issues in order to give practices and locum GPs confidence in the service.

GPC believe that NHS England, as the commissioner of this service, have a responsibility to recompense practices or individual doctors who have demonstrable loss as a direct result of failures by PCSE.

In recognition of the additional administrative burden on practices, a goodwill payment of £250 payment per practice was made by NHS England and this was paid to practices by 30 April 2017. This payment should not prohibit those who have suffered a demonstrable loss from being recompensed.

Letters to GPs from Housing Departments



Across LLR the policy with regards requests for housing letter would be similar to other regions - there is no requirement for GP's to provide such letters. In fact, the councils applications for housing/housing benefits do not hold any weight for such supporting letters, we would simply inform the patients of this.

From time to time GPs are requested to provide reports for the patients to Local Housing Authorities and Housing Associations. This is not part of core services and therefore GPs may charge an appropriate fee for the work involved or you may refuse to do it.

We would recommend that you ascertain the following before providing a report:

http://www.llrlmc.co.uk/housingdepartmentsrequestinglettersfromgps

LLR LMC and RCGP joint Annual General Meeting 2017

Date: Wednesday 4 October 2017 **Venue:** National Space Centre, Leicester

Guest speakers: Professor Aly Rashid, (Medical Director/Responsible Officer NHSE Central Midlands) and Professor Mayur Lakhani (RCGP President-Elect)

For further information please visit our website or to register a place at this popular event please email susan.shaw@llrlmc.co.uk.

Christmas and New Year opening 2017/18



The following information is for practices who normally close on a Thursday afternoon. This year the Thursdays before Christmas and New Year are 21st and 28th December respectively.

For practices who close on a Thursday afternoon with skeletal staff: "As long as practices meet the reasonable needs of their patients they are not in breach of contract in accordance to GMS regulations."



Dr Rao and Dr Rizvi have also spoken with the CCG who agree with this approach, however, they would encourage practices to try and have some form of skeletal service on these days to make sure patient access is not compromised.

If you have any further queries please contact: enquiries@llrlmc.co.uk

Lincolnshire Practice Managers Conference

LLR members are invited to attend this year's Lincolnshire Practice Managers conference, taking place on 12th and 13th October 2017. The agenda can be reviewed here and book your places online.

LMC Buying Group AGM – save the date!



The LMC Buying Group have provisionally booked their AGM, it is to be held on 22nd May 2018 at Woburn House Conference Centre, London, from 13.00-15.30 – save the date!

Letter from Dr Ian Hume, GP Premises Lead, BMA

"We are writing to provide an update on the ongoing issues faced by practices in NHS Property Services' premises. We would like to thank the practices who took the time to complete and submit the BMA questionnaire. We have received almost 200 responses and albeit we are continuing to collate the information it is already clear that the data will prove vital in both highlighting the extent of the issues and helping us seek to achieve a positive long term resolution for the profession.

We are aware of the stress that these issues have been causing practices but wish to reiterate that we are of the

strong opinion that in the absence of agreement by the practice (whether in a written lease or otherwise), unilateral changes to service charges cannot be made nor enforced. To this regard we are not aware of any examples where disputed charges have been enforced. Despite this we are mindful that landlords, particularly NHS Property Services, have been communicating in a threatening manner to some practices and we are concerned that this may undermine your resolve.

With the above in mind we would like to reassure you that GPC will stand shoulder to shoulder with you in circumstances where, despite there being no legal basis to do so, NHS Property Services seek to enforce these charges. To this regard, if NHS Property Services take action to enforce charges against you please let us know immediately.

Ultimately we are still pushing to reach a negotiated agreement nationally but we are prepared to consider all and any other possibilities to realise a situation whereby a fair and reasonable process for calculating service charges is agreed which has due regard to historic arrangements and does not result in practices having to fund the historic neglect of buildings.

Until an appropriate resolution is achieved the obvious question, is what should you do in the interim? On this point our position has not changed.

Lease Negotiations. In respect of lease negotiations, albeit we support the view that practices should engage in the process it is vital that you do not sign any lease or Heads of Terms (including those purporting to be based on the national template GP lease negotiated between the BMA and NHSPS) unless and until you fully understand and are comfortable with your potential liabilities. To this regard appropriate due diligence as to your potential liabilities should be carried out.

Particular care should be taken on the issue of service charges so as to avoid a situation where there is an exposure to uncapped and unreasonable costs that bear no resemblance to what arrangements previously existed.



On the point of lease negotiations, we wanted to confirm that we are aware of recent communication that has been issued by NHS Property Services within which they threaten to refer practices to NHS England and/or the Department of Health if they do not engage with their agents in respect of their lease regularisation programme. Albeit the tone is unsettling, this communication should only be viewed as an attempt to encourage practices to engage in discussions over the terms of a new lease.

Transitional funding. We are aware that some transitional arrangements are being offered to either:

i) Cover increased costs that NHSPS wish to charge; or ii) Act as an incentive for practices' to sign a new lease.

Such arrangements should only be entered into where you are entirely satisfied that when the transitional period ends that you are not inadvertently left having to meet increased costs without the benefit of increased funding. In the view of the BMA, transitional arrangements are not the solution. More permanent arrangements which align a practices' funding to their costs are needed.

Current charges. In respect of current charges, practices should only make payments to both the extent that they are both satisfied as to the legal basis upon which they are payable and their accuracy.

Practices individually and the profession as a whole must stand together against attempts to have practices to sign up to unfavourable and destabilising leases and service charge provisions. We will, as mentioned above, continue to push for a reasonable and fair solution and keep you updated at appropriate intervals of the progress that is made. In the meantime, if attempts are made to enforce these charges, please contact us immediately. "

Yours sincerely

Ian Hume

GPC premises lead

Medical and Health Coaching Academy Practitioner's Programme



From burn-out to renewed enthusiasm for General Practice - Health Coaching programme is a win-win

Burnout isn't just the latest buzzword, it is a reality for many GPs, with many more 'just surviving'. Every day clinicians are seeing more patients with complex conditions, and spending huge amounts of time in conversations with patients with long-term conditions.

The Medical and Health Coaching Academy practitioners programme offers clinicians the opportunity to develop and build skills and techniques that change the nature of these conversations, achieving different outcomes for themselves and their patients.

Local Leicestershire GP, Dr Zahida Adam, is already experiencing benefits after just two days on the course. "As doctors we spend years mastering the art of questioning, to solve diagnostic conundrums, we ask open questions and we actively listen. Learning coaching techniques however, I have realised my questions weren't truly open, they were open enough to test my working diagnosis; and my active listening was directed to gathering the information I needed rather than really hearing what else the patient was offering. Now my conversations are richer, and more productive, and surprisingly require less work on my part!"

The Coaching in Health for Practitioners programme offers knowledge and skills in areas including: coaching, behaviour-change, working neuroscience, emotional intelligence and stress reduction. It's highly practical, with an emphasis on developing yourself as well as



designing the conversations you will have with patients to create an empowering partnership.

"I have found that adopting a coaching style in some of my more difficult consultations can really help ease the burden of responsibility that GPs often unnecessarily carry. With the bonus of it empowering patients, and leading to a higher likelihood of behavioural change," continues Dr Adam. "I have felt more connected to patients, without feeling the drain of 'having given too much' at the end of the day. We spend more of our time now on prevention and managing long term conditions, and many conversations focus on lifestyle changes that NEED to be made. With coaching, you can really change this dialogue, to one with less resistance and better outcomes. Coaching in Health really is a win-win situation for all!"

The programme consists of 2+1 face-to-face and four 1.5-hour online webinars (at times convenient to participants). A few places are still available on the next programmes: 10th & 11th October 2017 and 26th January 2018; 1st & 2nd November 2017 and 26th January 2018.

For more information and to secure your place: Contact Lesley Thompson or Kaye Burnett on 07753 811474 or admin@beyond-consultants.co.uk

Examples of learning points requested



Do you have any articles which you feel may be of benefit if shared with our members? Perhaps examples of learning points which have arisen in your practice, or something that is going on in your area, which you feel may be of interest/relevance to others?

If so, please email them to enquiries@llrlmc.co.uk anonymising patient and practice and we will include them as a regular feature in our future newsletters.

Vacancies



GP

Uppingham Surgery, Rutland Closing date: 10.12.17

Advanced Nurse Practitioner

Uppingham Surgery, Rutland Closing date: 10.12.17

GP Partner or Salaried GP with a view to partnership

Ruddington Medical Centre, Nottinghamshire

Closing date: 20.09.17

GP Salaried/Partner

Alvaston Medical, Derby Closing date

GΡ

South Devon

Closing date: 30.09.17

Replacement Partner(s)

The Osmaston Surgery, Derby Closing date: 30.09.17

Salaried GP/GP Partner

Melbourne and Chellaston Medical Centre, Derbyshire

Opportunity to work flexibly in General Practice

Barnby Gate Surgery, Newark

For further information visit: http://www.llrlmc.co.uk/jobs