

HARROGATE & RURAL DISTRICT LOCALITY ROADSHOW BULLETIN

YORLMC represents all GPs and their
practices in:

- Bradford, Airedale, Wharfedale and Craven
- North Yorkshire and the City of York

Providing:

- ◆ Support & Advice
- ◆ Pastoral Care
- ◆ YORLMC Law
- ◆ HR & Employment
 - ◆ Training
 - ◆ Events
- ◆ YORLMC News
- ◆ YORLMC Buying Group

Included within this newsletter is a summary of the information that was shared at YORLMC's Harrogate & Rural District Roadshow held on 25 May.

Key features inside this issue

<u>Changes to the GP contract for 2017/18</u>	2
<u>GP Forward View</u>	2-4
<u>The work of YORLMC and its growing suite of services</u>	5-6
<u>Getting involved with YORLMC</u>	6-7
<u>YORLMC Conference</u>	7-8
<u>YORLMC Corporate Affairs Team</u>	8

Changes to the GP contract for 2017/18 can be found [here](#)

As part of the GP contract negotiations for 2017/18, the BMA GPs committee (GPC) England has reached agreement with NHS Employers on changes to sickness cover reimbursement for GPs. Please be aware that GPC guidance has been published that reminds practices that they need to be aware that if they hold **locum insurance to cover any absence within practice** that the current maximum weekly payment may not fully cover the cost of a locum and the amount of time they are needed to work in the practice, particularly if they are replacing a full-time GP. For this reason the GPC and YORLMC recommends that practices review their current cover and consider maintaining a level that will allow them to top up the national payments based upon their individual and local circumstances.

Also as part of the 2017/18 GP contract agreement, it has been agreed that £30m will be paid to practices to cover 2016/17 rises in indemnity insurance costs for all doctors delivering GMS work. A briefing note on how these payments will be made is [here](#) and an FAQ about changes to the 2017/18 GP contract [here](#).

With regard to the **Quality and Outcomes Framework (QOF)** – there have been no changes made to the indicators in QOF or the total number of points. There has been an increase to the value of a QOF point as a result of the Contractor Population Index (CPI) adjustment to take into account of the growth in the population, as well as any increase in average practice list size. The GPC has also agreed to the setting up of a working group to discuss the future of QOF after April 2018.

Local arrangements that depart from a nationally negotiated GP contract including the development of local QOF can lead to variation in clinical standards between local areas, with the high standards achieved by practices on a national level potentially falling. They also seriously undermine national contract negotiations, potentially leading to worse financial outcomes for practices and ultimately a negative impact on patients in the long term.

GP Forward View

YORLMC continues to map the funding pledged in the GPFV and through its liaison structure is discussing with the CCGs and NHSE the most appropriate ways for practices to access the complex funding support streams that now exist.

The GPFV promises £3 per head for GP practices to be invested in the next 2 years to achieve this transformation and there is now an urgency to debate the drive to establish GP working at scale. It is becoming increasingly clear General Practice locally and nationally will need to develop a new model of practices working together both to remain strong and viable but also to create a level playing field as we are encouraged to work together with other larger elements of Health and Social care.

The feedback YORLMC is receiving from CCGs is that it is very difficult for them to invest the £3ph to support practice transformation and it is worth noting that this is not new money to CCGs but instead funding they need to find from within their baselines. YORLMC is therefore continuing to discuss with the CCGs how they identify these funds but is impressing upon

them this investment which has been confirmed as a 'must do' has to be invested in full. It does however rely on GPs identifying and developing the local model. It is YORLMC's belief this is the only opportunity to access a one-off investment to create time and headspace to help practices make this leap to working at scale.

It is possible within HaRD that if primary care or YHN can produce a good business case then funding equivalent to £3/head (approximately £500k) will be made available to help primary care to work at scale. It is being considered at present whether there is an option for an overarching company to help primary care work more efficiently at scale, for example by sharing back office functions and accreditation (e.g. CQC). This has been achieved in other areas without redundancies but with significant cost savings. Practices would remain independent with regard to day to day decision making, staffing levels and profit.

Please influence your Council of Representatives to discuss how this £3ph of funding is spent in your locality.

CCGs have received funding to enable them to improve access to General Practice services, this includes achieving the Government's desire for General Practice to operate from 8am to 8pm 7 days per week. Please be aware however that although this is a must do for CCGs, there is no obligation on General Practice to provide an 8-8, 7 day service.

YHN has been commissioned to provide a report looking at the feasibility of running an extended access service locally. This report is due for completion in the next few weeks. Although not committing primary care to anything, the report will layout an option for providing an extended access service locally. This will allow £6/head of population, additional (the only new money on offer) funding into primary care. The feasibility report will have taken into account primary care views as well as those of the public.

YHN is also two years into a three year project to develop new ways of working in the form of **New Care Models/ pop-up/Integrated response (IR)**. After two years its plans were not showing the savings necessary and were not innovative enough to make a difference. For this reason TEWV agreed to work with the team to adopt their way of working. This system of working has a few key features to it. These are daily meetings ("Huddles") of the whole team (including GPs) to discuss new referrals, "hot" patients, problems, successes and discharges. "Open diaries" are also a feature in that members of the team have open diaries so that the whole team can see what each member is doing (not including GPs); this links to "activity planning" for the team and has led to improved efficiency. Also available in the team office are "visual control boards" so that the success of the team can be seen instantly, for example, numbers on the caseload and admissions prevented. The idea is for patients to be taken on, sorted out, and discharged efficiently.

Linked in with the IR above YHN has funding for a **pilot acute visiting service** whereby a paramedic has been seconded from YAS to do primary care visits. The paramedic will be allocated visits by the practice and will liaise with the IR having assessed the patient. They will also liaise with the practice and record outcomes etc. in the patient record.

The BMA and NHSE have each produced guidance on the GPFV:

<https://www.bma.org.uk/advice/employment/gp-practices/general-practice-forward-view>
<https://www.england.nhs.uk/gp/gpfv/>

Also of interest are the presentations that were delivered at a GPC/LMC conference held on 23 February entitled "Working together to sustain general practice". The purpose of the event was to hear from those on the ground with firsthand experience of working in new models of care and the presentations given can be viewed [here](#)

The BMA has also produced a short guide [here](#) explaining the different types of models of care that are evolving. The emergence of Accountable Care Organisations (ACOs) has significant implications for General Practice. This is because the basic concept of an ACO is that a group of providers, for example an Acute Trust, a GP federation, Local Authority, social services and voluntary sector will come together to provide a range of services. Collectively they will agree to take responsibility for providing all care for a given population for a defined period of time under a contractual arrangement with a commissioner. The providers collectively will be held accountable for achieving a set of pre-agreed quality outcomes within a given budget or expenditure target. GPs as providers within an ACO model are unique in the sense that they are the only group whose personal assets will be at risk. It is therefore very important that GPs ensure that resource for work within the framework of an ACO is ring fenced to ensure that their practice contract (whether GMS, PMS or APMS) is protected and importantly to ensure that individual livelihood and personal assets are not placed at risk.

YORLMC therefore strongly recommends practices take legal advice before proceeding with any changes to their business model. Although YORLMC Ltd cannot provide individual GPs or practices with legal or financial advice it does now offer a range of legal services to all its constituents under the banner of YORLMC LAW – in conjunction with LMC Law Limited and information relating to this service can be found later in this update.

One feature of the GP Forward View are the various initiatives to seek to address workforce challenges. Of particular interest and relevance to General Practice is the [Retained Dr scheme](#). This is a package of support which includes financial incentives and development support to help GPs who might otherwise leave the profession to remain in clinical general practice. Practices employing a GP in this scheme will now receive £76.92 per session per week compared to £59.18 previously.

The annual payment towards professional expenses for GPs on the retained scheme will increase from £310 to between £1,000 and £4,000 depending on the number of weekly sessions worked. For example, £1,000 for one session worked and £2,000 for two sessions worked etc.

The scheme is open to doctors who meet ALL of the following criteria:

1. Where a doctor is seriously considering leaving or has left general practice (but is still on the National Medical Performers List) due to:
 - o Personal reasons – such as caring responsibilities for family members (children or adults) or personal health reasons or
 - o Approaching retirement or
 - o Require greater flexibility in order to undertake other work either within or outside of general practice.
2. And when a regular part-time role does not meet the doctor's need for flexibility, for example the requirement for short clinics or annualised hours.
3. And where there is a need for additional educational supervision. For example a newly qualified doctor needing to work 1-4 sessions a week due to caring responsibilities or those working only 1-2 sessions where pro-rata study leave allowance is inadequate to maintain continuing professional development and professional networks.

Doctors must hold full registration and a licence to practice with the GMC and be on the National Medical Performers List.

Doctors who are interested in applying to the scheme should contact their HEE Scheme Lead who will be able to advise on their eligibility for the scheme.

The work of YORLMC and its growing suite of services

YORLMC's core services include:

Regular liaison between Officers of YORLMC and representatives of NHSE, CCGs, Local Authorities, Trusts and other organisations to :

- actively promote General Practice
- hold commissioners and providers to account
- influence the development of New Models of Care

YORLMC Officers also provide a confidential [pastoral service](#) to individual GPs and practices in difficulty or who are experiencing major change - the earlier a problem or potential problem is raised with us the better, but don't hesitate to contact us, whatever stage it has reached. Information about the **NHS GP Health service**, a nationally funded service for GPs and GP trainees suffering mental ill-health and addiction can also be found [here](#)

Through regular Newsletters and Branch Reports, emails and [web site](#), YORLMC's Corporate Affairs Team raises awareness and provides information to GPs and Practice Managers relating to national and local developments, including their impact on the local health economy. We appreciate there is a lot of information to absorb and we have recently changed the format of our Newsletters so that you can more easily identify the articles you are most interested in.

YORLMC's Corporate Affairs Team also assists GPs and Practice Managers with a wide range of queries - if we don't know the answer we are usually able to sign post to someone who does.

YORLMC also has a growing suite of additional services available to practices and these are summarised below.

- a range of legal services to practices and Federations under the banner of [YORLMC Law](#) at no additional cost. Many individual GPs, Practices and Federations have benefitted from this service since it was first launched during 2016. There is also the opportunity to obtain preferential rates on services falling outside of the YORLMC LAW service, for example partnership drafting and amendments to existing agreements which will be charged at discounted and competitive rates.

YORLMC is supporting and funding the delivery of these services utilising LMC reserves, with a view to ensuring that practices and federations receive high quality expert advice from legal professionals with significant NHS experience.

To access the services of YORLMC Law please contact the Corporate Affairs Team (contact details at the end of this bulletin)

- YORLMC is also now offering a [HR and Employment Indemnity Package](#) delivered in conjunction with AXA Insurance and available to practices and federations at very competitive rates and under a contract which can be renewed annually. This is a real bonus when compared to the cost and tie-in periods offered by other national providers and the policy will cover any claim regardless of its chances of being successfully defended.

The service is only available to the medical profession and is run by healthcare experts in employment law. To access this service please refer to our website [here](#)

- [YORLMC's Buying Group](#) aims to provide discounted services to practices and GP federations for a wide range of goods and services that they buy regularly. These are provided by LMC Buying Group approved suppliers (currently 23) whose discounts have been verified as being likely to yield significant savings compared with others in the market; and who, have satisfied the Buying Group due diligence checks and customer satisfaction requirements which are reviewed regularly.
- YORLMC recognises the importance of training in all areas of general practice and understands how time consuming it can be to source the correct courses for practice staff. YORLMC's Training, Education and Development service has been designed as a resource that will provide training locally for all members of the practice team and is:
 - ⇒ providing a range of clinical and non-clinical training, examples include but are not limited to BLS, Vac & imms, leadership skills, medical terminology
 - ⇒ providing advice on whether training is mandatory or best practice
 - ⇒ sourcing different types of training, e.g. e-learning
 - ⇒ able to suggest alternatives where a particular course is not provided
 - ⇒ co-ordinating training for groups of practices – YORLMC is currently working closely with a number of CCGs to provide training for various GPFV workstreams
 - ⇒ offering in-House training courses – YORLMC has a number of courses that can be delivered in practice during protected learning time events
 - ⇒ delivering Practice Manager Peer Appraisals having been invited to be one of 3 LMCs nationally to take part in a pilot scheme; this involved training 6 practice managers to become appraisers and who will carry out 24 appraisals on practice managers across YORLMC's geography
 - ⇒ offering [Lunch & Learn](#) training packages; these provide a different way for practices to train their staff as it provides all the materials needed to enable training to be delivered over a lunchtime.

It is now possible to book directly onto [courses and events](#) through the website . For more information on any aspect of YORLMC's Training, Education and Development service please see our [website](#) or contact Leanne Ashton either by email: leanne.ashton@yorlmc ltd.co.uk or DD phone 01423 623626

Getting involved with YORLMC

If you would like to know more about the work carried out by YORLMC please remember that Division meetings are open and GPs and practice managers are encouraged to attend and take an active role in discussions.

Meeting dates are [here](#) but as with any meeting venue, capacity is limited so please let Stacey.fielding@yorlmc ltd.co.uk know if you are planning to attend.

YORLMC recognises the diversity of contracts held by GPs and is aware of the importance of ensuring that a wide cross-section of GPs are represented. Please consider putting yourself forward for election when the opportunity next arises to ensure the continuation of effective representation. If you would like to discuss the role with existing representatives their contact details can be found [here](#). You can also see more information about the roles and responsibilities of members [here](#). The next elections for part of the Committee will take place January – March 2018 and those elected will take office from 1 April 2018 for a period of up to 4 years.

The following advantages of being elected to the Committee have been highlighted by current Members:

- greater understanding of the political arena in which NHS general practice is placed
- assists development at all stages of a career in general practice
- enhances existing clinical and practice management skills and helps to develop communication and negotiation skills, diplomacy and accountability
- provides opportunities to work with other agencies at local and national level and to develop relationships with key individuals within those organisations
- the ability to influence initiatives affecting the livelihood of practices and the working lives of colleagues
- Members' own practices benefit from the knowledge membership brings which aids business planning
- provides the opportunity to meet with GP colleagues working across the wider Yorkshire and Humber region
- Salaried GP representatives have commented specifically that involvement with the Committee allows them to raise awareness of issues affecting sessional GPs, provides up to the minute information about key issues in the area, particularly relating to the Acute Trusts, CCGs, NHS England and the Local Authorities, and the opportunity to meet with GP Principals in the area. They have also noted that membership has highlighted that the Committee is not just a talking shop

YORLMC CONFERENCE—17 OCTOBER

YORLMC is pleased to announce that its first Annual Conference will be held on Tuesday 17 October at the Pavilions of Harrogate, Great Yorkshire Showground, Harrogate.

This full day Conference is designed to help GPs and practice teams navigate the changing landscape of general practice by providing practical information and advice on new models of care, future proofing general practice, working within the changing shape of the GP workforce, new consultation types, social prescribing and more. While we recognise this is a serious challenge for practices, our aim is that the day will be informative, inspirational, interactive and entertaining.

A full programme will be available in due course but to secure your place, for a nominal fee of £40 per person, please book as soon as possible via the link below to avoid disappointment.

<https://www.yorlmc.co.uk/events/3360>

You will need to create an account if you don't already have one. Creating an account is quick and will allow you to book onto this and any future YORLMC events. Alternatively, please contact [YORLMC's Corporate Affairs Team](#) with your name, role and practice address.

The event is open to GPs, GPRs and practice staff and will count towards CPD.

Contacting YORLMC's Corporate Affairs Team

An overview of the roles of individual members of YORLMC's Corporate Affairs Team and their contact details can be found [here](#) .

Although individual members of the team have their own areas of responsibility any member of the team will be pleased to assist you.