

31 March 2017 / Issue 205

About this bulletin

To minimise the number of emails sent to practices, the Area Team is using this weekly bulletin as its main method of communicating with practice managers covering the 375 practices in Bristol, Somerset, North Somerset, South Gloucestershire, Devon, Cornwall and the Isles of Scilly. The bulletins contain important information for practice managers, which might include requests for information and deadlines, as well as updates on issues relating to GP contracts.

Copies of the bulletins and attachments are available on our website:

<https://www.england.nhs.uk/south/info-professional/medical/dcis/gp-bulletin/>

If you have any questions or wish to provide feedback, please contact the Primary Care Team:

england.primarycaremedical@nhs.net

Contents

- Key Deadlines
- Items for all Practices
 - National Diabetes Audit (NDA) report 2015-16
 - Models of Care Portal
 - Claims for target payments for childhood vaccinations & immunisations from 31 March until 1 May
 - Childhood immunisations reporting to CHIS
 - Bowel Cancer Awareness month
 - NHS England to recommission Child Health Information Services across South West
 - IMPORTANT- ACTION REQUIRED: Avoiding Unplanned Admissions 2016/17 Component 3
 - IMPORTANT - ACTION REQUIRED: QOF Year End 2016/17
 - 2017-18 Rates Reimbursement Form
- Items for Bristol, North Somerset, Somerset and South Gloucestershire Practices only
 - None
- Items for Devon, Cornwall and Isles of Scilly Practices only
 - Devon GMS Contract Payment date

Key Deadlines

CQRS declarations for payment in the same month	9 th of each month	Via CQRS
The second bi-annual extended access collection is open for submission	31st March	Via Primary Care Webtool www.primarycare.nhs.uk
Manually input 4 manual indicators for QOF 2016/17	by midnight on 31 March 2017	Via CQRS
Sign up for 2017-18 Enhanced Services	13 April 2017	Via Email
Avoiding Unplanned Admissions 2016/17 Component 3 – Reporting Template	30 April 2017	Via Email to england.primarycaremedical@nhs.net

• Items for all Practices

National Diabetes Audit (NDA) report 2015-16

The National Diabetes Audit report for 2015-16 has been released and covers, care processes, treatment targets, structured education and for the first time, learning disability. The data is split between Type 1 and Type 2 and other.

A copy of the national report as well as supporting documents can be accessed <http://www.content.digital.nhs.uk/catalogue/PUB23241>

The CCG and GP level data is available via an interactive spreadsheet and there is now the option of being able to select and print off individual reports. The 'how to' guide explains this process.

For further information please contact Michelle Roe, Cardiovascular Clinical Network Manager, michelle.roe@nhs.net

Models of Care Portal

Have you made changes to the way you or your organisation work? If so the South West Academic Health Science Network would like to hear about how and what you have done and share the learning across the region. Email them and share all the fantastic work going on in the South West in Primary Care. They will share it through their Models of Care Portal.

Attached is a copy of the promotional flyer used to advertise the functionality of the Models of Care Portal www.modelsofcare.co.uk. This image can easily be copied into emails and shared with

any colleagues who you feel may benefit from accessing the Models of Care Portal or the GP-WAT (Workforce Analysis Tool) and other useful resources.

If you require any support or assistance registering, uploading information or downloading the GP-WAT (Workforce Analysis Tool) please do not hesitate to contact andrea.melluish@nhs.net or jennifer.baker@swahsn.com

Claims for target payments for childhood vaccinations & immunisations from 31 March until 1 May

Practices are reminded that they should submit claims for target payments for childhood vaccinations & immunisations from 31 March until 1 May. Please check the PCS England website for details:

<http://pcse.england.nhs.uk/gp-payments/>

<http://pcse.england.nhs.uk/wp-content/uploads/2015/12/PCSE-Practice-Guide-Childhood-Immunisations.pdf>

Even if immunisation data is uploaded by child health in your area, individual practices must log on and 'submit' for the payment to be authorised.

Childhood immunisations reporting to CHIS

Please can all practices remember to inform CHIS about all childhood immunisations including those given as travel vaccinations.

There have been recent incidents where duplicate vaccinations have been given in school based sessions where CHIS do not hold this information.

Contemporaneous reports sent to CHIS will help to mitigate this risk.

Bowel Cancer Awareness month

April is Bowel Cancer Awareness month and this year the focus is on Bowel Cancer Screening.

You can support Bowel Cancer Awareness month in your GP practice by using any of the resources listed in the document attached.

Key messages:

- Bowel cancer is the 4th most common cancer in the UK
- When Bowel cancer is diagnosed early, treatment is more successful
- Bowel cancer screening saves lives
- If you're registered with a GP and aged 60-74, you will receive a free NHS bowel cancer screening test in the post every two years

- If you've been invited to take part in bowel cancer screening and need more information or a new test kit, please contact: Freephone **0800 707 6060**

Why bowel cancer screening is so important

Screening can detect bowel cancer early before any symptoms appear, when it is easier to treat. It can also prevent bowel cancer from developing in the first place by picking up non-cancerous growths (polyps) which could become cancerous in the future. Bowel cancer screening saves lives but at the moment there are still small pockets of the SW where only a third of those who receive a test complete it.

NHS England to recommission Child Health Information Services across South West

You may be aware that NHS England has recently announced its intention to recommission Child Health Information Services (CHIS) across the South West (Isles of Scilly to South Gloucestershire) as the two largest existing contracts are due to expire in 2018. For the purpose of the procurement CHIS is being defined as:

1. An IT system the Child Health Information Service System (CHISS)
<https://www.gov.uk/government/publications/child-health-information-systems-information-requirements-and-output-specifications>
2. A child health records department (CHRD), the people who run the system and required services.
3. A personal child health record (PCHR), the 'Red Book' including supporting the introduction of an electronic red book.

This represents a real opportunity to address historical inconsistencies in service that currently exist across the South West, as well as ensuring that services are in a position to move forward with the agenda for Transforming Child Health Information with a key emphasis upon interoperability. To achieve this there are a number of key decisions that we need to make in the coming months and we would value your participation in this process. In order to determine the optimal geographical footprint for the future service an online survey has been developed. There are a number of options available to us and responses will be incredibly important in informing the decision making process. The survey can be found at <https://www.engage.england.nhs.uk/survey/a1f86ce4> and is live until Tuesday 11th April 2017. We would appreciate as many people completing this as possible please do feel free to circulate internally as well.

To help inform responses to the survey two documents are attached - the first contains some general background information and the second is an options analysis attempting to give some of the pros and cons associated with different geographies. Please have a look at these before you identify your geographical preference however, please note the options analysis is not exhaustive and individuals may have other views and perspectives. There are opportunities within the survey to insert free text so please use this space to express your opinions – all are relevant and will be analysed.

We will keep you regularly updated on progress throughout the procurement process. Should you have any queries or if you would like to be further involved in the procurement please contact us via phcontractssouthwest@nhs.net.

IMPORTANT - ACTION REQUIRED: Avoiding Unplanned Admissions 2016/17

Component 3

There is limited time left to ensure that the final Component 3 data extraction is correct for your Practice, before the final data extraction. Please note that, in line with the national guidance, we will not be making data amendments for coding issues.

The 'for information only' extraction of February 2017 data has now been undertaken and available for Practices to review on CQRS, simply run the 'Avoiding Unplanned Admissions' report. If the extracted data is not as expected please check:

- Read Codes and the order matter - We have provided guidance about the Read Codes and the appropriate order in previous GP Bulletins and we have attached this again for ease of reference. Please note, it is a requirement of the service (section 6.11 of the service specification or final paragraph of the 'Monitoring' section in the 2016/17 GMS Contract – Guidance and Audit document), to use the relevant Read Codes, as detailed in the Business Rules and Technical Requirements document. These codes are used as the basis for the GPES data collection and allow CQRS to calculate payment.
- New Patients - If a patient has left the Practice for any reason and subsequently re-joins or a new patient joins the Practice who was the Care Management Register at their previous Practice, should you put them back onto the AUA Care Management register, you must re-enter the admission avoidance care started codes, allocate the named accountable GP and carry out a care plan review, coding it all after the date of admission avoidance care started. If you do not then subsequent recorded activity is not collected.
- Contact your clinical system supplier – if the extracted data is not as expected or you have not had a data extraction, please contact your clinical system supplier as a matter of urgency to investigate and resolve. It is the clinical system supplier who undertakes the search and extraction, based on the Business Rules, and they provide counts to GPES and CQRS. Your clinical system supplier and the Practice are the only ones who can view the data at patient level. Please note that the searches provided by clinical system suppliers on the clinical system may not be set-up in line with the business rules and therefore should not be relied upon to monitor achievement, if you are not sure please check with your clinical system supplier.

If the Practice has achieved less than 2% for Component 2, please note you will need to achieve over 2% for Component 3 to ensure achievement of the 2% average requirement. The average is calculated using the achievement from 30 September 2016 and 31 March 2017 extractions only. You can use the Avoiding Unplanned Admissions Report on CQRS to check the calculated

achievement percentages. Please be aware that CQRS rounds figures to 7 decimal places when you are checking your achievement.

Please note if the Practice does not meet all the requirements of the DES, there may be a recovery that will be calculated at the end of the year. The details of this are clearly set out on page 32-33 of the General Medical Services GMS Contract Guidance for GMS Contract 2016/17 or page 21 of the service specification.

Departed Patients

You will be able to manually enter the departed patients (those who were on the Care Management Register but left or died between 1 October 2016 and 31 March 2017), following the extraction of data for 31 March 2017 and this must be done before the submission is declared.

To add departed patients to the 31 March 2017 submission, go to the 'Data Submission' tab, selected the 'Avoiding Unplanned Admissions Com2 and 3 2016/17' from the list of Quality Services, select the 31 March 2017 achievement date and then select 'AUA Payment'. The Departed Patients count should be entered in the bottom box:

Indicators

Indicator ID	Description	Date Submitted	Submitted Values	New Values
AUA001	The total number of patients aged 18 years or over on the avoiding unplanned admissions case management register, who have been allocated a named accountable GP and who have an up-to-date avoiding unplanned admissions care plan/ care plan review or who have declined an avoiding unplanned admissions care plan/ declined care plan review up to the end of the payment period.			<input type="checkbox"/> Number of Qualified Patients <input type="checkbox"/> Departed Patients

IMPORTANT - ACTION REQUIRED: QOF Year End 2016/17

Manual Indicators

A number of Practices have yet to complete the four manual indicators on CQRS for 2016/17, they must be completed by midnight on **31 March 2017**. These indicators require a 'Yes/No' response and therefore cannot be automatically extracted by your clinical system supplier. The four indicators are in Palliative Care, Smoking and two in Cervical Screening, please see the attached User Guide for the step by step process. Until this information has been completed your QOF achievement will not be calculated and may result in a delay to payment.

2017-18 Rates Reimbursement Form

Please find attached the updated 2017/18 claim forms to be used when submitting reimbursement requests to the finance team. Unfortunately we are unable to accept paper copies of invoices and any claims that are not sent electronically will not be valid for processing.

- **Items for Bristol, North Somerset, Somerset and South Gloucestershire Practices only**

None

- **Items for Devon, Cornwall and Isles of Scilly Practices only**

Devon GMS Contract Payment date

Reminder: As per GP Bulletin 184 dated 4/11/16

Devon GMS practices are paid a week earlier than GMS practices in the rest of England. As GMS contract amounts are paid directly from the centre this needs to be rectified and Devon GMS practices brought into line with the national payment date.

This item is to give GMS practices notice that from 1st April 2017, Devon practices will be paid at the end of the month in line with other GMS practices.