

GP Bulletin

26 May 2017 / Issue 213

About this bulletin

To minimise the number of emails sent to practices, the Local Regional Team is using this weekly bulletin as its main method of communicating with practice managers covering the 371 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

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- Items for Bristol, North Somerset, Somerset and South Gloucestershire Practices only
 - None
- Items for Devon, Cornwall and Isles of Scilly Practices only
 - None

Key Deadlines

CQRS declarations for payment in the same month	9 th of each month	Via CQRS
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Enhanced Services Contract Variations	By 26 May 2017	Via Email to england.primarycaremedical@nhs.net
Immunisation Training Needs Reassessment – Somerset practices only	By 26 May 2017	Via https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=8l4K4p7M
KO41b Complaints return to be submitted	between 9 May – 7 June	Via www.primarycare.nhs.uk
Declarations of QOF 2016/17 Achievement to receive payment in June 2017	9 June 2017	Via CQRS

- **Items for all Practices**

QRISK2 review process update: Enhanced Service in recognition of work caused by QRISK2 mapping error

Just a reminder for all practices that you have only a short period of time to claim for the required work to review the patients affected by the TPP QRISK 2 error. Even if your practice does not use System1 you may have had patients register with your practice who have been affected and do need this error amended. Can all claims be made by promptly after the end of May please.

Revised Process for Reimbursement of Premises Costs

In order to reduce payment delay's occurring when claims for more than one element of premises reimbursement are requested, we have created an additional generic mailbox for water reimbursements where this was previously shared with Non-Domestic rates reimbursements. We have also separated the forms so that there are individual forms for each type of reimbursement. The forms are all formatted in the same way but colour co-ordinated to distinguish between the three. Please fill out the white cells of the forms and send back in the same document format (Microsoft Excel) accompanied with supporting copies of invoices from suppliers where necessary.

It is important to note that requested reimbursements can only be made when the request matches exactly the amount stated on the invoice.

CQRS Data Amendments – New Request Form

Each month we receive a significant number of emails requesting data amendments for CQRS services, and each email may contain one or more data amendments. For example, between 1st and 24th May we have received approximately 100 emails, containing approximately 250 data amendments. Also, the data for amendment is provided in various formats and often there is missing information that means we have to seek clarification before the data amendment(s) can be made. Therefore, in order to help us process these data amendments efficiently, all future data amendment requests must be made using the attached CQRS Data Amendment Request Form, and returned to england.primarycaremedical@nhs.net.

We aim to make data amendments within 48 hours, however, this will vary dependent upon capacity within the team. We also aim to have all amendments completed ahead of the declaration deadline (9th of each month), however, we cannot guarantee that requests received less than 2 working days before this will be processed in time. Please note that if you do not complete all the information requested on the form, this will delay the amendment(s) being undertaken.

Important Considerations:

- If the extracted data on CQRS is not as you would expect, and you have not been able to identify the reason and resolve, you need to raise the issue with your clinical system supplier (as they undertake the search and extract the data) to investigate and resolve prior to the next data extraction
- By declaring the submission under the 'Achievement' tab, the Practice is declaring that the activity reported is correct
- Once a submission has been declared under the 'Achievement' tab, it cannot be cancelled/deleted or returned to you. We will need to make the appropriate data amendment and then the submission will be available under the 'Achievement' tab for you to re-declare
- Once a submission has been financially approved it cannot be amended, so you should not declare unless you are certain that the submission is correct
- We do not routinely undertake reconciliations (full year or a number of months) of activity and payments, you should be checking the data extracted is correct and requesting data amendments as appropriate, on a regular basis
- The majority of data amendments requested are due to coding issues, please refer to the Technical Requirements 2017/18 (available on the [NHS Employers](#) website) for details of the Read codes that must be used for each service to enable the data extraction to be undertaken

- Left or deceased patients – patients who are vaccinated in a reporting period and then leave the Practice prior to the extraction will not be included in the data extracted. This is for information governance reasons, and the National Team is working to see if this can be resolved for future years. We will amend the data for these patients on your request

QOF Payment Queries

The team have received a large number of queries about QOF 2016/17 payments, especially about a number of aspiration payments and also around settlement payments. All QOF payments are generated within CQRS and we at the Local Regional Team do not instruct separate payments, therefore it is often difficult for us and our primary care finance colleagues to respond to the queries.

That said, it is our understanding that the national issues with prevalence are now resolved, QOF 2016/17 was recalculated in May following a standstill in April where no payments were made. We believe that CQRS is in the process of sorting itself out and this may have resulted in a number of irregular payments recently. Unfortunately we cannot change any payments as this is all done on system. Now that the QOF 2016/17 achievement has been declared and approved, we ask you to be patient whilst CQRS adjusts. Any practice that has not already declared achievement should check CQRS and do so promptly to avoid any unexpectedly low aspiration payments.

General Practice Workforce Analysis Tool (GP WAT) updated on Models of Care Portal

The General Practice Workforce Analysis Tool (GP WAT) has just been updated on the Models of Care Portal, the latest version can be downloaded via <https://modelsofcare.co.uk/workforcetool>

Based on the latest NHS Primary Care Workforce Census data, improvements to the GP WAT include:

- Data tables showing detailed information breakdown per CCG or STP
- Practices grouped by cluster
- Practices identified by various quintiles including IMD, QOF and patients over 65 and 80
- Percentage of GPs and Nurses aged over 50 and 55 to indicate potential workforce retirement

The Models of Care Portal is a web platform developed as part of the programme to support workforce sustainability. The unique online resource is available across the NHS to aid learning, share tools and the achievements of health organisations. To register click [here](#).

If you would like to share examples of your good practice, have any improvement suggestions or would like an overview of the portal individually or at a meeting, please get in touch with andrea.melluish@nhs.net and jennifer.baker@swahsn.com

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

None

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

None