

GP Bulletin

24 March 2017 / Issue 204

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

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 - None

Key Deadlines

CQRS declarations for payment in the same month	9 th of each month	Via CQRS
Avoiding Unplanned Admissions 2016 / 17 Component 3	30 April 2017	Via Email
The second bi-annual extended access collection is open for submission	31st March	Via Primary Care Webtool www.primarycare.nhs.uk
Sign up for 2017-18 Enhanced Services	13 April 2017	Via Email

• Items for all Practices

Extended access collection: information for GP practices

The second bi-annual extended access collection will close on 31 March 2017 inclusive. All GP practices are required to complete this return, even if they do not provide an extended hours services. As set out in the 2016 regulations, every GP practice in England will be required to submit an online return twice a year through the Primary Care Web Tool.

So far 75% of practices have completed the return, however South Gloucestershire practices are in the lead with 84% of returns complete, whereas only 65% of Kernow CCG practices have completed this task. We would greatly appreciate it if you could complete this task soon so we don't have send reminders! It is quick and easy to complete ask someone who has done it.

If you are a new practice manager or senior partner and require access, please ensure you have registered at <https://www.primarycare.nhs.uk/register.aspx> and contact your NHS England regional team to request relevant access.

For further questions about the collection itself, for example clarification of the survey questions please contact england.biannual@nhs.net

Clusters of acute hepatitis A among men who have sex with men

Please find attached information from Public Health England concerning information for GPs ,and actions required, in response to an increase in reported cases of acute Hepatitis A among men who have sex with men in the South West.

ACTION REQUIRED: Avoiding Unplanned Admissions 2016 / 17 Component 3 Checking and Monitoring to Ensure Full Achievement

There is not much time left to ensure that the final Component 3 data extraction is correct for your Practice. We have learnt from the experience of many practices and would suggest that you follow these steps to avoid, non-achievement and a possible clawback of funds already paid. In line with the national guidance, we will not be making data amendments for coding issues.

It is now easier to check your achievement on CQRS, using the 'Avoiding Unplanned Admissions' report, simply select your Practice and run the report. This report shows the extracted information that has been used to calculate achievement and the achievement percentage.

The 'for information only' extraction of February 2017 data has now been undertaken and available for Practices to review on CQRS. 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 (across the financial year) requirement. 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.

Reporting Template

In addition to the reporting on CQRS, Practices are required to complete the attached Reporting Template on a bi-annual basis. The report should be read in conjunction with the specification and guidance and a link to this is provided within the attached template.

As part of the DES requirements, Practices have provided the ex-directory or bypass numbers for use by ambulance staff, A&E Clinicians, Care and Nursing Homes and other care providers and these numbers have then been shared with the appropriate organisations. As you may be aware the AUA DES will cease at 31 March 2017, and we are taking the opportunity to confirm the Practice ex-directory or bypass number(s) and whether this will still be available for use after 31 March 2017. The appropriate organisations will then be provided with updated information.

The final report is due by 30 April 2017 and should be sent to england.primarycaremedical@nhs.net, the reports will then be collated and shared with the appropriate CCGs.

Meningococcal ACWY (MenACWY) for new cohort of Year 13 students (DOB 01.09.98 – 31.08.99)

From the 1st April a new cohort of Year 13 students will become eligible for call and recall of MenACWY. It is being offered in response to an increasing number of cases of a highly aggressive strain of meningococcal W (MenW). This disease can cause meningitis (inflammation of the brain) and septicaemia (blood poisoning) that can kill in hours and those who recover may be left severely disabled and young people starting university are particularly at risk of MenW.

Uptake of MenACWY for last year's cohort was much lower than expected. We appreciate this is a difficult cohort to vaccinate and we would encourage all practices to start calling as soon as possible before their exams start and before the cohort becomes mobile over the summer period and many move away for university. With this in mind we will be asking schools and colleges to send information to Year 13 students and making school staff aware of MenW disease to promote vaccination and hoping to have local media support.

From 1st April practices should:

- Identify eligible population (DOB 01.09.98 – 31.08.99) who have not had a MenACWY conjugate vaccination since the age of 10 (i.e. previous travel vaccine);
- Invite the eligible cohort (template letter available here: www.gov.uk/government/publications/menacwy-gp-invitation-letter-template);
- Continue to recall these young people until they are either vaccinated or decline vaccination through telephone calls, text messaging or other means;

- Only order vaccines needed for the next fortnight to reduce wastage.

Posters, leaflets and other resources are available here:

<https://www.gov.uk/government/collections/meningococcal-acwy-menacwy-vaccination-programme> . Previous Year 13 cohorts (DOB 01.09.96 – 31.08.98) remain eligible until they reach 25. These vaccination appointments are a great opportunity to catch up on other missing vaccinations which may also attract additional payments: particularly check HPV, MMR and Td/IPV. Full contracting information can be found here: <http://www.nhsemployers.org/your-workforce/primary-care-contacts/general-medical-services/vaccination-and-immunisation> . For any further information or support please contact the Screening & Immunisations Team on england.bnsssg.imms@nhs.net

Complaints Handling workshop by NHS England and Medical Protection

NHS England and Medical Protection would like to invite you to attend a **Free** 3-hour Complaints Handling workshop taking place in Saltash on 11 April 2017.

The workshop has been developed to support you and your practice team in preventing and managing complaints and improving the service provided to patients. It will encompass some short lectures, reflective exercises, and facilitated group discussions.

The workshop will cover:

- What triggers complaints and how to prevent them
- How your practice and NHS England fit into the overall complaints process
- How to manage and respond to a complaint effectively

The workshop will be facilitated by Medical Protection experts who support more than 1,500 GP members to respond to complaints every year. This gives Medical Protection a valuable insight into why complaints are raised and how they can be effectively handled.

Their complaints workshops have received fantastic feedback from GPs and Practice Managers who have previously attended with 98% saying they would recommend them to a colleague.

Venue: Peninsula House, Tamar View Industrial Estate, Kingsmill Road, Saltash. PL12 6LE

You can choose from a morning or afternoon session:

Tuesday 11 April 2017 – AM session 9.30 – 13:00

Tuesday 11 April 2017 – PM session 13:30 – 17:00

To book your place please click on the attached link: <http://asp.arteqis.com/MPS/CHWSALT17>

Training secondment opportunity – with Health Education England

Please find attached a Job Description and Application Form and Web link below.

<http://peninsula.pgme.carboncrayon.com/about-us/quality-improvement-projects-qips/quality-improvement-fellow/>

PCSE March 2017 GP Bulletin

Please see attached PCSE March GP bulletin for your information

Information relating to GP pensions

Please see attached an information release from PCSE

For the attention of all staff involved in immunisations

MenB at 12 months survey

A survey was completed during January to review how practices are facilitating their 12 month vaccination appointments and understand any current concerns following the introduction of MenB. The survey was primarily targeted at Bristol practice and although the majority of responses are from this area, the recommendations will be relevant across the South West. The full survey findings are attached for further reading. Recommendations following the survey are:

- Practices should review appointment timings to ensure they are long enough to support parents with concerns and queries: this is suggested to be a minimum of 15 minutes;
- Where possible practices should consider having two nurses present at 12 month appointments and consider simultaneous vaccination to minimise stress to baby and parent;
- The Screening and Immunisations Team should work with practices and Child Health to work towards reducing paperwork and minimise duplication of recording information;
- The Screening and Immunisations Team should continue to engage with practice nurses to support future changes to the immunisations schedule.

QRISK2 User Guide Available

For those practices who can claim for this work, there is now a User Guide Available which is attached. Please remember you only have until the end of May to claim for this work.

Easter 2017 plans and arrangements

Please find attached a letter - Plans and Arrangements for Primary Medical Care Services During the Easter Period

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

None

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

None