

GP Bulletin

Date 10 August 2018 / Issue 276

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 350 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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Key Deadlines

Readiness for the 2018/19 flu season survey	Before Friday 10 th August	https://surveys.phe.org.uk
CQRS declarations for payment in the same month	9 th of each month	Via CQRS
Maternity, paternity, parental or sickness absence	Last working day of each month	Via email to england.primarycaremedical@nhs.net

• Items for all Practices

Missed vaccinations for infants at risk of Hepatitis B

There have been a few recent incidents where newborn infants born to mothers with Hepatitis B have not received their second (4 week Hep B vaccination) in a timely fashion. Babies born to mothers with hepatitis B are at high risk of acquiring HBV infection. Of those babies who are infected at birth or during the first year of life, around 90% will go on to develop chronic infection. Timely immunisation with HBV vaccine +/- HBIG (Hepatitis B Immunoglobulin) can prevent the development of persistent HBV infection in over 90% of these cases.

Child Health will identify these infants and schedule them for their second vaccination at 4 weeks (first vaccination given in hospital at delivery) – defaulting to the mothers practice where infant not yet registered. However, it appears that where the infant is not yet registered at the practice they can still be missed for this early vaccination.

Failsafe procedures to avoid this are suggested as follows:

- Weekly searches for pregnant women who are diagnosed with Hepatitis B linking to their delivery date
- All newborn baby hospital discharge documents to be thoroughly reviewed (regardless of registration) and, where Hepatitis B vaccination indicated, linked with mother and called for vaccination at 4 weeks.

For further information see:

<https://www.england.nhs.uk/south/wp-content/uploads/sites/6/2018/05/201819SWPHEInfantHepatitisBimmunisationGuidance.pdf> and/or contact england.swscreeningandimms@nhs.net

South West PAN-STP Urgent & Emergency Care Workforce Programme

Many Practices across the country are employing members of the wider Multi-Disciplinary Team (MDT) – mental health nurses, physiotherapists, Advanced Nurse Practitioners, pharmacists, and paramedics - to see patients with same day/urgent care needs; work traditionally undertaken by GPs. If your Practice is considering utilising any of these new roles, then this information, which has been added to the portal, is an invaluable resource to inform you how best to implement them, providing the detail and learning from the

collection of 23 case studies and other intelligence gathered from across the country and professional bodies.

The paper provides evidence there is an increasing trend in the use of members of the wider MDT in primary care. It demonstrates there are many benefits: they are valued, adding capacity, and have the potential to provide cost-effective care as they work to care for patients face-to-face, on the telephone and in their own homes. Many respondents were so positive about these new roles they wanted to employ more. Practices and other organisations reported that members of the wider MDT were recruited to help free-up GP time, make best use of their specialist skills, and help maximise value for money.

This has been added to the portal and is available for GPs to view if required at www.modelsofcare.co.uk you will find the report in the resources section.

GP Registration Reminder

Now that we are in the main holiday period, we just wanted to remind all GP Practices that it is a contractual requirement to register temporary residents who ask to register or need to see a clinician. The only circumstances where a practice can refuse to register or see a Temporary Resident is if that practice has a formal list closure and as no practice currently has a formal list closure that means all practices can register Temporary Residents.

Another related issue has cropped up recently, this arose as a patient was not able to register with a practice, even though they lived with that practice's area because the patient could not produce the requested ID. Whilst practices may request sight of ID to help them with the registration process it is not a requirement and people should not be refused because they do not have the expected ID. Similarly, if a patient has no postal address or is of no fixed abode, the patient should be registered by the practice approached. To refuse to register patients because of examples given could be considered discrimination. We attach a guide to patient registration for your information.

Consultation on Contracting Arrangements for Integrated Care

Providers (ICPs)

NHS England has launched its consultation on the contracting arrangements for Integrated Care Providers (ICPs). The consultation provides details how the proposed ICP Contract would underpin integration between services, how it differs from existing NHS contracts, and how ICPs fit into the broader commissioning system. The consultation runs from Friday 3 August to Friday 26 October.

<https://www.engage.england.nhs.uk/consultation/proposed-contracting-arrangements-for-icps/>

GP Job Fair – Update and Video

Thank you to everyone that provided support and information for the GP job fair we ran in June. We have started work on the next one taking place on Friday 12th October at the Crowne Plaza Hotel in Plymouth and will be supporting practices with GP vacancies across the South West. Please find attached article with a link to a short video from the last event.

If you have any queries or would like further information please contact Linda Morgan on 01138 248786 or lmorgan@nhs.net

Inactivated influenza vaccine information for healthcare practitioners

Public Health England (PHE) have this week released guidance for healthcare professionals around the inactivated influenza vaccine for the 2018/19 seasonal flu programme. The guidance covers recommendations for the 2018/19 season and includes information around eligibility, vaccine dose, contraindications and vaccine administration.

Please ensure that this information is shared with those in your practice who have responsibility for handling or administering vaccines.

Please be reminded about adhering to cold chain guidance and appropriate storage upon receipt of your vaccinations. Please see Document attached for further information.

If you have any queries, please contact the PHE South West Screening & Immunisation Team: england.swscreeningandimms@nhs.net

Updated Varicella Zoster Immunoglobulin, Hep B and Tetanus Specific Immunoglobulin (TIG)

The following briefing notes have been issued by Public Health England to provide clinical guidance for clinicians on current use:

1. Updated Varicella Zoster Immunoglobulin – updated guidance on priority use during current shortage (including specific guidance on use and alternative treatments for pregnant women)
2. Hep B shortage – update on supply. Now available for all eligible groups
3. Updated Guidance on use of Tetanus Specific Immunoglobulin (TIG) for management of tetanus prone wounds during current supply shortage

The Varicella Zoster briefing note also needs to be sent to acute and community Trusts for cascade to local maternity units, paediatric, infectious disease, oncology, haematology and microbiology departments.

Messages for practices signed up to the 2018/2019 Dispensary Services Quality Scheme

The 2018/2019 DSQS assessment paperwork is currently being finalised by NHS England. It will then be shared with the LMCs for their information later in August. It will be very similar to the paperwork that has been used in previous years but the timescale for submission of most of the information is likely to be January 2019. It is envisaged that you will receive the DSQS assessment paperwork and confirmed deadline in early September 2018.

The GMS SFE 2013 states that we can only analyse information returned by participating practices between 1 January and 31 March. In previous years we have extended this deadline so that you could make the return after the end of the financial year but we have been advised that we are no longer allowed to do this. Therefore the DSQS submission deadline is likely to be during January 2019, and we would encourage you to plan the work needed to comply with DSQS with that in mind. This earlier submission date will also enable us to provide feedback to practices and allow practices time to provide missing information or clarification before 31 March if necessary, which is not possible with the current April deadline.

CAS Alert (IT Software Issue) – Ref: NHSE/OID/2018/01

For those practices who have been sent a CAS alert by the CSU on Thursday 9th August (115 practices in scope in the South West) in summary:

- Practices are required to review the two sets of guidance issued and run the software that has been made available
- Practices have been requested to complete all the clinical risk assessments that may be required **by Thursday 20th September. Please note this date is revised from the alert.**
- Reporting as outlined in the alert should be to: england.primarycaremedical@nhs.net unless you are in the BNSSG area and then they should be sent to the CCG at bnssg.pc.contracts@nhs.net (initial reporting date 23rd August)
- Please alert the relevant contact above as soon as possible if you have any high risk assessments or any queries

- **Items for Bristol, North Somerset, Somerset and South Gloucestershire Practices only**
None

- **Items for North, East and West Devon Practices Only**
See below

- **Items for South Devon and Torbay CCG - CCG Delegation**
Light

DMIRS (Digital Minor Illness Referral Service) ...

Devon has been selected as one of only 3 areas in England for the second pilot phase of a new Pharmacy Integration Fund project, the aim of which is to alleviate some of the pressures within the urgent care system and to help address pressures faced by GP practices across the Devon STP area. This service will reinforce the recent NHSE guidance: "Conditions for which over the counter items should not routinely be prescribed in primary care", further encouraging patients to choose their community pharmacy as their first point of contact for advice.

All Devon practices will receive a letter in early September with further information regarding the service...

The service will be going live in Devon on the 08th October 2018!

If you have any questions or require any additional information please contact Michele.toy@nhs.net or SueT@devonlpc.org

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

CCG seeks GP members for Governing Body

Kernow CCG is looking for two 'dynamic and driven' GPs to join its Governing Body, to ensure that there is clinical oversight for every decision the clinical commissioning group makes. There are two post to fill; one is expected to cover north and east Cornwall, and may include a focus on acute services based in Devon. The closing date for applications is noon on Friday 7 September.

Please [click here](#) for more information and an [application form](#)