

Disability Equality Survey

The Disability Discrimination Act (DDA) includes a new general duty on public authorities to eliminate unlawful discrimination against disabled persons and promote equality of opportunity between people with disabilities and other persons. The definition of discrimination has been broadened, and can now include "not making a reasonable adjustment to the way the public authority function is carried out."

However, GP practices are not regarded as public bodies for the Disability Equality Scheme. Therefore, although GP practices should make every effort to comply with the DDA, they do not have to have a specific Disability Equality Scheme.

VAT

HM Revenue and Customs has now formally announced that implementation of the VAT ruling on medical services (Dr D'Ambrumenil judgment) will take effect from 1 May 2007, subject to House of Commons approval.

This is an indirect tax on turnover and will now be collected on a wide range of services that were previously considered as exempt in terms of VAT. The guidance issued by HMRC (see link from doctors fee section of the BMA web site) explains in more detail. It is important to remember that primary health care provided through either the NHS or the private sector will remain VAT free.

The HMRC information refers to the term 'medical services' but practices are advised to read the guidance provided and take advice from a qualified medical accountant to establish which professional fee services will be subject to VAT.

Further details of the announcement and general information on the ruling can be found on the fees section of the BMA website:

<http://www.bma.org.uk/ap.nsf/Content/VATonmedicalservices>

Patient Experience Surveys



There is some confusion about Patient Experience Surveys.

There are now two different surveys that will be used.

The first is to measure component 2 of the Access DES and this is the survey which will be sent directly to patients for them to return directly to IP-SOS Mori. Practices participating in this survey will be using either the Apollo or the Exeter system for data extraction. Whilst the GPC still objects to the inclusion of the additional questions that were not part of the original agreement, they have maintained involvement with the board that has been finalising the survey. The GPC's position on the patient experience survey, and the additional questions that will be inserted, can be found in the 'Focus on the Patient Experience Survey' available on the BMA website:

<http://www.bma.org.uk/ap.nsf/Content/FocusonPES>

The second survey measures the choice component of the Choice & Booking DES. Questionnaires will be sent to all practices to hand out to all patients who are given a first consultant referral between 16 Jan and 30 March 2007, as detailed in the letter from Richard Armstrong. The methodology for administering this will involve practices handing the questionnaire to patients once they have been referred. This can be at the end of the consultation. Questionnaires (pre-addressed and with pre-paid postage) can then be posted back directly to Ipsos MORI for analysis. Practices will be paid for administering

Reports

The Department for Work and Pensions has agreed to an increase in fees paid to GPs for the completion of factual reports for disability living allowance and attendance allowance and has confirmed that a new fee of £33.50 will be effective from 1 January 2007.

National Care Record

There is now BMA guidance on the National Care Record available at www.bma.org.uk/ap.nsf/Content/taskforcereport

The guidance note provides an update on the NHS Care Records Service (NHS CRS) following the publication of the Ministerial Taskforce Report in December 2006.

The first upload of information will not happen until 1st April 2007 at the earliest and this will be at the early adopter sites. There is therefore no need for immediate action if patients inform you that they do not wish their details to be uploaded onto the spine. Further guidance regarding objectors will be issued in due course but it is always possible that some people who object now may change their minds after national and local publicity campaigns have been run.

We recommend, at this stage, that if a patient requests to opt out it should be recorded on their record (code 93c3 can be used) and your practice should discuss their request nearer to the time when the summary care record is launched in your area.

Seniority payments following retirement

There has been some discussion about whether a partner is entitled to seniority payments if they return to work part-time as a GP partner after a period of retirement. The GPC can confirm that any provider who has completed at least two years of service as a GP provider will be eligible for seniority payments. Payment will depend on years of service so retirement years will not count towards this. Therefore a GP who returns as a provider following retirement will be eligible for seniority payments provided he/she has at least two years of previous service as a GP provider.

Locum available

Dr Preeti Patel is a GP Registrar due to finish in February 2007. Dr Patel has been on the Sheffield VTS for 3 years and is currently doing an end of scheme ITP in psychiatry. Dr Patel is a flexible, hardworking, friendly person with postgraduate qualifications including MRCGP, DRCOG, DFFP, and implanon and IUD training.

Available for work from 6 February – long-term, short-term, single sessions.

Contact details: Dr Preeti Patel, Tel 07917 694405
Or email Prit@doctors.org.uk.

IM&T DES

This is just a reminder that all practices who wish to apply for data accreditation as part of the IM&T DES must submit a written expression of interest to their PCT by 1 February 2007.

The IM&T DES states that all PCTs must have an IM&T Lead for the DES. The expression of interest should be sent to this person. Some PCTs have produced a template to help formulate an expression of interest. PCT IM&T Leads should be able to assist with any enquiries regarding the IM&T DES.

Practices that have registered an expression of interest will be contacted by their PCT, who will agree a timetable for the submission of Component 1 of the DES (The Practice Plan). This timetable must be in place by 15 February 2007.

By submitting an expression of interest to the PCT, practices are **not** committed to go ahead with the data accreditation process.

Please contact your PCT IM&T Lead or PRIMIS+ Facilitator for further information.

For further details about the Data Accreditation process please visit the PRIMIS+ IM&T DES Portal

<http://www.primis.nhs.uk/data-accreditation/>

or email data.accreditation@primis.nottingham.ac.uk

Business rules and read codes

Version 9 of the QOF business rules/read codes is available at the following address:

<http://www.primarycarecontracting.nhs.uk/145.php>

How to contact us

Derbyshire LMC office is at Norman House, Friar Gate, Derby DE1 1NU. Our telephone number is 01332 210008, fax 01332 341771, email office@derbyshirelmc.org.uk. The two Practice/PCT Liaison Officers are Melanie Beatham and Kate Lawrence who will continue to liaise with the same North and Southern practices as before the PCT re-organisation. Their email addresses are: melanie.beatham@derbyshirelmc.org.uk and kate.lawrence@derbyshirelmc.org.uk.