

Directed Enhanced Services for Access and Choice & Booking

We now have some clarity on the DESs for 07/08. The one year DESs for Access and Choice and Booking will roll over for a further year to 31 March 2008. Broadly, these two DESs remain the same in that there will be advanced payment when practices sign up to the content of the DES and parts of the awards will be linked to the outcome of the GP Patient Survey. Thresholds within these DESs remain the same. More details about the specifics will be available shortly. Directions to PCTs to commission these services will be issued as soon as practical, backdated to 1 April 2007.

These two DESs will replace any similar local enhanced services that PCTs have put in place.

GPs with Special Interests

The Department of Health has announced that GPs with special interests should read new guidance that explains how to develop the necessary skills to deliver community-based patient care that was traditionally only available in hospital. A new form of accreditation is key to the Department of Health document Implementing Care closer to Home – Convenient Quality Care for Patients. The shift in services aims to shorten patients' waiting times, offer more convenient access and give greater choice of care.

New guidance is available at <http://www.primarycarecontracting.nhs.uk/173.php>

The LMC's view is that it remains to be seen whether implementation of this guidance will enhance patient care or the move of services closer to home.

Annual Conference of LMCs

The Annual Conference will take place in London on 14 & 15 June. The agenda includes motions from LMCs across the country but the topics are common to all – Government health policy, Choose & Book, Pensions, QOF. Drs John Ashcroft, Frank Barrett, Sean King and Paul Weston-Smith will be there representing Derbyshire. Drs John Grenville and Peter Holden will also attend as GPC members.

LMC Survey of practices' responses

The LMC sent out a survey by email to all levy-paying practices on 27 April asking for some indication about how practices felt about the pay (non) award. This was followed up by a reminder on 9 May.

The survey covered four areas – use of Choose & Book, participation in PBC, participation in the Access Survey, and making non-urgent ambulance bookings for patients. The LMC cannot advise practices on actions they might take but we can try to ensure that each practice knows what other practices are proposing.

So far, 15 (out of 121) practices have responded and the results are as follows:

3 practices will continue to strive to use C&B for as many patients as possible, 6 practices will use it when they feel it is appropriate, 4 practices will stop using it.

9 practices will continue to engage fully with PBC, 3 will reduce their engagement, 1 will withdraw from PBC.

8 practices will participate in the Access Survey, 7 will not participate.

8 practices will continue to book non-urgent ambulance transport, 7 practices will cease bookings.

We hope you find these responses interesting, even though they are based on a small number of responses.. We do understand that many practices will want to have a meeting before sending in a response but until we know what the tide of opinion is we will have great difficulty in representing views to the

VAT on Cremation Forms

It has now been confirmed that the completion of cremation forms **will be exempt** under the burial and cremation provisions, Schedule 9, Group 8, Item 2. So, although they will no longer be covered by the health exemption from 1 May, they will **continue to be exempt** under these alternative provisions, and there will be **no requirement for doctors to charge VAT** on completion of forms B, C, F and FF.

Seniority payments

A couple of practices have reported to us that they have not received their full seniority payments.

We understand from Derwent Shared Services that the only way they can calculate seniority payments on account is to compare indicative GP superannuable pay used to calculate employee and employer deductions against the published estimated average 'safe' average superannuable pay. If the indicative superannuable pay falls between one third and two thirds of the national estimate superannuable pay, then the seniority payment calculated is abated to 60%.

The problem is that a GP's actual superannuable pay is not known until some 11 months after the financial year to which it relates and the average superannuable pay value is not published until after the actual superannuable payments for GPs have been collated nationally.

Therefore, it seems that, in order to avoid the problem of not receiving full seniority payments, practices need to pay more superannuation on account.

Weights and Measures



We have heard of a practice in another part of the country which has been approached by the local Trading Standards Service stating that they wish to inspect their premises to ascertain whether their patient weighing scales comply with the Non-Automatic Weighing Instruments Regulations 2000.

The practice say that they aren't selling anything by weight and therefore it is hard to know why the Trading Standards Services should be even remotely interested in what the practice scales are like.

BUT a member of GPC has pointed out that regulations came into force on 1st January 2003, which apply to all scales which a practice has put into use after 31st December 2002. The regulations specifically cover scales used for the 'determination of mass in the practice of medicine for weighing patients for the purposes of monitoring, diagnosis, and medical treatment'.

Trading Standards Officers have the right to enter premises and inspect or test any weighing equipment for compliance. Failure to comply could result

A rational way forward for the NHS: BMA discussion document

The BMA published its discussion paper 'A rational way forward for the NHS in England' on 8 May 2007, which was the culmination of work undertaken by a small working group of BMA Council, which had been formed following debate on NHS system reform at the ARM in 2006. The paper can be accessed online at the following address: www.bma.org.uk/ap.nsf/Content/rationalwayforward

The intention is to stimulate debate around the proposals made in the paper from those within and outside the medical profession; comments should be sent to caringforthenhs@bma.org.uk

Latest advice

In the past month GPC has issued advice on the following topics:

ICP – Contestability – Best practice guidelines
GPC summary of developments relevant to practice based commissioning and wider commissioning
GPC negotiators/LMC road shows
Frequently Asked Questions in relation to the Chronic Kidney Disease QOF indicators

Further details of any of these issues are available on application to the LMC office or on the BMA website www.bma.org.uk

Trent LMCs Buying Group has also issued an update of Buying Group News, giving details of flu vaccs, stationery, single use instruments and travel vaccs. Buying Group News has been sent to practice managers in all levy-paying practices.

How to contact us

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