

CLMC Bulletin 354 – 15.05.18

GDPR

Template GDPR [practice privacy notices](#) (PPNs) have now been published on the GDPR [hub page](#) in the BMA resources section. The hubpage also contains information on the regulation and hosts a suite of resources and blogs to help guide members, including a new [GDPR webinar](#) to help practices prepare. The [drop box](#) created by GPC IT lead Paul Cundy is also being regularly updated. We recommend you keep an eye on all these pages and if you have any questions about GDPR please contact Jackie.jameson@nhs.net.

Two important actions practices must take before 25 May are to appoint a DPO and publish a privacy notice. The template privacy notices above should help but Jackie has also circulated details of DPO training we are happy to organise for practices. Please do contact Jackie if you are interested in this training – we recommend a team of people so have secured a deal that is a cost per practice rather than per person. Contact Jackie.jameson@nhs.net for details.

GMS Contract Guidance 18/19

The [GMS contract guidance audit and audit requirements for 2018/19](#) has now been published on [NHS Employers website](#). You can read about the contract changes in more detail on the [GP contract agreement England 2018/19 BMA webpage](#).

Vaccs & Imms Guidance 18/19

The finalised vaccinations and immunisations GMS guidance is now live on the [NHS Employers website](#), and a link to this guidance is also available on the [BMA vaccs and imms page](#).

GP Pension Records

GPC has been made aware of historic administrative issues with GP pension records and have written to NHS England to seek further information. We understand that NHS England have commissioned further work on how to resolve the issues found. They will not, therefore, be in a position to advise individuals until this is done. We will provide further detail when we have clarity on this issue.

NHS Property Services

In some areas NHSPS have been issuing letters through their lawyers relating to unpaid charges. The tone of these letters is quite threatening and completely unacceptable. GPC have asked NHSPS to recall the letters urgently and are awaiting a response. They know that this issue is causing practices significant stress, and would like to reassure you that GPC will stand with you in circumstances where, despite there being no legal basis to do so, NHSPS seek to enforce these charges. To this regard, if NHSPS takes action to enforce charges against you please let us know immediately.

Ultimately GPC are pushing to reach a negotiated agreement nationally, but are prepared to consider all possibilities to resolve this situation. They want to see a fair and reasonable process for calculating service charges agreed, which has due regard to historic arrangements and does not result in practices having to fund the historic neglect of buildings. While GPC are pushing for a national solution, if practices are being threatened with legal action, GPC advise seeking independent legal advice on the particulars of their situation. Further guidance is available [here](#).

Spirometry in Primary Care

Following the publication of [training standards for Spirometry by NHS England](#), the GPC has published a statement clarifying that this is not part of the core GMS contract work and that there are no mandatory requirements for practices to perform spirometry. Read the statement [here](#).

Over the Counter Medicines Guidance

Following public consultation, NHS England has published [revised commissioning guidance for CCGs on reducing prescribing of OTC medicines for minor, short-term health concerns](#) as part of a drive to reduce prescribing of OTC medicines to save the NHS money. Although the GPC supports the efforts to educate patients about self-care of minor ailments, and the appropriate use of effective medicines that are available from community pharmacies or other retail outlets, without changes to the GMS regulations that govern GP prescribing, GPs will be at risk of complaint from patients or criticism from their CCGs and the NHS England guidance cannot be used by CCGs to ban all such treatments.

GPs must continue to treat patients according to their individual circumstances and needs, and that includes issuing prescriptions where there are reasons why self-care is inappropriate.

The GPC has published guidance on the contractual requirements for practices in prescribing over-the-counter medicines, available [here](#).

Updated Prescribing Guidance

The GPC [Prescribing guidance](#) has been updated to include a link to [the template letters](#) relating to the new requirements on hospitals to reduce inappropriate bureaucratic workload shift, in the Q&A section *Can my GP refuse to give me a prescription that my consultant asked them to provide?* (page 9). They have also made some amendments to the prescribing numbers, independent prescriber and private prescriptions sections.

Updated Gender Incongruence Guidance

The GPC's [Guidance on gender incongruence in primary care](#) has been updated to incorporate advice on prescribing given in the recently published [Responsibility for prescribing between primary and secondary/tertiary care](#). The NHS England guidance expresses clearly that when clinical responsibility for prescribing for gender incongruent patients is transferred to general practice, it is important that the GP is confident to prescribe the necessary medicines, and that any transfers involving medicines with which GPs would not normally be familiar should not take place without a local shared care agreement.

Working at Scale Seminar – now online

The GPC webinar 'Our profession, our future: working at scale in general practice' run by Dr Simon Poole, GPC policy lead is now available to view for those who weren't able to join live - [recording is now available to watch](#),

Revised MenB PGD Template

The revised MenB PGD templates V03.00 is available on the [Public Health England PGD template webpage](#) and is also available on the [vaccs and imms webpage](#) on the BMA website. This is an early revision of this PGD in order to align with the recommendations for the prevention of secondary cases of MenB disease in the [Guidance for public health management of meningococcal disease](#).

Changes to Data Sharing MoU (National)

The Government has announced a fundamental change to the Memorandum of Understanding (MoU) between NHS Digital, the Home Office and the Department of Health and Social Care, and will now be restricting NHS Digital's data sharing with the Home Office to the tracing of an individual who is being considered for deportation action having been investigated for, or convicted of, a serious criminal offence, or where they present a risk to the public. Previously the MoU permitted disclosures by NHS Digital to the Home Office for suspected immigration offences without consideration of the seriousness of the offence. The change in position aligns the MoU with existing legal and ethical standards of confidentiality which restrict disclosures 'in the public interest' for law enforcement purposes only when the crime under investigation is a 'serious' crime. It is estimated that the change to the MoU will exclude some 95% of current Home Office requests.

Physicians Associates

HEE have produced a new A5 booklet *Physician Associates, a working solution in primary care* to help raise awareness and provide a better understanding of the physician associate (PA) role. The booklet and a range of materials can be accessed on the [Faculty of Physician Associates \(FPA\) website](#).

NICE Guidance, Lyme Disease

The National Institute for Health and Care Excellence (NICE) has produced new guidelines for GPs on diagnosing and managing Lyme disease. The guidance includes symptoms to look out for, tests to help confirm a diagnosis and what treatments to use. Access the new guidance [here](#).