

## **CLMC Bulletin 362 – 28.08.18**

### **Docman Incident Workload Survey**

The GPC has now launched their [survey](#) to assess the scale of impact on practices following the NHS England alert with regard to a Docman Record transfer safety breach in which documents received by practices using NHS mail are not being reliably transferred into patients' electronic records. The GPC voiced serious concerns over this issue, and to estimate the size of the impact we ask practices to fill in [this short survey](#).

The survey consists of the following questions:

- 1) Find the 'unprocessed' folder on your Shared Drive (Shared > PCTI > DOCMAN7 > DATA\_S1 > EDT > UNPROCESSED). Enter the total number of files.
- 2) Download and run the Docman tool, then enter the total number of files left in this folder.
- 3) You will be asked to carry out a clinical risk assessment on the remaining files. Please enter the total number of risk assessments.
- 4) What is the total number of practice hours spent reviewing and completing this task?
- 5) Was the practice at the time of Docman installation instructed how to use the Docman Alert scheduler? Yes/No/Don't know/Not aware of the alert scheduler

### **Interim Seniority Factors 2018-19**

The Interim Seniority Factors 2018-19 for England and Northern Ireland have now been published on [NHS Digital's website](#).

### **Data Protection Officers in GP Practices**

The BMA has published [guidance](#) (see FAQs DPO section) on the requirement for Data Protection Officers in GP practices under GDPR. In particular, members should note details of the recently published [Addendum to the GP IT Operating Model, Securing Excellence in GP IT Services](#).

### **Supporting Small Practices**

The GPC believes practices of all sizes have a future in the NHS and as the recent GP survey shows, there is clear evidence that many patients prefer to be registered with smaller practices that offer good quality continuity of care. They have discussed this at length with senior figures within the NHS.

NHS England has now responded, being explicit that they 'remain committed to enable high quality general practice to be provided in a range of forms and sizes, including in small practices.' They also told GPC that 'the development of networks is designed to support collaboration between practices and is not about actively encouraging practice mergers. Their ambition is for all practices – irrespective of size – to be part of a network to enable general practice to work with local partners to reduce health inequalities, improve the health span of a population and create a sustainable and resilient multidisciplinary workforce'.

### **No-deal Brexit Papers**

The government has released a series of technical papers setting out their preparations for a no-deal Brexit, which included plans to stockpile medicines and instructions to drug companies to put in place arrangements to fly in supplies with short shelf lives should there be disruption at the border. One of these is a 'guidance' letter to NHS organisations and GPs, which can be read [here](#).

The BMA has also [published a briefing paper](#) on the dangers of a no-deal Brexit to the health service. Commenting on the briefing paper, BMA council chair, Dr Chaand Nagpaul, said: "The BMA believes the public should have a final informed say on the Brexit deal and, to reject the notion of a 'no deal' given all the serious risks that such an outcome carries."

### **Referral Management – GPC Briefing**

The BMA has published [a briefing](#) which provides an up to date account of the various referral management schemes that are currently operating in England. The briefing summarises existing evidence regarding the effectiveness of referral management and restates their existing concerns about the risks associated with many referral management schemes. It also provides recommendations for CCGs, NHS England and the Department of Health and Social Care, based on evidence and member views.

### **New Ombudsman's Clinical Standards**

The Parliamentary and Health Service Ombudsman (PHSO) has introduced a new Ombudsman's Clinical Standard. For complaints about NHS clinical care and treatment in England, including those made directly to GP practices, PHSO aims to establish what would have been good clinical care and treatment in the situation complained about and whether what actually happened fell short of that.

PHSO states that the new Clinical Standard gives greater clarity to how the appropriateness of care and treatment is considered. Clinicians and health organisations can inform the PHSO which professional guidance or standards they based their practice on, and the PHSO will consider the explanations of those complained about and balance them against the relevant standards or guidance. The intention is that this will offer a clearer opportunity to explain how the decisions about care and treatment were reached. The GPC are seeking a meeting with the PHSO to discuss this with them.

A copy of the Clinical Standard is available on the PHSO [website](#). If you have any questions or comments, please email [PublicAffairs@ombudsman.org.uk](mailto:PublicAffairs@ombudsman.org.uk). BMA guidance on complaints is available [here](#)

### **General Practice Premises Policy Review Blog**

In response to the [review of General Practice Premises Policy](#), and NHS England's [call for solutions](#), inviting submissions from interested stakeholders, Dr Krishna Kasarareni, GPC England Executive member, has written a [blog](#) welcoming the review.

### **GPC Newsletter**

Read the latest GP newsletter [here](#)