

Thank you, Paul, Crispin and Dave

Paul Driscoll became the Fed's Medical Director in early 2015. Over the last four years, Paul's leadership has enabled our organisation to evolve and grow into one of the leading GP federations in England.

Paul's energy has had a huge impact and the Board would like to highlight six areas where, on his watch, the Fed has made a positive impact.

1. Suffolk practices now have real alternatives if they decide to no-longer remain as independent partnerships. One option is Suffolk Primary Care which has grown into a partnership of 11 practices and 100,000 patients. The Fed has also provided an option to step in and manage practices where partners are unwilling to do so – notably Walton in Felixstowe and Christmas Maltings and Clements in Haverhill.
2. Primary care, via the Fed, is now represented at the 'top table' of decision making through involvement in the East and West Alliances. This means we can have clinical input into how services are provided – matching the GP commissioning input via the CCGs.
3. Out of Hours service has been brought back to local ownership. GP+ has provided extra capacity which has been particularly important for some practices.
4. We have contributed to the local primary care workforce. We have helped to develop the skills mix in practices, particularly pharmacists. By broadening opportunities for GPs, we are helping to retain their experience. These initiatives have been brought together in the Suffolk GP Advice Hub which is now being copied in other areas.
5. Our North East Essex Diabetes Service has demonstrated that investing in primary care and supporting practices can take a CCG area

with poor outcomes up into the upper quartile. It demonstrates there are innovative ways of delivering real transformation and achieving great clinical outcomes from a happy team.

6. Finally, the Fed has cemented its reputation as a partner that enables positive clinical change whilst retaining its ethos of being clinically led, caring about its workforce, practice-owned and not-for-profit.

The Board are really pleased Paul will continue to play a role in the Out of Hours service.

The Board would also like to thank Crispin Dunn and Dave Ward who both retired from the Board and general practice this month. Both were founder directors and have played a key role over the last few years.

Simon Rudland - Chair on behalf of the Fed Board



Paul Driscoll

GP+ news

We are happy to report the CCGs have extended our GP+ contract for at least another 18 months



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Prescribing Support Service - transferring to practices

The Fed established the pharmacist and pharmacy tech team in 2016. The aim was to introduce a greater skill mix into practices and transfer medication related workload and tasks from GPs. The pharmacists operate as a team, working remotely and face-to-face across groups of practices. Crucially the service operated alongside GP practice opening hours.

The service successfully established the role of pharmacists in general practice in Suffolk. When the first team member started it was very unusual but now it is common practice. It also demonstrated that having a service every day, via team working, helped practice sustainability. Logistically running a daily service across ten practices is a challenge and we have learnt from this.

With the introduction of Primary Care Network (PCN) funding for pharmacists we have reviewed the service and decided it is more logical for individuals to be employed locally. Therefore, we are transferring the team to individual practices.

The robots are not coming to Suffolk - Project terminated

We have been working with East Suffolk and North Essex NHS Foundation Trust's (ESNEFT's) technology team to implement a robot that would automate the processing of pathology results. Unfortunately, TPP, the company that own SystmOne have refused to co-operate on the project so it has had to be terminated.

Rocketpay for Suffolk Locum Service

Suffolk Locums who work through the Suffolk Locum Service can now use Rocketpay to speed up the payment process. After submitting their invoices, payment is made on the next working day. GP practices in other areas have found it is a great incentive and it is available free of charge. Please note; to use the Rocketpay service practices must pay for their locums via Lantum.

For more information on locuming via the Suffolk Locum Service please contact Michelle Tomkins **michelle.tomkins@suffolkfed.org.uk**

Changes to immigration rules for GPs

GPs will be added to the Shortage Occupation List (you might be surprised they were not on the List already). This means an employing organisation does not need to complete the Resident Labour Market Test when applying for a Tier 2 visa sponsorship licence.



Kirkley Mill Surgery

CQC inspection of Fed practices

Following inspections in August 2019, Walton in Felixstowe and Kirkley Mill in Lowestoft have been given a 'Good' overall rating by the CQC. Kirkley was in special measures when we took it on.



Walton Surgery

Haverhill primary care

A small practice near Haverhill in the West Essex Clinical Commissioning Group is closing after being rated 'Inadequate' by the CQC. Our practice in Haverhill, Christmas Maltings and Clements, has offered to run it as a branch and we are in discussions with the CCG. Alternatively, the patient list will be dispersed putting more pressure on Suffolk practices.



BringBaby GP Training Event

The recent BringBaby GP Training event was really successful. The sessions were all very informative and went down well with the GPs.

We hope to arrange more in the future.

GPs invoicing via limited companies – watch out

In general practice and out of hours, locum GPs traditionally use limited companies to invoice for their time. This is changing very rapidly because HMRC is having a crackdown. HMRC started with IT contractors and are now moving to health.

HMRC have a status checker <https://www.gov.uk/guidance/check-employment-status-for-tax> which gives an answer on employment status. We have run it for various different scenarios (locum in a practice, out of hours or GP+ GP and each time it reports their status as 'employed'. This means they can and should be paid directly as an employee. If member practices pay via a limited company, the practice will be liable for all the tax and national insurance (including the ones the individual should have paid).

Community Ultrasound

Thank you for continuing to support our Community Ultrasound service. The service is scanning urgent referral requests within a few days and completes routine cases within 2-3 weeks.

Recent audits by the CCG and by our sonographers have raised various issues, particularly around urgent referrals and the need to be clear about the reason for the request.

There is some helpful guidance from the British Medical Ultrasound Society <https://www.bmus.org/policies-statements-guidelines/>. However, this does not reflect the undifferentiated presentations and uncertainty we manage in primary care.

When referring we would be grateful if you could:

- Ask a specific clinical question with sufficient information, and clearly state your suspected diagnoses
- Avoid abdominal/pelvic pain
- For Abnormal LFTs, please detail the results as not all require ultrasound
- Bear in mind ultrasound is unlikely to be helpful for altered bowel habit/IBS/Diverticulitis
- Double scans of abdomen and pelvis need to be justified, stating which abdominal and pelvic pathology is suspected

We will be auditing Advanced Nurse Practitioner (ANP) referrals in the next few months and feeding back to individual clinicians.

If referring for an urgent two week scan please provide as much information as possible to justify the urgency and your clinical concerns.

Out of Hours, GP+ and ED Streaming

We have written to all GPs and nurses in Suffolk explaining what we are doing to make working in the Fed more streamlined, flexible and with contracted permanent shifts. For example, we now offer contracted shifts at Ipswich Hospital (4pm – 9pm weekdays and 9am – 9pm weekends) and West Suffolk Hospital (4pm – 9pm Tuesday – Friday and 9am – 9pm Saturday, Sunday and Monday). We are also making it easier to book shadow shifts to test out working in the services.

The letter also covers differences between the services. Out of Hours and Streaming patients generally report one health issue only, but with a slightly higher acuity than patients seen by daytime general practice. GP+ is similar to daytime general practice. The letter also includes locations, opening times, pay rates etc.

If you did not receive the letter or need more information please email suffolkfedhr@nhs.net or David Pannell.

We are really pleased that the Suffolk Out of Hours service is meeting all its targets and is running smoothly. Clinicians report that they like working for the service and feel supported.

As part of our operation we regularly audit the work coming to us from 111. Most recently we looked at cases stating the need for the patient to be seen within two hours. We concluded 63% of these are inappropriate when compared to the usual standards of daytime general practice. A Fed senior clinician also reviews home visit requests, and this is working well with 86% of visits judged to be appropriate – mostly frail elderly, palliative and care homes.

Feedback and comments

If you have any comments on this newsletter, please email Jenny Dewey.

jenny.dewey@suffolkfed.org.uk

