

22 February 2019

Dear Colleagues

GP Contract Agreement 2019: Update – Miscellaneous Contract Changes

The highlights of the GP Contract Agreement 2019 announcement have been related to the introduction of the (Primary Care) Network DES, supporting the development of PCNs, and the introduction of a state-backed GP Indemnity Scheme. There are also significant changes to QOF and to IT aspirations. However, there are multiple other smaller scale but important elements to this year's Agreement, which are listed below:

Contractual Changes

Carr-Hill Formula

The underlying Carr-Hill Formula is not being changed, but there are two supplementary demographic payments being altered, these being:

- A change to the rurality index payment, which will now apply to patients only if they live within the practice boundary: relatively few practices receive what is in absolute terms a very small financial sum
- A change to the 'London weighting' (currently £2.18 paid unweighted alongside Global Sum) such that it will only apply to patients who are actually resident within London, rather than to all patients registered with a practice physically based in London. For SSLMCs this will have its main impact on practices in SW London and North Surrey.

Data Protection Officer (DPO)

CCGs will be responsible for offering a DPO function to practices either as a part of their own existing DPO function, or commissioned separately, although practices will remain responsible for identifying who their DPO is to patients.

GMS Additional Service: Contraceptive Services

Contraceptive services will no longer be an Additional Service under the Regulations but become part of Essential Services and therefore there will be no continuing opt-out option. There will be no financial impact as a result of this change

Immunisation and Vaccination Programme

The following changes have been agreed to the Vaccination and Immunisation Programme

- Uplift of Item of Service fee from £9.80 to £10.06, to match comparable vaccine uplifts, for:
 - Seasonal influenza and pneumococcus
 - Pertussis
 - Childhood seasonal influenza
 - HPV Vaccination for women aged between 18-25 (and males when added to the GP HPV catch up programme after April 2020)

Local Medical Committees for
Croydon, Kingston & Richmond, Surrey,
East Sussex and West Sussex

The White House **T:** 01372 389270
18 Church Road **F:** 01372 389271
Leatherhead
Surrey KT22 8BB www.sslmcs.co.uk

- Widening of eligibility for the seasonal influenza and pneumococcus scheme to include care home and social care staff
- MMR Catch-up for 10 -11 year olds - £5 payment for a catch-up campaign for unvaccinated 10-11 year olds; the detailed specification is at Annex D Para 33, and paid in addition to the IOS fee

FP10 prescriptions to treat sexually transmitted infections

These will have to be endorsed SH, manually until the IT suppliers have updated their systems, to permit the free dispensing of such prescriptions

MHRA (Medicines and Healthcare products Regulatory Agency) Central Alerting Systems (CAS)

From October 2019 practices will need to register a practice email address with the MRHA CAS system and monitor this and provide a mobile number to be used as an emergency backup for texts if the email system is not working.

National NHS Marketing campaigns

GP practices will be obliged to support up to six NHS campaigns annually, by displaying NHS provided promotional and other material; there are likely to be focussed on public health promotion, such as immunisations or screening.

NHS Logo

For GP practices who choose to use the NHS logo in relation to their NHS provided services, this will then need to be used on all information and materials relating to practice NHS services and such practices must follow the NHS identity guidelines (www.england.nhs.uk/nhsidentity)

Private GP Services Advertising or Hosting

GP practices will not be able to either directly or via proxy advertise or host private paid-for GP services that fall within the scope of NHS funded primary medical services. The LMC has received several queries from practices in relation to this change and has sought further clarification on the implications of this very 'political' amendment to the Contract; I will write to all practices separately about this issue.

Publication of NHS Earnings (Transparency)

All GPs, whatever their contractual status, with total NHS earnings above £150K per annum, commencing with 19/20 income, will be listed by name and earnings. The LMC is anticipating further guidance, including the definition of included 'earned' NHS work, and the basis for calculating such income.

SARS (Subject Access Requests)

A three year annual Global Sum up-lift of £20 million to acknowledge the workload burden on practices of SARs requests has been agreed; NHS England anticipate that after three years, or possibly by the Greek calends, digitalisation of current Lloyd-George paper records will be completed, and patients will therefore have on-line access to their electronic and digitalised records, thus allowing patients direct access to SARs relevant information directly.

SFE Shared Parental Leave

This will now be included as reimbursable leave under the Statement of Financial Entitlements

Non-Contractual Changes

These are primarily IT/digital (please see separate LMC update) but also include:

- Planned Roll-out of the 'Freedom to Speak Up' Guardian in Primary Care; this has been delayed for over two years, being in the 'too difficult' box
- Over-the Counter Prescribing
NHS England has provided a 'Letter of Comfort' to GPs to reassure colleagues they will not be at risk of breaching their contract when following OTC prescribing guidance – I have written to colleagues separately about this.
- Debt and Mental Health Conditions
A 'Debt and Mental Health Evidence Form' will be developed that practices must complete free of charge, if relevant
- Temporary Resident Payments
TR payments for practices were effectively frozen at historic levels in the 2004 Global Sum and no mechanism currently exists to adjust for often seasonal fluctuations in TR requests for treatment received by practices. NHS England is to prepare guidance to CCGs in terms of any support that can be provided to practices whose workload is affected by this issue
- Review of Vaccination and Immunisation Programmes
This will occur in 2019 with a review of current arrangements for:
 - Procurement of seasonal influenza vaccine for adult patients
 - Dealing with outbreaks and catch up programmes
 - Extending the list of chargeable travel vaccinations.

With best wishes

A handwritten signature in black ink, appearing to be 'JP', followed by a long horizontal line extending to the right.

Dr Julius Parker
Chief Executive