



## Weekly operational update for local general practice

Wednesday, 10 July

Welcome to Insight, Devon Local Medical Committee's weekly operational update for GPs and Practice Managers.

### **LMC to meet the Coroner over new online referral system concerns**

The LMC is aware that GPs are concerned by the new online referral system the Coroner has rolled out. One of our Medical Secretaries is meeting the Coroner shortly to discuss this. If you have any specific queries please let the LMC know and email [hannah.baxter@devonlmc.org](mailto:hannah.baxter@devonlmc.org)

### **When do you need to notify your CCG about changes to your PCN?**

Now that Primary Care Networks (PCNs) are officially up and running, the LMC is getting queries about what happens when there are changes to the network.

The network DES contract specification is clear that there are only three circumstances in which the PCN must notify the CCG about changes to the network agreement: if the practice membership changes; if the clinical director changes and if the nominated payee changes. Any change to the membership of the PCN must be discussed with and approved by the CCG in advance. There is also a requirement for the PCN and the CCG to agree a process for notification of changes to additional staff engaged through the network DES where the changes have an impact on the payments being claimed.

### **FIT – GP survey and screening/symptomatic infographic**

Peninsula Cancer Alliance is conducting an evaluation of symptomatic FIT implementation – including collecting GP feedback relating to the test. You can take part in the short survey [here](#). Responses are anonymous. The National Bowel Screening Programme has moved to using FIT instead of FOBT. An [infographic](#) has been developed by Cancer Research UK to provide an overview of the differences between the two uses of the test: the main one being the threshold for a positive result: 120µg/g in the screening programme (FIT120) and 10µg/g (FIT10) for low risk symptomatic patients. GPs are reminded that due to the differences in the thresholds patients who present who meet the criteria for a symptomatic FIT test but who have received a negative screening result can still be referred for a FIT based on their symptoms.

### **Latest NHS England Quality and Safety Bulletin**

The latest learning from serious incidences and significant event audits in primary care discussed at the Primary Care Quality and Sustainability Hub for Devon, Cornwall and the Isles of Scilly, Somerset and Dorset is available [here](#).

### **Factual accuracy corrections on draft CQC inspection reports**

The Care Quality Commission (CQC) has updated its [guidance](#) on how to submit factual accuracy corrections in draft inspection reports and listened to feedback from providers. As a result, the CQC has removed the character limit on the response form that you need to use to submit any corrections.

### **GP pension documentation retention advice**

NHS England (NHSE) has issued new [advice](#) about the retention of GP pension documentation due to ongoing issues with lost historical data.



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

[The General Practice Premises Policy Review](#) – which sought to identify barriers to effective service delivery in relation to general practice estate and outline potential solutions – has been published by NHSE.

### **Digital-First consultation**

NHSE has published a [Digital-First Primary Care Policy consultation on patient registration, funding and contracting rules](#) in response to the development of digital-first providers and the review of out of area registration arrangements. The proposals are significant and will impact on general practice. You can respond to the consultation [here](#) – the deadline is Friday, 23 August.

### **RCGP calls for whole-system approach to improving NHS care for transgender patients**

The Royal College of General Practitioners (RCGP) has published a new [position statement](#) on the role of GPs in providing care for gender-questioning and transgender patients, calling for a whole-system approach to improving NHS care for trans patients and specifically improvements in education and training for healthcare professionals, NHS IT systems and access to gender identity services. Read more [here](#).