**Sent to all Somerset Senior Partners and Practice managers**

**Message for practices from the GPC**

Following the below notification sent earlier in the year regarding repatriation of missing items from NHS SBS, GPC has been liaising with NHS England to ensure the process is as simple as possible, support is provided to practices where required, and financial compensation is provided. We have now reached agreement and so would like to provide you with some details.

We have made it clear that whilst practices may, following assessment of the correspondence, need to communicate with individual patients, GPs can in no way be made liable for the failure and delays in the service provided by NHS SBS. However GPs do have professional and legal duties to assist with the response to this incident.

**The process**

         All items have been triaged by GPs contracted nationally by NHS England and those identified as carrying a potential risk of ongoing harm have already been returned to practices over the summer, where they were reviewed.

        The rest of the items are now being sent to the patient’s current practice, for filing in their medical record on completion of a review process.

        The vast majority of these items will be DNAs, TR forms or other items with little clinical information – therefore much of the documentation will not have resulted in harm, but all of the correspondence needs to be assessed to ensure that the interests of patients are protected and potential harm is either identified or ruled out.

         Documentation should arrive in practices between 15 and 19 December (by TNT using a secure tracked process). The correspondence will be clearly identified, in a white plastic wallet which has NHS England’s address on.

         Included in each bag is a letter which explains the process the practice should follow upon receipt of the correspondence.

         If it becomes evident that the patient’s record is no longer at the practice, please contact NHS England using the contact details in the letter and they will arrange for TNT to collect the item and deliver to the new practice.

**The support**

        Where the practice identifies items of high priority, they should complete the general response form and return it to NHS England as soon as possible.

         NHS England will support practices with the completion of a clinical review where harm is suggested and will provide template correspondence to use in communicating with patients who may have suffered harm.

        Where there is correspondence with a patient, the template letter provided by NHSE states expressly that the delay in receipt of the relevant item of correspondence was not the fault of the GP.

         NHS England local and regional teams are aware of this process and can be contacted if there are any issues

         NHS England has also provided a dedicated phone line and email address on which practices can contact them with queries (telephone: 0800 028 9723, email: [england.pcsadmin@nhs.net](mailto:england.pcsadmin@nhs.net)).

**The payment**

         In order to support GP practices affected by this incident, GPC England has worked with NHS England to agree appropriate payment. Practices will receive payments related to the number of items received as follows:

|  |  |
| --- | --- |
| **No. of documents\* received** | **Payment** |
| <20 | Fixed payment of £50 |
| 20-50 | Fixed payment of £100 |
| >50 | £50 for each batch of up to 10 items |

\* A document is defined as a single complete instance of correspondence, consisting of one or more pages. A document is likely to include a communication such as a letter or notification.  Any attachments or enclosures to that communication are regarded as part of the same document.

         These payments are intended to provide recompense for the time required to review the correspondence in the context of the medical records, communicate with patients about the incident where necessary and report items of high priority to NHS England.

         To remove any administrative burden on practices, they will be not required to submit a claim. Payments will be made through the automated process in January/February.

         This process is outside of the normal PCSE process and is being directed and overseen by NHS England therefore we have been provided with assurances that there should be no problems with the payment process.

         NHS England will write to all affected practices with details of their payment and timescales in early January 2017.