




# WHAT'S ON AT THE LMC

Volume 7, Issue 11

December 2009

<i>Inside this issue:</i>		<b>WHAT HAPPENED AT THE DECEMBER LMC MEETING</b>	
Appointment Confirmation Service	4	<p><b>LMC Membership</b></p> <p>There are 2 vacancies for LMC Members in the South Manchester constituency, due to the following, and an election will be held in the New Year</p> <ul style="list-style-type: none"> <li>• Dr. Bill Pettit has resigned from the LMC due to competing commitments</li> <li>• Dr. Clare Singleton will be leaving her practice in South Manchester.</li> </ul>	
Balanced Scorecards	2		
C&B	2		
Central Manchester Foundation Trust - Stroke Services	4		
Cervical Cytology Steering Group	4		
Children & Young People's Plan	4		
City of London Migraine Clinic	6		
CVD LES	3		
Flu Vaccine Consortium 2010	6		
LMC Locum List	7		
LMC Membership	1	<p style="text-align: center;"><b>City-wide issues</b></p> <p><b>NHS Manchester</b></p>  <p><b>Pandemic Flu</b></p> <p><b>Phase 2 – vaccination of children over 6 months and under 5 years</b></p> <p>Practices will have received details of NHS Manchester's LES, which was negotiated by Dr. John Hughes, LMC Hon. Secretary, on behalf of the LMC and we are grateful to John and the NHSM team of Liam McGrogan, Kevin Perrett, Ben Squires, Joe Ranson and Gail Henshaw for their hard work in reaching this sensible agreement in such a short time.</p> <p>The latest information from the CMO is as follows</p> <ul style="list-style-type: none"> <li>• Substantial reduction in estimated numbers with influenza</li> <li>• The under 5s continue to suffer high levels of respiratory illness</li> <li>• Small decrease in hospitalisations</li> <li>• Continued increase in the number of deaths related to swine 'flu</li> <li>• Detailed analysis of swine 'flu related deaths in England has been published in BMJ</li> <li>• Vaccine programme for priority groups and healthcare workers progressing well</li> </ul>	
LMC Office Closure	7		
LMC Secretaries Conference	5		
LMC/PCT Liaison	1		
Manchester Mental Health & Social Care Trust	4		
Manchester University training & research opportunity	6		
NHSM Pandemic Flu	1		
NMGH Urgent Care Pressures in the North	5		
Pandemic Flu	6		
PMS Contract Reviews	3		
Relocation of NHSM Supplies Office	3		
Revalidation	2		
Sexual Health LES	3		
(SPED) Course 2010	6		
Text Messaging Appointment Reminder	6	<p><b>LMC/PCT Liaison</b></p> <p>At the meeting on 1<sup>st</sup> December, the following items were discussed</p> <ul style="list-style-type: none"> <li>• <b>Reforming Clinical Engagement within NHS Manchester</b> (to replace PEC)</li> <li>• <b>Balanced Scorecard</b></li> <li>• <b>Key Performance Indicators for Acute Trusts</b></li> <li>• <b>Dermatology</b></li> <li>• <b>GP led health centre, Manchester City Centre</b></li> <li>• <b>Securing our future/QIPP/KPMG update</b></li> <li>• <b>Electronic prescriptions</b></li> </ul>	

# WHAT HAPPENED AT THE DECEMBER LMC MEETING

## Continued . . .

### Balanced Scorecard

At an LMC Executive Away Day on 15<sup>th</sup> December, representatives from Tower Hamlets PCT and LMC presented their balanced scorecard and outlined the process for agreeing this between the LMC and PCT. Initially this had started as a development tool in 2006, but became a more performance management tool, as a result of World Class Commissioning. The key message from Tower Hamlets was to ensure that the indicators in the balanced scorecard are relevant to general practice; are measurable; have an outcome; and are kept to a minimum. Karen O'Brien was present during the helpful presentation and discussion and it was agreed that NHSM and the LMC would form a small working group to take this forward, learning from the experience of Tower Hamlets.

### Revalidation

John Hughes met Tariq Chauhan on 7<sup>th</sup> December to discuss preparation for revalidation and it was agreed to **encourage GPs, in preparation for revalidation in 2011 and Care Quality Commission registration by 2010, to start building up an e-portfolio or manually collecting evidence covering the following basic areas** (similar to collecting for appraisal)

- Audit
- Significant events
- Complaints
- Any good practice e.g. reflective learning

RCGP is developing an e-portfolio which GPs can use for sharing information with their appraiser and kept for revalidation purposes.

It was acknowledged that multi-source feedback would be an issue for GPs, particularly sessional GPs, and extended primary care teams needed to be included, e.g. health visitors and District Nurses.

Tariq had been exploring GP mentors to assist in any remediation issues and approaches to the Deanery and RCGP had not been successful. If you are interested in becoming a GP mentor, please contact Carol Panton, at the LMC.

Tariq undertook to ensure that IT training was available to GPs to build up an e-portfolio and that the training was at GP friendly times.

### Choose and Book LES payments

The LMC welcomed the decision of NHS Manchester, following an LMC campaign, to reimburse the cohort of practices (at a cost of £20,000) that had participated in C&B but from which NHSM had not received an SLA. NHSM have made it clear that this agreement does not set a precedent and wishes to highlight the following

- It is the responsibility of practices to pursue applications for services they have expressed an interest in, however, it is the PCT's responsibility to process applications and inform practices of the outcome
- Practices should not commence services until instructed by the PCT and the PCT appreciates there will be exceptions and these will be dealt with on a case by case basis.

### Choose and Book outstanding referral letters

The LMC noted an exchange of emails between John Hughes and Susan Lock, Commissioning Manager, Urgent Care during which the latter sought the support of the LMC in requiring practices, in elective routine referrals, to generate and attach a referral letter to an appointment request within 3 working days unless there are exceptional circumstances. John responded that the 3 day limit for routine referrals has neither evidential nor legal basis and would be extremely difficult for smaller practices to comply. The LMC supported John's view that it supported timely attachment of referral information, but did not support the 3 day time-scale as there was no evidence base for either necessity or patient safety issues. However, the LMC noted that referral letters were sometimes required if patients were being sent for triage where there was an obligation to send them.

# WHAT HAPPENED AT THE DECEMBER LMC MEETING

## Continued . . .

### PMS Contract Reviews

Tracey Vell and Ash Bakhat continue to represent the LMC at meetings with Karen O'Brien, Ben Squires, Conor Lomas and Karen Wonnacott. The range of PMS contract values, based on cost per patient is from £56 to £103 and the PCT has decided to set the benchmark at £70 and to concentrate on the 12 PMS practices with contract values above £70. As part of the review, the PCT would be looking at



- Proactive registration to increase practice list size within the contract value
- Justification from practices of their increased contract value, compared to other practices (e.g. high student population, vulnerable patients e.g. homeless)
- Having core PMS services with the same cost per patient for all practices, with add on costs for extra services provided
- Reducing contract value, where not justified and encouraging practices to provide enhanced services, to earn additional funds

Six PMS practices have contract values less than £63.21 per patient (cost per GMS patient) and the LMC and PCT would encourage them to consider reverting to GMS on financial grounds. Two practices have already returned to GMS, following a 3 month notice period to the PCT and report that the process has not been too onerous and the PCT has been helpful.

The issue of PMS partnerships that have been set up incorrectly in Manchester will be addressed as part of the review, as NHS Manchester (and PMS practices) are keen to regularise this.

The PCT will host a roadshow for PMS practices in the New Year, at which the LMC will be represented, to explain the process to practices in advance of the review visits and to reassure them of the LMC involvement in the process.

**PMS practices are encouraged to attend.**

As the Reviews have taken longer than expected, the PCT will issue contract extensions for PMS practices from 31<sup>st</sup> December 2009 to April 2010 and the review visits should be completed by end of March 2010.

### Sexual Health LES

John Hughes, Barbara Allen and Philippa James (who had worked with NHSM on the original Sexual Health LES) met to discuss the difficulties with pricing of the Sexual Health LES and NHSM's decision to claw back monies from practices. At a meeting between the above GPs and Karen O'Brien on 10<sup>th</sup> December, it was agreed that as there is no real evidence of practices over claiming, NHS Manchester will visit practices with high rates of claims/usage, to assess the claims. The visits will be carried out in the next month or so. Negotiations are ongoing regarding the pricing of the LES for next year.

### CVD LES

The LMC expressed disappointment at the decision of NHSM to postpone the start of the LES to April 2010, as most patients will have been screened by that date and GPs would not be paid for that work.

### Relocation of NHS Manchester supplies office

The LMC expressed concern that the supplies office had been relocated to Parkway Business Centre but no contact details had been communicated to GPs, which had created issues for GPs wishing to order prescriptions, needles, syringes etc. NHSM confirmed that contact details would be sent to GPs, and we are aware this has now been actioned.



# WHAT HAPPENED AT THE DECEMBER LMC MEETING

## Continued . . .

### **Cervical Cytology Steering Group**

John Hughes attended a meeting on 27<sup>th</sup> November, when significant items were as follows

- An update course is being organised
- GPs should not be doing vault smears, as these should be done under colposcopic supervision and patients presenting for these smears should be referred back to their surgeon
- Cytology processing was now 6-8 days
- Slight delay on the HPV triage with about 5% taking up to 2 weeks.

### **MANCHESTER MENTAL HEALTH AND SOCIAL CARE TRUST**

Dr. Mark Spurrell, Medical Director of MMH&SCT and Richard Barnard, Consultant clinical Psychologist and Head of Psychology, South, gave a presentation entitled "How might we look in five years' time?" and a copy of the presentation and the Q&A session is available on request from the LMC office.

The main message of LMC Members was that the current MMH&SCT service needed to improve dramatically, and this had to start now, not in 5 years' time. However, the plans presented were encouraging and patient focussed and the single point of access should mean that once patients are referred they would be appropriately sign-posted within MMH&SCT to avoid the current frustration of GPs having referrals returned, as the patients do not fit the criteria for that particular service.

### **MANCHESTER CITY COUNCIL**

#### **Children and Young People's Plan**

Dr. Stephen Farrar commented on the draft plan, on behalf of the LMC, as follows

- Concern about paucity of clinical membership on the proposed Board, especially GPs
- Insufficient attention to the different approaches to various age groups. Children grow fast but 8 is not 16
- More attention needed for transition to adult life
- Insufficient parental/carers input
- Insufficient detail about balance of acceptable risk and protection
- Board must realise that the very important economic drivers are not in their gift.

## **Locality Issues**

### **Central Manchester Foundation Trust – Stroke Services**

The LMC noted that Dr. Ganesh Subramanian, Stroke Consultant, would be leaving CMFT on 18<sup>th</sup> December and that CMFT had not been forthcoming about future plans for Stroke Services, other than initially employing a locum consultant. Members expressed concern at the implications for the quality of stroke services available to GPs and patients and felt the reason Dr. Subramanian had left was because CMFT had not applied to be a Specialist Stroke Centre and, without that status, CMFT would struggle to recruit Stroke Consultants. Dr. Helen Hosker, NHSM Clinical Lead for Stroke and Falls Commissioning, agreed to feed back those concerns to CMFT.

### **University Hospital of South Manchester**

#### **Appointment Confirmation Service**

The LMC noted that during the pilot ACS at South Manchester, it was decided that this should be rolled out nationally with centralised procurement

# WHAT HAPPENED AT THE DECEMBER LMC MEETING

## Continued ...

### North Manchester General Hospital



#### Urgent Care Pressures in the North

The LMC considered a letter dated 24<sup>th</sup> November to GPs from Susan Lock, NHSM Commissioning Manager, Urgent Care, outlining the increased pressure on the Urgent Care System, particularly in North Manchester and requesting GPs to do anything they could to avoid sending patients to NMGH.

The LMC accepted that whilst the majority of GP hospital referrals are appropriate, it is difficult to keep track of the various services and some GP colleagues may forget about alternative pathways and felt it was timely **to remind GPs to consider the alternative pathways available.**

It was agreed to respond to the Urgent Care Leads, with the following points

- the LMC did not accept that hospital admissions were driven by GPs
- Walk in Centres, which are usually nurse led, regularly refer patients to hospital as whilst the nurses may have excellent skills, they are risk averse, unlike GPs
- Patients self-present at A&E and more work was needed to understand why patients bypass primary care and attend A&E
- GPs need more clarity on where patients should be sent.

## GUIDANCE AND INFORMATION FROM THE GPC/BMA

### LMC Secretaries Conference and Quality Conference

John Hughes and Carol Panton attended the above conferences on 3<sup>rd</sup> and 4<sup>th</sup> December at BMA House and the joint messages from Steve Field, RCGP and Laurence Buckman, GPC were as follows

- whilst the vast majority of GPs provide good quality care, a minority do not and poor quality care should not be tolerated.
- There is wide variation in the quality of care provided by GPs.
- GPs do need to work smarter.
- There should be a professionally led re-accreditation for GPs to demonstrate to PCTs that GPs are providing good quality care. The RCGP, GPC and Care Quality Commission are working together on this to avoid duplication.

The challenge for LMC and GPs is that practices have to be compliant with CQC conditions by April 2012, otherwise they will not be able to practice (although the CQC can impose conditions to registration rather than closing practices down).

Once details of the CQC standards are finalised and published, Manchester LMC will hold meetings/workshops for practices to ensure they can satisfy the standards before April 2012.

To summarise, GPs and practices will be faced with the following:

- Balanced scorecards
- CQC registration
- Revalidation
- Practice Accreditation (RCGP have piloted and are finalising a PMCPA scheme, details awaited)

# ADDITIONAL INFORMATION

## Pandemic Flu

The 2<sup>nd</sup> edition of the joint GPC/RCGP/DoH pandemic flu guidance for GP practices has now been published. The original guidance was designed to help general practice plan for the possibility of having to work during a severe pandemic, such as avian flu. The updated guidance has been reviewed to take into account this year's swine flu outbreak and the guidance that has been published in relation to this. It is available from the BMA website at:



[http://www.bma.org.uk/health\\_promotion\\_ethics/influenza/panflugp/panfluguide.jsp](http://www.bma.org.uk/health_promotion_ethics/influenza/panflugp/panfluguide.jsp)

Also, the following documents are **attached** for use in your practice, which we hope you find helpful:

- DoH/RCGP flowchart for the triage of swine flu patients, for GP Practice Managers and Receptionists
- BMJ information leaflet, which practices can give out to patients. Please note that this document is BMJ Group Copyright, so should not be amended in any way.

## Text Messaging Appointment Reminder Service

NHS Manchester has secured a deal to set up a text messaging appointment reminder service in Manchester general practices using EMIS as their clinical system. The first year is free, and thereafter costs £395 per year. If you are interested in using this system, please contact Michael Cunningham at Healthcare Communications UK Ltd., on 0161 429 4151, or email [mcunningham@healthcomm.co.uk](mailto:mcunningham@healthcomm.co.uk) for further details.

## Senior Professional Education and Development (SPED) Course 2010

This is a personal development and leadership course for GPs, run by GPs. It is likely to appeal to GPs who have been in practice for more than 10 years. The course is spread over 2 years with 3, 3-day residential modules in the Lake District and a number of study days at a central location. The next course starts between 15<sup>th</sup> – 17<sup>th</sup> September 2010. SPED educational costs are supported by the Deanery and participants are asked to contribute £500 towards the course fees, which includes full residential costs. The additional leadership module is not subsidised and costs £325 (to be confirmed). The closing date for applications is 31<sup>st</sup> May, 2010 and further information can be downloaded from [www.nwpgmd.nhs.uk](http://www.nwpgmd.nhs.uk), or contact Tash Billington at [n.billington@nwpgmd.nhs.uk](mailto:n.billington@nwpgmd.nhs.uk). Tel. 0161 234 6155.

## Manchester University training and research opportunity

Your experiences of real life management of respiratory tract infections are needed for a Manchester University study to develop an evidence based training programme. The research will involve:

- 20 – 30 minute interviews
- Focus on your experiences
- Locum and travel costs covered
- An opportunity for free training, informed by the research results.

If you are interested and available in the next 2 – 3 months please contact Anna Chisholm, Research Assistant, at [anna.chisholm@manchester.ac.uk](mailto:anna.chisholm@manchester.ac.uk) Tel. 0161 306 1751, or Dr. Sarah Peters, Principle Investigator, at [sarah.peters@manchester.ac.uk](mailto:sarah.peters@manchester.ac.uk) Tel. 0161 275 2558.

## City of London Migraine Clinic

The Clinic holds free evening Masterclasses throughout the year to allow medical professionals to learn about the leading research in the field, as well as to provide advice on more specialised topics. They held 6 seminars this year, which were lectured by renowned professionals, including Dr. Anne MacGregor and Dr. Giles Elrington. Certificates of attendance of the Masterclasses, which qualify for CPD points, are always provided. If you are interested in forthcoming events, visit [www.migraineclinic.org.uk](http://www.migraineclinic.org.uk), or email Laura Moyes at [laura.moyes@migraineclinic.org.uk](mailto:laura.moyes@migraineclinic.org.uk) Tel. 0207 251 3322.

## Flu Vaccine Consortium 2010

Please see the **attached** letter outlining the arrangements for 2010/11 vaccines.

# ADDITIONAL INFORMATION

## LMC Locum List

Please see the **enclosed** up to date locum list, for the attention of the Practice Manager.

## LMC OFFICE CLOSURE DURING THE CHRISTMAS HOLIDAY

Please note that the LMC office will **close at 12 noon on Thursday 24<sup>th</sup> December 2009** and **re-open on Monday 4<sup>th</sup> January 2010**. Any **urgent** matters that arise during Tuesday 29<sup>th</sup> to Thursday 31<sup>st</sup> December may be raised with LMC Officers, as follows

Dr. Tracey Vell (LMC Chairman) at 0161 224 4736 (available on 29<sup>th</sup> Dec a.m. only, and all day on 30<sup>th</sup> Dec)

Dr. John Hughes (LMC Hon. Secretary) at 0161 721 4865 on 24<sup>th</sup> Dec; and at 07788 107150 on 29<sup>th</sup>, 30<sup>th</sup> & 31<sup>st</sup> Dec.

Dr. Ash Bakhat (LMC Vice Chair) at 0161 435 3551 (available until 1 p.m. on 29<sup>th</sup>, 30<sup>th</sup> & 31<sup>st</sup> Dec.)

Dr. Stephen Dean (LMC Treasurer) at 0844 477 8670 (available until 6.30 p.m. on 29<sup>th</sup> Dec.; and until 1 p.m. on 30<sup>th</sup> & 31<sup>st</sup> Dec.)

For non-urgent issues, please leave a message on the LMC answer-phone and we will respond once the office has re-opened.

**LAST, BUT NOT LEAST, ON BEHALF OF THE  
LMC MEMBERS AND STAFF, MAY WE WISH YOU  
SEASON'S GREETINGS AND A PROSPEROUS AND  
HEALTHY NEW YEAR**

**MANCHESTER LOCAL MEDICAL COMMITTEE**

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**You are invited to contribute your  
views and influence debate by  
Contacting your constituent LMC  
member (details on the LMC  
Website) or direct contact with the  
LMC office**

