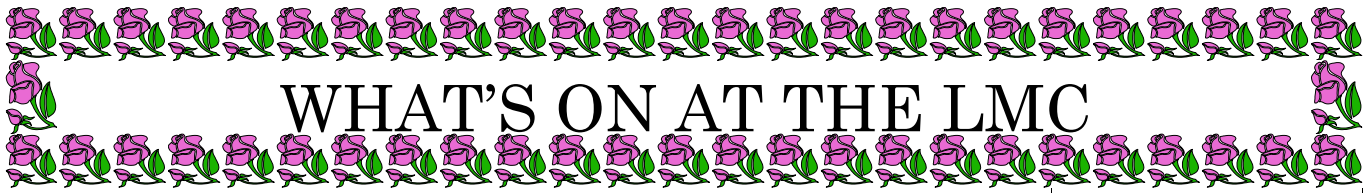



Manchester Local Medical Committee



WHAT'S ON AT THE LMC

Volume 7, Issue 7

July 2009

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WHAT HAPPENED AT THE JULY LMC MEETING

Continued ...

Business Continuity Plans training

NHS Manchester is providing local training sessions in a workshop format and will support practices to develop their flu plans. Places are limited and it is recommended that the Practice Manager or nominated lead for flu at your practice attends. There is one remaining session on:

- Wednesday, 29th July, 1 – 4 p.m. at Cheetham Primary Care Centre, Room 26, Cheetham, M8 8AU

To book a place please email joyce.thorley@manchester.nhs.uk Please note that lunch will not be provided.

Swine flu infection control training

NHS Manchester Community Infection Control Team is providing training on infection control precautions to practices. A letter giving the course dates is **attached**.

BMA Pandemic flu website page

A pandemic flu page with information specifically aimed at GPs has been set up on the BMA website, which is accessible to members and non-members:

http://www.bma.org.uk/health_promotion_ethics/influenza/panflugp/index.jsp

Pandemic flu indemnity arrangements agreed by GPC

GPC has met with MDU and MPS to clarify whether GPs working in any primary care role, in their usual place of work or in a position to which they have been transferred, would continue to receive full protection of the above Medical Defence Unions (MDOs) and the MDDUS. The MDOs appreciate that the extra demands on GP services as a result of pandemic flu may impact upon the ability of GPs to carry out work to non-pandemic standards and acknowledge that during the pandemic, GPs may have to provide care to very ill patients in the community who would have been admitted to hospital under normal conditions.

GPs transferred to non-primary care roles will be subject to NHSLA indemnity. In such situations, GPs should be provided with written evidence by their contracting body confirming that they have been commissioned to provide services on its behalf. GPs must also continue to remain members of their ordinary MDO.

It will be the responsibility of the employers of retired GPs to provide them with indemnity cover. It is planned that PCOs will employ retired GPs in roles supporting currently working GPs, and that they will therefore be covered under NHSLA indemnity. **For this reason, it is strongly advised that individual GPs do not employ retired GPs themselves, as they will be liable for provision of their indemnity.**

The MDOs have provided guidance on their websites confirming the above arrangements:

- [Guidance on the MDU website.](#)
- [Guidance on the MPS website.](#)
- [Guidance on the MDDUS website.](#)

The GPC is seeking a written statement from the DH supporting the imposition of NHSLA indemnity for GPs working outside of primary care settings and for retired GPs employed by PCOs.

Swine flu fit to fly notes for airlines

The advice of Peter Holden, GPC flu lead is that GPs should refuse requests for notes confirming fitness to fly, as they are worthless and detract from the real work of GPs.

WHAT HAPPENED AT THE JULY LMC MEETING

Continued ...

City-wide issues

GP Patient Survey

NHSM consulted the LMC on its proposal to make discretionary local payments for PE7 and PE8 to practices where results have a confidence level of above 7%; and where practices achieved a lower percentage survey score in 2008/09 than in 2007/08. The LMC Officers had supported the proposal, as NHSM needed a response prior to the July LMC meeting, to ensure it responded to practices with disputes within the agreed time limits.

The LMC will be writing to GPC expressing disappointment that those practices that had a confidence level less than 7% would not receive discretionary payments, and giving the example of 1 Manchester practice that worked hard and achieved better results than the previous year, but because the targets had been increased, the practices would not be remunerated.

PMS Contract Reviews

LMC representatives had a successful meeting with Karen O'Brien and Conor Lomas on 14th July to discuss the draft city-wide PMS agreement. Agreement was reached on 7 of the 12 LMC concerns and Karen agreed to review the remaining 5 LMC concerns and to come back to the LMC for further discussion at a meeting within the next 6 weeks.

Gateway House power outage and IT downtime

The LMC discussed the exchange of correspondence between John Hughes, LMC Vice Chair and Iain Bell, NHSM Director of Performance about the IT incident on 29th June (John's letter dated 1st July was emailed to practices). We are expecting a full report by the end of the week.

The LMC discussed whether the LMC should make a recommendation to practices that they should cancel their surgeries in the event of future IT failures, due to patient safety issues and the majority view was that practices should not cancel their surgeries, but should explain to patients the limitations of consulting without access to their medical records; and that the fault lay with the IT provider, NHS Manchester, not the practice.

Therefore, the LMC recommends that in the event of any future IT failures, GPs should triage patients; explain the limitations of consulting without IT; and provide immediately necessary treatment where it is safe to do so. The LMC will also ask NHS Manchester to request EMIS to fax appointment lists to all practices as soon as they become aware of an IT failure, so practices know which patients to expect.

IT Baseline Assessment

The LMC noted the exchange of emails/correspondence between the LMC and Lynn Morris, IT Project Manager, NHSM, details of which were emailed to practices in June, advising of the LMC view that only those practices participating in the IM&T DES should complete the assessment; and that practices were not obliged to provide information outwith the DES eg staff details and C&B.

QOF 5% random counter fraud checks – selection of practices

Jane Jackson, NHSM, and LMC staff randomly selected 6 practices (2 each from North, South and Central Manchester) for this year's counter fraud check. Practices that had been selected in the previous 2 years were excluded from this year's selection. The selected practices have since been contacted by NHSM.

Financial position of NHS Manchester

The LMC discussed Laura Roberts' paper on the financial position of NHS Manchester entitled "Service Improvement and System Reform – NHSM's approach to Quality and Efficiency – Programme Mandate" extracted from the July Board NHSM papers. Members acknowledged the seriousness of the situation; noted that Laura would be speaking to PBC commissioners, Acute Trusts and the Local Authority about making major savings; and it was agreed to invite Laura to attend a future LMC meeting to explain how the financial position would affect primary care and patients.

WHAT HAPPENED AT THE JULY LMC MEETING

Continued ...

Immunisation and Vaccination Management Group

Members received Dr. Steve Riley's reports on meetings held on 18th and 26th June, the main thrust of which was concerns over delays and queues for childhood immunisations at certain Manchester practices. The LMC noted that, unless practices had withdrawn from childhood immunisations, which was an additional service, they were receiving funding and had an obligation to provide this service. It was agreed to identify the practices with significant backlogs and the LMC will approach them directly to ascertain where the problem lies.



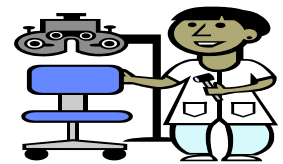
Direct access to midwives

The LMC discussed Mr. Michael Maresh's letter dated June to GPs, informing of the campaign launched on 22nd June, encouraging women to directly access midwives. The LMC has since written to Mr. Maresh expressing its concerns about direct access to midwives on clinical safety grounds as this would lead to fragmentation of care; and a lack of important information for midwives and obstetricians about past history, medication etc, which a GP would usually provide in referral letters. The LMC acknowledged the important role of midwives and GPs would be happy to continue referrals to midwives within their surgery premises, as this was viewed as multidisciplinary care, not fragmentation, as the GPs were still involved.

The LMC advice, in the meantime, is that General Practices should not display the posters advertising the campaign, until the LMC has been reassured about the clinical safety of direct access to midwives.

Glaucoma referral refinement V. ocular hypertension referral refinement

The LMC discussed the report of Ted Cadman, LOC, seeking LMC support of the LOC proposal to NHS Manchester that community optometrists should define and refine ocular hypertension referrals and be paid a fee for this service. Members noted that NICE guidance had been the trigger for the LOC proposal and agreed to support the LOC on the basis that optometrists were the appropriate professional to make the referrals, without the need for the GP as middle man, and the concept of no new work without new money.



Locality issues

Equitable Access to primary Care

The LMC noted that no practices in Longsight, Levenshulme and Moston had responded to the LMC invitation for volunteer practices to invite local councillor/journalists to their practice to demonstrate the good services they provide. This was to be part of the LMC campaign and suggested by the BMA.

The LMC noted the following from Debbie Nixon's letter dated 7th July

- Longsight – an APMS contract had been signed with SSP Health and a potential site at the junction of Stockport Road, Birch Lane and Plymouth Grove was under consideration. The practice was expected to open early 2010
- Levenshulme – new tender underway and at the initial Expressions of interest stage

MRI and PAT Switchboard

Members discussed the increasing difficulty in using the MRI switchboard (and North Members reported the same problem with Pennine Acute Trust) and it was agreed to raise this as a clinical governance issue with the Medical Directors and Chief Executives of the Trusts.



WHAT HAPPENED AT THE JULY LMC MEETING

Continued ...

National issues

GENERAL MEDICAL COUNCIL

(i) End of Life treatment and care – consultation

Stephen Farrar had completed the consultation questionnaire on behalf of the LMC, and his response was ratified (copy available on request).

(ii) Introducing the licence to practise in 2009

GPs are reminded that all doctors need a licence to practise from 16th November 2009 and GMC has sent out a reminder to GPs that they need to inform GMC by **14th August** which of the following options they wish to take

- Registration with a licence to practice (annual fee of £410)
- Remain registered without a licence to practice (annual fee of £145)
- No longer registered

NICE – Developing clinical and health improvement indicators for QOF – Interim process guide

This guidance is available from <http://www.nice.org.uk/aboutnice/qof/qof.jsp>

GUIDANCE AND INFORMATION FROM THE GPC/BMA

LMC/Negotiators regional meetings

The next meeting will be held on Wednesday, 30th September 2009 at 7 pm at Sam Platts, Trafford Wharf Road when Dean Marshall, GPC Negotiator will be in attendance. John Hughes, new GPC representative for Manchester, Salford and Trafford and Stockport (and LMC Vice Chair) will be chairing the meeting. Application form **attached** GPs are encouraged to attend.

Negotiating News

Laurence Buckman, GPC Chair, regularly updates LMCs on negotiations and matters affecting general practice. Extracts from his latest newsletter regarding pandemic flu are **attached**.

BMA invites MPs to visit their GP surgery

On 13th July, the BMA invited MPs to visit their local GP surgery. This is the second time the organisation is inviting MPs into general practice in order to give them the opportunity to learn more about its unique contribution to delivering patient care. MPs participating in the scheme have found it to be a positive experience with many praising the hard work and dedication of the practice teams. The BMA is looking for GP practices that are willing to meet their MP. Any practices that are interested should contact parliamentaryunit@bma.org.uk

Sessional GPs newsletter

The BMA's Spring 2009 newsletter for salaried and locum/freelance GPs is **enclosed**.

BMA Employer Advisory Service

This Service provides practices with free comprehensive, impartial and authoritative advice on a huge range of employer-related matters. A team of specially trained and experienced advisers is ready and able to deal with queries on issues such as recruiting and employing staff, contracts and terms and conditions of service, appraisals and performance management, disciplinary procedures and dismissals. They are also well versed in current employment legislation, discrimination, the development of appropriate HR policies, and how to implement best practice. Call the BMA Employer Advisory Service on 0300 123 123 3 anytime between 8.30am and 6pm (Monday to Friday, except UK-wide bank holidays) to speak to an expert adviser; or email queries to support@bma.org.uk. To access the service at least one partner needs to be a BMA member.

GUIDANCE AND INFORMATION FROM THE GPC/BMA continued ...

Department of Health survey of clinical DES update

The Department of Health is undertaking a survey of five practices in each PCT to establish the extent of uptake of the 08/09 clinical DESs. Although GPC was not consulted about this survey, it seems to be a reasonable endeavour which could support the GPC's negotiating position. Practices nationally are therefore advised to cooperate with any requests for information for this survey.

Guidance on Sealing Electronic Patient Records from the Joint GPC/RCGP IT Committee

Some GP clinical systems include functionality that allows a GP to restrict access to elements of patients' electronic health records to different levels of user within the practice. This functionality is not consistent across systems and any data that is hidden is likely to be revealed when the patient record is transferred to another GP clinical system. This can happen when a patient's record is transferred to another practice via traditional paper record transfer or GP2GP or following a data migration to another GP clinical system in the practice.

GPs are therefore advised to inform patients, who want elements of their electronic health record to be kept confidential, that the information is not likely to remain hidden when the record is transferred to another system, either electronically or via paper transfer.

ADDITIONAL INFORMATION

HIV training

Dr. Stephen Higgins, Consultant Physician in Genitourinary Medicine at North Manchester General Hospital, is in contact with Dr. Avril Danczak, General Practice Postgraduate Tutor, about putting together training for GPs in the autumn, on how to manage HIV positive patients. We will publish further details when the education programme is published.

LMC Office Cover from 20th July to end of August 2009

As usual, the LMC staff are taking advantage of the August recess (when there is no LMC meeting) to catch up on their annual leave. As we only have 3 staff (one of whom is part time) there will be occasions when there is only one member of staff present. So please bear with us, as there will be times when the answer phone is on, but we will get back to you as soon as possible.

The LMC wishes everyone an enjoyable summer and happy holidays

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**You are invited to contribute your
views and influence debate by
Contacting your constituent LMC
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