

Dr Phil Ballard

We welcome Dr Phil Ballard from Tamworth to his appointment as Medical Director for the PCT. The LMC looks forward to a good working relationship with Phil and the application of his energies to the many issues currently involving us all. An early one will be the Poor Performance Procedures which need to separate the PCT roles of information gathering and decision making.

GP Patient Survey

We will all have seen the results of the survey and compared these to other practices in South Staffordshire. Under the title "Improving Access, Responsiveness and Choice in Primary Care" the PCT has been asked by the Department of Health to produce an Action Plan to demonstrate "tangible improvements to patients" by 31st December 2007. The survey highlighted 5 key areas - satisfied with telephone access, appointment within 48 hours, able to book in advance, able to see a specific GP and satisfied with opening hours. The PCT is requesting practices that are in the bottom 10% in one or more of the key areas to produce an Action Plan for inclusion in the overall plan. There were only 2 practices who did not meet the GP access target.

The PCT has informed the LMC that any decision to extend opening hours in the evening or weekend will be taken by the Practice Based Commissioning locality directors, Sue Price and Geraint Griffiths, and will be funded by the 1% cash release that the PCT has in its coffers. Please be reassured that the LMC will be involved in any discussions.

Choice & Booking

Many of us that use Choose and Book are unhappy that we are unable to make referrals to named consultants in our local Acute Trusts. This is in direct contravention of statements made by Dr Clive Pickles, Secondary Care Lead for the National Choose and Book Team and outlined in the Department of Health Guidance. Our local Choose and Book lead at the PCT has stated that if the patient wishes to be referred to a named consultant the GP can process this referral outside of Choose and Book. However, the total number of referrals will fall into the 10% allowance for referrals sent outside of Choose and Book, which may result in a reduced DES payment. The LMC feels this is completely unacceptable that GPs should be financially penalised because of the rigidity of local arrangements which are set to meet the 18 week referral targets. We are currently pressing the PCTs and Acute Trusts to change their stance.

The BMA Guidance can be viewed at <http://www.bma.org.uk/ap.nsf/Content/chooseandbookguide> or a copy can be requested via the LMC office.

Choice Read Codes for the 2007/08 DES

Practices expecting to participate in the Choice element (component 1) of the Choice and Booking DES 2007/08 should have started using the identified read codes, to

identify a survey sample population, by 1st September 2007. This will allow the patients who have been identified as having been referred for a first consultant outpatient appointment which is subject to Choice by a GP for inclusion in the survey.

There has been a lot of confusion amongst GPs about the use of these codes, particularly confusion between the "Choice" and "Choose and Book" aspects of the DES. It is important to note that GPs only need to use the codes for the choice part of the consultation. These codes have nothing to do with Choose and Book. The LMC has previously circulated the codes to all practice managers.

Out of Hours and GP Pay Rates

The tendering process for the Out of Hours from April 2008 are currently underway and interviews will take place soon. Please note that currently £2.6m has been paid by the PCT for the services of Staffordshire Ambulance and another £2m is spent on the services provided by the Primary Care Centres.

The LMC role is on a consultative basis and has been involved in developing the process for the tender and any requirements within it. However the terms and conditions between the individual GPs and the appointed Out of Hours organisation is a Trade Union activity which is not the remit of the LMC to discuss pay rates. It is therefore the advice of the LMC that any GPs involved in Out of Hours who may be concerned that their pay rates maybe reduced should get together and discuss if they need to take any action. The BMA would be an appropriate body to approach, such as the local IRO in Birmingham.

The LMC has firmly pushed with the PCT, the quality aspects of delivery of the service with increased GP involvement and appropriate remuneration.

Do Not Resuscitate Forms (DNR)

The LMC Secretary has met with Dr Ken Deacon the new Medical Advisor to Staffordshire Ambulance Service and discussed the problem of the GP role or not in DNR forms. Dr Deacon has made the following suggestions: -

- 1.If a GP is aware that a patient is terminally ill, this information should be shared with the ambulance service.
- 2.If resuscitation would be inappropriate then this information should also be shared with us
 - A. A DNR form should be left with the patient
 - B. We should be informed of it's existence
 - C. This information will be flagged on our computer system
- 3.The GP should decide an appropriate period after which the form should be reviewed, we would remove the flag from our computer system after this date.
 - A. We would notify the GP that the form had expired, to allow him/her to review/renew it if appropriate.

This was vigorously debated at a recent LMC meeting and members decided to agree

to 1, but were unable to agree on 2. It was felt that this was up to individual clinicians to decide whether they completed DNR forms. However the key emphasis should be on ensuring that clinicians are available in the new service for Out of Hours provision.

Please note it is not necessary to update a DNR form every 2 weeks.

OFSTED Guidance for Over the Counter Medicines

OFSTED standards do not involve doctors in the provision of OTC medicines. When next requested for a note from parents or child minders please see the paragraph below from the OFSTED National Standards Guidance: -

“You may give children non-prescription medication such as cough preparations, or teething gel but only with prior written agreement of the parent and only when there is a health reason to do so. For all non-prescription medicines, parents should give written consent that specific medication can be administered to their child when required. Written consent should be obtained from parents at the time you start looking after their child and checked at regular intervals so that you take account of any changes for example where a child can no longer take a certain type of medication or may need an additional medication.”

Medical Conditions Letters/Borough Council

Following a local increase in letters from Borough Council Housing Departments the LMC has again raised this with them. We have eventually received a reply where the Council confirms that it is the responsibility of the applicant to obtain medical evidence required and to bear any cost associated with this. It has been the policy for several years for Councils not to pay for the production of medical evidence. They have agreed that notification that a charge may be made for the provision of supporting medical information will be included on the paperwork sent to applicants. However they pointed out that the decision to charge is one taken by the relevant health professional or organisation and it is not the Council's role to justify this decision to applicants.

South Staffordshire PCT - Financial Summary

You may be interested in the budget summary for 2007/08 which have been rounded up in millions according to GMS/PMS budgets.

GMS PMS

Whole PCT 39 39

South East 7 12

East Staffordshire 12 4

Cannock 8 10

Stafford 7 9

Seisdon 3 3

Headquarters/Administration £18million
Acute Trusts £343million

BMA Guidance

Several guidance notes have produced by the BMA recently: -

Accepting Donations from Patients

Focus on Salaried GPs

Confidentiality and Disclosure of Information to PCTs in Primary Care Settings

These are all available at <http://www.bma.org.uk/ap.nsf/Content> and may also be requested from the LMC office.

Annual Meetings

We look forward to meeting you for a discussion on current issues. Come and have your say at: -

South East Annual General Meeting, 2nd October 2007—Swinfen Hall, Swinfen, Nr Lichfield, Staffordshire, WS14 9RE—6.30pm until 9.00pm.

South West Annual General Meeting, 9th October 2007—Best Western Tillington Hall, Eccleshall Road, Stafford, ST16 1JJ—6.30pm until 9.00pm.

Dates for Next Main LMC and Sub Com Meetings

South Staffordshire LMC - 8th November 2007, South Staffordshire PCT, Edwin House, Second Avenue, Centrum 100, Burton on Trent.

South East Staffordshire Sub Committee - 19th November 2007, South Staffordshire PCT, Edwin House, Second Avenue, Centrum 100, Burton on Trent.

South West Staffordshire Sub Committee - 22nd November 2007, South Staffordshire PCT, Mellor House, Corporation Street, Stafford.

Dr V Spleen

Dear Reader

So if you had any doubts about just how much the Government are out to get GPs, now you know.

Their mates in the C.B.I have been called up to blame the creaking economy on us, public enemy number one. Why? It seems we are guilty of falsely imprisoning great

swathes of the country's work force for hours in our surgeries, instead of them carrying on bravely, coughing, peucking and belly-aching at work. After all there are company bonuses depending on it. Rather than staggering home, moribund, into the arms of their loved ones, they should be able to see us in the evening and at weekends. Not for them the luxury of family time, food, hobbies, sport or sleep.

I have had an idea. I am always keen on brown nosing to the Prime Minister, after all there seems a long medical tradition emerging. Why not abolish holidays in the UK for patients, GPs and Politicians. Drastic? Well think about it. The rush to clear your desk before, the backlog after, covering your colleagues. Holidays are nothing but trouble anyway.

All those holiday related consultations, travel advice, insurance queries, explaining to the patients why a minor side effect from Larium (and only if you are bonkers) are better than Malaria. Girls who want their periods stopped, so not to spoil their fun in Ibiza or Magaluf. Mums who want something "just in case little Johnny gets that ear infection again". "Doctor, what can I do about prickly heat/mosquito bites" "Do I need a letter about my insulin?"

While they are away it is no better. Faxes, "as soon as possible, so as not to distress your patient." "Has Mr Bloggs discussed his travel plans with you, has he sneezed in the last 5 years?"

Then, when our great overseas ambassadors return, the fun really starts. Sunburn, diarrhoea, fungal rashes, swimmers ear, night clubbers groin, late periods (the Greek waiter was to die for). Those wretched insect bites, with red lumps the size of Jordan's boobs..... "What are you going to do about it doctor, this happens every year!"

Think about it and you will realise how much simpler life would be.

I can see it now, the latest honoured medic. "Thank you Mr Brown, a CBE would be lovely, But I can't make it next week.....a conference, yes, in Spain.

Yours faithfully

Venture

The views expressed in this column are those of the author and not necessarily those of the LMC.