



# LMC NEWS

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### WEST MIDLANDS GPC NEGOTIATORS ROADSHOW THURSDAY 6 FEBRUARY 2014

The guest speaker will be Dr Chand Nagpaul, the Chair of the BMA General Practitioners Committee.

It will take place at the Birmingham Botanical Gardens, Westbourne Road, Edgbaston, Birmingham, B15 3TR from 7pm to 9pm, refreshments available from 6.30pm.

Should you wish to attend, please contact Samantha Ewing at [sewing@bma.org.uk](mailto:sewing@bma.org.uk).

### PAT TESTING OF IT EQUIPMENT

GP IT budgets have transferred from PCT to CCGs. You will note that the CCGs have taken the decision to stop reimbursing practices for PAT testing on IT equipment.

The decision came out of a prioritisation exercise because the fund is limited and it was felt the priority was to update systems.

It has to be noted that PAT testing was never in the GPSoc agreement.

However, please be aware that PAT testing is not required yearly— this is a myth. It is at the discretion of the practice. Please see [www.hse.gov.uk/pubns/indg236.pdf](http://www.hse.gov.uk/pubns/indg236.pdf) which suggests that the interval for formal PAT testing of computer equipment could be up to every 5 years.

### RECORDING TELEPHONE CALLS

Telephone calls from patients to healthcare organisations may be recorded for legitimate reasons for example, for medico legal purposes, staff training and audit, provided all reasonable steps are taken to inform callers that their call may be recorded.

Given the sensitive nature of calls to medical advice lines or similar services, we should pay particular attention to ensuring that callers are aware that their call may be recorded. We must not make secret recordings of calls from patients.

### PREPARATORY QUALITY AND OUTCOMES FRAMEWORK SCHEME

You will be aware that there has been some discussion in the press these past weeks regarding agreement by a number of Area Teams in England to retire early the 341 points due to be removed from QoF during 2014/2015. These schemes have been put in place to enable practices to concentrate on winter pressures, access and preparation for next year's new DESs involving learning disabilities and avoiding unplanned admissions and pro-active case management.

The LMCs of Staffordshire and Shropshire are in discussion with the AT about an offer to practices of retiring the 341 points in year.

It is not clear whether this offer will be possible so practices must not suspend work on these indicators for 2013/2014.

The LMC will keep you informed.

## CQC AND NEW PARTNER INTERVIEWS

The LMC is aware that new partners in the South Staffordshire area are being interviewed by the CQC over the telephone. It is clear that this should only be taking place for registered managers. Details of this have been passed to the GPC because completing a form on the internet should have been sufficient.

## VISIT REQUESTS FOR NURSING HOMES

Following some recent concerns Dr James Shipman from the Area Team has produced the attached flow chart for handling visit requests from nursing homes.

The LMC agrees that this is a useful document to be used when deciding about the appropriate use of GP time.

The AT will circulate it to all nursing and residential homes.

## HOMELY REMEDIES OR NON-PRESCRIPTION DRUG USAGE

The LMC advice has not changed that it is not appropriate for GPs to sign a form for non-prescription drug usage in nursing or rest homes.

The attached letter can be adapted for use in your practice.

## CHANGES TO THE BENEFIT SYSTEM

Changes to Welfare Benefits, particularly the introduction of the Employment and Support Allowance (ESA) and the so-called 'bedroom tax' have greatly increased GP workloads as Government departments and patients have turned to GPs to provide medical reports and letters of support. The Personnel Independent Payment, formerly Disability Living Allowance also has an appeals process requiring medical reports.

The GPC view is that most GP reports for Employment Support Allowances appeals are useless unless mention is made of the impact of the illness on their day to day living. A list of diagnoses only is useless and a disservice to patients if they are charged.

The attached changes to the benefit system leaflet will be useful for handing to patients.

## COMBAT STRESS

You may have received a request for a medical report from an organisation called Combat Stress. This is an NHS commissioned service. It mainly involves patients in the Armed Services who have experienced post traumatic stress syndrome. It is the decision of the GP whether to make a referral but we cannot charge for the report.

## IMPLANTED CARDIOVERTER DEFIBRILLATORS

Andrew Haigh Senior HM Coroner has raised the following issue about Implanted Cardioverter Defibrillators (ICD):

"Could I raise with you one issue which if of concern to all Histopathologists carrying out autopsies but is particular so at my public mortuary at Cannock, where full records and deactivation equipment is not available? A Pathologist may be examining a body without knowledge that an ICD has been implanted in the body. Potentially this could cause the Pathologist or mortuary technician a significant shock. The Pathologist is likely to have the GP records available but it is not always clear that an ICD has been inserted. I realise it is probably improper to give undue stress to one particular element of a living patient's treatment but I wonder if anything can be done to make it clearer from records when an ICD has been inserted?"

The LMC notes that the cremation form normally serves as a useful prompt but it is important that the presence of an ICD should be highlighted when providing information prior to post mortems.

**Dr David Dickson**  
**LMC Secretary**

## DATES OF NEXT MEETINGS

13 Feb	Hill Street Health & Wellbeing Centre	<b>LMC</b>
13 Mar	Edric House, Rugeley	<b>AT</b>

The meetings with the **LMC** are for the full committee of LMC members without the AT.

The meetings with the **AT** are for the LMC Executive and the AT alone.

## LMC MEMBERS

The following is a list of current members of the South Staffs LMC

Dr V Singh (Chairman)	01543 870580
Dr D Dickson (Secretary)	01283 564848

Dr P Gregory (Executive member)	01543 682611
Dr G Kaul (Executive member)	01543 414311
Dr P Needham (Executive member)	01283 565200
Dr T Scheel (Executive member)	01283 845555

Dr O Barron	01889 562145
Dr J Chandra	01543 870560
Dr J Eames	01785 815555
Dr C McKinlay (Treasurer)	01283 564848
Dr E Odber	08444 773012
Dr A Parkes	01827 68511
Dr A Selvam	01543 571650
Dr E Wilson	01922 415515
Dr A Yi	01543 870590
Dr H Zein-Elabdin	01922 702240

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**DR V SPLEEN**

Dear Reader

I received an e-mail today from the GMC to inform me that I had successfully completed my revalidation and had a licence to practice for another five years. I also received an e-mail from the CQC informing me that they could not guarantee the safety of patients at my practice as they could not guarantee that I was suitably qualified.

The patients of course only get to see the opinion of the CQC on their Website . It turns out that I do not have in place suitable policies at the practice to check on a regular basis that I am suitably qualified, so even though I am suitably qualified the CQC could not guarantee the fact.

Luckily most of my patients are not of an intellect to know what a CQC is and can barely read a newspaper that uses words of more than four letters., but sadly this has not been the case for all of our colleagues .

I suggest when you receive the phone call that you will have a CQC inspection in three days time that you ask for confirmation of this in writing and ask that the inspector brings 3 forms of identification (a passport, birth certificate a current driving licence or a utility bill with their name and address on it) so that you can confirm their identity.

On the day I suggest you check their identity and ask to see their current CRB check and ask to see the policies that the CQC have in place to ensure that their inspectors are suitably checked and qualified.

Kind Regards

**Venture**

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