



LMC NEWS

Website: www.sslmc.co.uk

E-mail: enquiry@sslmc.co.uk

CONTENTS

	Page
Non-Accidental Injury and Young Babies	1
Police Demands for Patient Detail	1
Useful Letters for Patients	2
Pandemic Flu	2
QOF Consultation	2
Freed Up Resources/Practice Based Commissioning	2
The Claire Wand Fund	2
Dr Venture Spleen Column	2
Dates of Next Meetings	2
LMC Members	3
Dr V Spleen	3

NON-ACCIDENTAL INJURY & YOUNG BABIES

Dr G Carpenter, GP Representative on the Staffordshire Child Protection Committee, would like you to note the following information:

'At recent serious case reviews where young babies have presented with bruises it would appear that the pattern of bruising has not been recognised as probably pointing towards non accidental injury. It is important for us to realise that all babies under the age of 6 months are developmentally unable to move and are therefore unable to bruise themselves. Therefore any bruising seen on a child under the age of 6 months should be considered suspicious and child protection protocols followed. Any child who is immobile should also be considered in the same vein should they present with bruising.'

POLICE DEMANDS FOR PATIENT DETAILS

A practice had a demand from the police for all known addresses for a patient and details of his last visits to the practice. The practice manager declined to give the information as it is confidential. The police threatened to go to the courts for the information to be released and say the Data Protection Act does not apply in the 'apprehension and/or prosecution of offenders (Section 29 (3) Data Protection Act 1998)'. What would you do?

The GPC have given their answer below along with the BMA Ethics guidance on secondary uses of patient data:

In summary, we advise that patient data may be disclosed to an appropriate and secure authority and used for secondary purposes (i.e. not for direct health care) if:

- They have been effectively anonymised or pseudonymised;
 - They are required by law;
 - The patient has given explicit consent;
 - The health professional is satisfied, in some limited circumstances, that the patient is aware of the use and has not objected to it, and so has effectively provided implied consent;
 - Disclosure is authorised by the Patient Advisory Group (PIAG) under section 251 of the NHS Act 2006;
 - The health professional is satisfied that the legal and professional criteria for disclosure without consent in the 'public interest' have been met.
- **Confidentiality can be breached in the public interest or where somebody may suffer harm if the disclosure is not made.**
- **The level or nature of the crime is relevant in determining whether or not it warrants a breach of confidentiality. Each doctor has to make the decision based on what seems reasonable in the individual case.**
- Of course it would be no problem if the patient has consented to the GP telling the police that he is registered with him.
 - In many of these cases, the context of the case can be relevant—at present all the police are asking is whether a specific person is registered with the GP but **what will they do with that information?**
 - We also have general advice that doctors should cooperate with the police when they can do so but the GMC advises that information should not automatically be handed over simply because it is asked for.
 - In summary, my general feeling is that the GP is unlikely to be criticised for answering the question but he may need to consider what will be the implications of that.

USEFUL LETTERS FOR PATIENTS

Medical Certificates & Schools

This letter (adopted from Wessex LMC) is useful to give to parents when the head teacher has requested a medical certificate to validate absence from school.

Mental Capacity Act/Do Not Resuscitate Forms/ Advance Directives

This informative letter (adapted from Derbyshire LMC) can be given to the Matron/Owner of Nursing/Rest homes if you feel unhappy about completing DNR forms. Please note that the PCT is discussing this issue at its End of Life Forum and will be producing guidance in due course.

PANDEMIC FLU

The GPC has recently produced guidance on preparing for pandemic influenza and was circulated by the LMC but can be found at the following link:

www.bma.org.uk/health_promotion_ethics/influenza/panfluguiddec08.jsp

The GPC has advised that practices should aim to identify 'buddying' groups and have a pandemic flu contingency plan agreed between the group and the PCT by 31 March 2009.

The LMC is engaging with the PCT to develop local plans and is ensuring we are involved in making key decisions which will effect all practices in our area.

QOF CONSULTATION

The Department of Health has begun a consultation on proposals for a new independent process with NICE. It is important that GPs respond making their concerns known how this will damage the improvements in patient care that have come from QOF.

The consultation can be accessed by the following link:

www.dh.gov.uk/en/consultations/liveconsultations/dh_089778

FREED UP RESOURCES/PRACTICE BASED COMMISSIONING

A paper has been produced on the use of freed up resources by the PBC Governance Committee of the PCT. This paper describes how out-term positions for 2007/08 have been distributed to individual practices and consortia. All proposals for spend of FURs should be approved by the PBC Governance Committee. However a deminimus level of £5k has been delegated to localities for local decision making. There is a description of what freed up resources can be spent on with an attached form for making a proposal.

THE CLAIRE WAND FUND

The Clare Wand Fund is a trust established to provide scholarships and grants for research and the further education of doctors working in general practice.

Who can apply?

Individual general practitioners working in primary care.

What can I apply for?

Grants towards the cost of, secretarial and administrative assistance for projects, stationery costs, conference fees, dissertation, travel if a project could not be undertaken in the UK.

What would not be covered?

Projects without benefit to general practice as a speciality, the costs of a locum, accommodation and subsistence costs, purchase of equipment e.g. computers, repeated grants for the same project.

How do I apply?

By application form to the Secretary, Mrs Jane Cope, Claire Wand Fund, BMA House, Tavistock Square, London, WC1H 9JP, e-mail jcope@bma.org.uk.

DR VENTURE SPLEEN COLUMN

The LMC Secretary remains grateful to all contributors over the past few years. Please remember that anyone in general practice can write the column and the author will only be known to the Secretary and office staff

Dr David Dickson LMC Secretary

DATES OF NEXT MEETINGS

South Staffordshire LMC - 5 March 2009, South Staffordshire PCT, Edwin House, Second Avenue, Centrum 100, Burton on Trent

South East Staffordshire Sub Committee - 26 January 2009, South Staffordshire PCT, Edwin House, Second Avenue, Centrum 100, Burton on Trent

South West Staffordshire Sub Committee - 29 January 2009, Wolverhampton Road Surgery, Wolverhampton Road, Stafford

LMC MEMBERS

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

Dr M MacKinnon (Chairman)	01785 813538
Dr D Dickson (Secretary)	01283 564848
Dr C Pidsley (Vice Chair/Treasurer)	01283 500896
Dr A Parkes	01827 68511
Dr V Singh	01543 870580
Dr E Wilson	01922 415515
Dr A Yi	01543 870590
Dr A Burlinson and Dr O Barron (job share)	01889 562145
Dr P Needham	01283 565200
Dr M Murugan	01543 870570
Dr G Kaul	01543 414311
Dr A Selvam	01543 571650
Dr J Holbrook	01543 503121
Dr T Scheel	01283 845555
Dr S Dey	01889582244
Dr P Reddy	08444 770924

DR V SPLEEN

Dear Reader

I am one of those who opted for Extended Hours and started doing late evening surgery. I hoped this would please the government who has been sulking ever since our new contract claiming we earn more for less! If I did not accept the offer it could have been taken that I did not care about my patients.

However, this was not enough and the appetite for the PCT to extend the EXTENDED hours was such that we are now offered incentives to open on Saturday mornings too. It is surprising how PCTs can find money to extend those services which we did free for ages. It makes me feel ashamed that I worked so cheap for so long.

It took decades for me to say "No thanks". My new year's resolution is, be it Tory or Labour, to learn to say "No more, thanks".

Happy New Year!

Venture

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