

**June 2010**

**WORCESTERSHIRE OUT OF HOURS SERVICE**

At the last LMC meeting Steve Donald, the Development Manager from Harmoni attended and gave a brief presentation about current developments. There was then plenty of time for discussion over a number of key issues. The LMC remains very concerned at the number of unfilled shifts and Harmoni is doing its best to try and adapt the TCN rota systems and encourage more doctors to work regularly in Worcestershire. In the first two months of their operation 84 different doctors took part in the Out of Hours Service. The committee has also raised the particular issue regarding the number of sessions for GP Registrars which will need to increase. In their second year registrars will also need to do out of hour sessions from August. Harmoni are planning to improve their liaison with practices, one of the options being considered is a bi-weekly all day conference slot. In the meantime Mr Donald advised us that he was very keen to get feedback from GPs and his email and mobile number are as follows:

Email: [Steve.Donald@harmoni.co.uk](mailto:Steve.Donald@harmoni.co.uk)  
Mobile: 07974 923819

We would welcome copies of any communications sent to Harmoni, for our information.

**HEALTH CHECKS LES**

The LMC understands that are major problems with the software that we are supposed to use to identify patients for the Health Checks LES. GPs were assured by the Public Health Department that MSDI software worked, was in use elsewhere and would be up and running in time for the roll out of the LES on the 1<sup>st</sup> April. We are already two and a half months behind schedule and we have no idea if and when MSDI will be rolled out. This has been raised now with the PCT. If the software does not work and they wish this activity to start we need a different mechanism to identify suitable patients. It is a shame this has happened as we did raise this as a fundamental issue during the planning of the Health Checks LES.

**HOUSING DEPARTMENT, WORCESTER CITY COUNCIL**

The City Council Housing Department are requesting medical reports from GPs and are stating that "unfortunately Worcester City Council does not have the funds to pay for this information". We have written to them once again highlighting our two concerns. Firstly we are not happy that administrative officers are seeking detailed medical reports. Should they get such confidential information? We have always felt this should be handled by a council's medical officer. Secondly we reminded them that this is not an NHS service and they cannot expect this work to be done for free. We await a response.....

**CONFERENCE OF LMCs 2010**

A delegation of Worcestershire representatives attended this year's LMC Conference which you will see reported in the usual GP media. Overall it was not the most exciting of conferences, essentially because so much is in limbo. Clearly this new Government does appear to be listening and talking to the GPC which must be an improvement over the previous sorry state of affairs. Reassurances have been made on a number of issues which have been very well received. Conference welcomed the delays in revalidation which currently seems to be a shambles. Moves to change the GP Patient Survey, targets, the whole area of NHS I.T. and NHS management are all to be welcomed. What we need to see is the detail regarding the new commissioning plans. The impression that is being given is that GP contracts will be written to take into account the new commissioning arrangements but that a major revision of our contracts is not intended. An NHS white paper is due out on the 15<sup>th</sup> July but should clarify a lot of these uncertainties. Clearly a major issue will be the level of cuts to services across the NHS and we frankly have no idea how this will impinge on GPs. Whether there will be direct cuts to primary care funding we do not know. Reductions in patient services will impinge on our work and especially on our consultations with patients.

An area of real concern however relates to the idea of abolishing practice boundaries. For some bizarre reason all political parties seem to like the idea of this and have not yet grasped that this is a fundamental change to the way how general practice services are provided and as such will have real implications. We believe this is potentially a disastrous move and have already arranged to start meeting with some of our local MPs. This will be top of our agenda. Should definite proposals be published on this scheme it will require mobilisation of general practice resources to try and re-educate the public and especially the government on what we believe could be a misguided decision.

**STRIKING A BALANCE: WHAT MATTERS MOST IN GENERAL PRACTICE?**

The GPC has recently launched the 'Striking a Balance' consultation. This asks how especially in the context of the current economic climate an increasing demand for services, general practice can be protected, developed and strengthened in line with patient, public and GP

priorities. The consultation has been sent to a wide variety of groups and a symposium is being organised in July at BMA House. The consultation website is [www.strikingabalance.org.uk](http://www.strikingabalance.org.uk) and a pdf copy of the consultation document is available. The GPC is keen for this document to be disseminated as widely as possible for comments. Practices with patient participation groups may want to respond on this. It is quite a brave document but it does ask the kind of questions that should have been asked rather than the meaningless questionnaires favoured by the last Government. The LMC will be responding in due course.

### **REPRESENTATION OF SESSIONAL GPs**

The BMA's General Practitioners Committee has announced a series of wide- ranging changes to the way sessional GPs are represented within the BMA, as part of a package of reforms aimed at bolstering the voice of this crucial group of doctors.

The report from the GPC Sessional GPs Working Group is based on conclusions drawn from a large- scale consultation process that included a survey of over 1800 sessional GP members and a review of the way Local Medical Committees represent these doctors locally. External stakeholders were also consulted and structured interviews carried out on representational issues with grassroots sessional GPs.

New reforms outlined in the report include:

- Delegating authority to the Sessional GPs Subcommittee of GPC (SGPS) so that sessional GP representatives act on matters wholly or primarily relating to sessional GPs.
- The size of SGPS will be doubled to 16 members.
- The formation of an SGPS executive committee, which will meet regularly and with the GPC's negotiating team when necessary.
- Four permanent seats on GPC for the SGPS executive committee, in addition to the sessional GPs already elected via regional and national elections.
- New guidance for LMCs to help them improve their representation of sessional GPs locally.
- A new strategy for communications aimed at improving the flow of information and discussion between the BMA and sessional GPs.

### **NEW GMC GUIDANCE ON END OF LIFE TREATMENT AND CARE**

The GMC has produced new guidance 'Treatment and care towards the end of life: good practice in decision making'. The guidance comes into effect on 1 July 2010 and replaces the booklet 'Withholding and withdrawing life- prolonging treatments: Good practice in decision- making (2002)'. The key purpose of the guidance is to help doctors navigate the complex issues often raised in such a complicated and sensitive area of health care. To ensure the delivery of good medical practice across the UK, it is important all doctors familiarise themselves with the guidance. It may also prove useful for other health care professionals, patients and carers.

Equality, dignity and respect for the individual are key themes in the guidance and it emphasises that improving communication between doctors, patients, family and carers and the healthcare team is vital to providing good care towards the end of life. Important additions to the new guidance include:

- Advice on advance care planning and responding to requests for treatment
- Handling decisions involving neonatal and infant care
- Approaching discussions about organ and tissue donation
- Doctors' responsibilities to the patient after death
- Making decisions on clinically assisted nutrition and hydration.

The guidance is the outcome of a two- year development period which included consultation with a wide range of individuals and organisations with an invested interest in end of life care including doctors, charities, medical organisations, major world faiths, patients with life limiting or terminal illness and their families and carers. This input has helped shape the advice we have published.

You can view 'Treatment and care towards the end of life: good practice in decision making' and the supporting materials on the GMC's website at [www.gmc-uk.org/end\\_of\\_life\\_care](http://www.gmc-uk.org/end_of_life_care). [If you would like a hard copy of the guidance, please call +44 161 923 6602 or email publications@gmc-uk.org.](mailto:publications@gmc-uk.org)

### **GOODWILL AND DISPENSING**

Please see below a link to a briefing document on Sale of Goodwill and dispensing, which was drafted to clarify whether GPs can sell goodwill in terms of the dispensing element of their contracts or not. It is imperative that practices do not fall foul of the Goodwill rules because by doing so, a breach in the regulations could result in a criminal offence.

[http://www.bma.org.uk/employmentandcontracts/independent\\_contractors/managing\\_your\\_practice/goodwilldispensing.jsp](http://www.bma.org.uk/employmentandcontracts/independent_contractors/managing_your_practice/goodwilldispensing.jsp)

### **FOCUS ON NEW TAX BRACKETS**

The GPC has sent out the documentation on 'Focus on new tax brackets guidance' which has been revised and a spreadsheet added which illustrates the financial implications of taking on a salaried GP. Please also note the addition of the Mazars LLP letter report and the General Practitioners Defence Fund Limited (GPDF) disclaimer, both of which are integral to a proper understanding of this guidance and of its accompanying schedules, which are presented for illustrative purposes only. This guidance may have to be revised again following the emergency budget on the 22<sup>nd</sup> June.

[This guidance is available on the BMA website.](#)

**WORCESTERSHIRE LMC WEBSITE**

The following guidance has been added to the LMC website during the last month:

**BMA/ GPC guidance:**

[News 10 - June 2010 – Conference News](#)

[Letter to GPs in England - Implementation of the 2010/11 GMS contract uplift](#)

**The next LMC meeting will be 15th July 2010**