

WORCESTERSHIRE LMC LTD

NEWSLETTER

JUNE 2007 EDITION

TRANSFER OF SERVICES TO WORCESTERSHIRE LMC LTD

At the last LMC meeting the committee formally adjourned for twelve months until next year's AGM and transferred all of its activity to Worcestershire LMC Ltd. If you look carefully you will see that any future communication from the LMC will come from the limited company. (The articles of agreement and constitution are available on request). As we have already indicated this arrangement is purely aimed at reducing liability and long term costs for the LMC and will not affect in any way the service that you receive. The PCT has been formally informed of the change and is happy with the arrangement. The levies will continue to be collected by the LMC as a statutory body. Funding will be transferred to the limited company to cover its costs. The limited company is obviously a not for profit organisation and any residual funds will remain with the LMC in reserve. Please contact us if you have any concerns or queries about this.

LMC LEVY

Unfortunately it is that time of year when we have to review our expenditure and set our levy for the coming year. We are very mindful of the pay cut that GPs have received this year and have done our utmost to minimise our costs. Formal accounts have not been received from our accountant but we have a detailed spreadsheet which is available on request in the meantime. Unfortunately our costs have risen so it has been necessary to increase the levy. The total levy for 2007-08 will be 28.65p per patient which breaks down to 22.75p for the statutory levy and 5.9p for the voluntary levy. The LMC is very grateful for the support that it receives from all Worcestershire practices. Every single Worcestershire practice pays both levies which as they are on a pence per patient basis means that the LMC covers all GPs working in general practice in Worcestershire. We continue to send out our newsletter and other documentation by email. If any of you wish to receive this directly other than via practice managers you are very welcome to contact the LMC office and go on our electronic mailing list.

BMA INDUSTRIAL RELATIONS OFFICER

Steve Dent who is now the IRO covering this area came to our last LMC meeting. All LMCs have been assigned an IRO from the regional centre to act as a key contact for advice and policy issues between the regional centre and LMCs. This is in addition to Mr Dent's normal role of supporting BMA members with a range of problems, particularly employment matters. He works from home in Worcester and can be contacted at the BMA office, 36 Harbourne Road, Edgbaston, Birmingham, B15 3AJ, email inbox.midlandscentre@bma.org.uk, telephone 0121 452 7739.

WEST MIDLANDS AMBULANCE TRUST

A number of GPs have contacted us expressing concern that the Ambulance Trust seem to have changed their protocol for requesting urgent ambulances. We have had some correspondence with the Chief Executive and it is clear that there have been some communication failures. I am not sure that West Midlands Ambulance Trust even formally informed practices that they have taken over control of Hereford & Worcester Ambulance Service. They also feel that they had notified us of the change in service provision and are blaming the PCT for not relaying this to us. I spoke to the PCT and they don't feel that they are guilty! It is clear that there are some major changes planned in ambulance services and so the LMC will be making contact with West Midlands Ambulance Trust to see if we can improve communication. It may be appropriate for some sort of liaison organisation to be set up between the West Midlands Regional LMC and West Midlands Ambulance Trust who are gradually taking over all ambulance provision across the whole of the West Midlands. We know there are some ongoing concerns and would be grateful if you could pass on any other instance to us.

WORCESTERSHIRE ACUTE TRUST

For years the LMC has complained to successive management of the Acute Trust of poor communication between secondary and primary care. Nothing changes! One example that we regularly highlight is the fact that Consultants leave the Trust and nobody tells us and more importantly new Consultants arrive and usually the first we hear of it is when they write to us informing us they are available to see private patients. Finally John Rostill seems to have got the message and we have had discussion with the Acute Trust who is going to send out information to the PCT which will then go in the regular briefings sent to Practice Managers.

We have also had concern from a number of practices about various pathways and protocols. Usually GPs have been referring patients and then being told off for not following the appropriate pathway. Often the reason for this is that the GPs didn't even know such a pathway existed! We have highlighted this to John Rostill and suggest that this is another area that needs tidying up. Its no good blaming us for not using the pathway if they haven't told us it existed. Maybe Practice Based Commissioning clusters will have more success in dealing with this, we shall see.

FEEES FOR PRESCRIBING PHARMACEUTICAL PRODUCTS

The GPC has warned us that they have become aware of a scheme whereby a pharmaceutical company is offering practices a 15-20% fee for prescribing and or supplying their range of appliances and wound care products. Practices who sign up with them must put a poster up in their waiting room. The GPC is very concerned that some doctors are not aware of the ethical and professional implications of participating in such a scheme. We would like to remind you that the GMC's Good Medical Practice states "you must act in your patient's best interests when making referrals and providing or arranging treatment or care. So you must not ask for or accept any inducement, gift

or hospitality that may affect or be seen to affect your judgement. You must not offer such inducements to colleagues."

The LMC unequivocally advises GPs not to involve themselves in arrangements that pay a fee for prescribing products. In addition to the GMC's guidance this also breaches the ABPI code of practice.

WORCESTERSHIRE PANDEMIC INFLUENZA PLANNING COMMITTEE

The LMC continues to be represented on this group and at the last meeting on the 17th May the Secretary was very pleased to find that real progress was being made. Work is taking place to look at stockpiling protective equipment. It was noted that practices might like to contribute to the cost of this. You will be pleased to know that we pointed out that at a time when GPs were taking a fairly significant pay cut we were not likely to want to contribute to the cost of protective equipment. We felt this was quite clearly an issue for the PCT and the Acute Trust. If practices have bought any equipment it is going to be for their individual personal protection.

This moved on to the most important issue which is work on setting up flu centres. The proposal is there will be a number of flu centres around the county and patients will be told to contact a central number who will triage them and make arrangements for them to either be seen at one of the flu centres or visited by staff from the flu centres. All flu work will be diverted away from practices. We are delighted that almost all practices have agreed in principle to this scheme and work is now going on to model the kind of manpower levels that will be required to run these centres. Practices will be asked to contribute a certain number of hours of medical time at the various bases around the county. This seems a pragmatic and sensible approach to dealing with what could be a very difficult problem and hopefully taking the work away from practices will allow them to cope with a reduced workload and reduced staffing levels. It is anticipated that during a pandemic we will stop all QOF work, chronic disease management and regular reviews etc. Practices will go onto an emergency medical care basis only for the duration. Some very effective modelling is going on about the impact of this on the community and we hope more detailed proposals will be sent out to practices shortly.

Some people are expressing cynicism about all this work and the real value of this. It does seem sensible however to do this. This will be the first time in history that we have been able to plan for a pandemic. To do nothing at all would be scandalous. Who knows whether the proposals will work and whether it will be successful but at least nobody can say we haven't tried to put in place something realistic for our county.

LMC CONFERENCE 2007

The agenda has been published for the Conference which takes place on the 14th and 15th June. It is likely to be quite a lively Conference in view of the pay cut, turmoil at the head of the BMA with the resignation of the Chairman and news that Dr Hamish Meldrum, our current GPC Chairman is standing for election of Chairman. The

conference agenda looks very interesting and is likely to be exceedingly critical of government health policy. The National Care Record and Connecting for Health have prime slots on the morning. Much to the Secretary's horror a Worcestershire motion has been put at a prime slot at 10.55 on the first morning which is when all of the press are still there. This motion states that "Conference deplores the steady erosion of patient confidentiality and requests that the GPC hardens its stance on this issue and promotes the return to the principal of absolute confidentiality that patients have a right to expect from their NHS GP".

This motion was put forward because it is an area that regularly comes to the fore at our LMC. There is a perception that the boundaries of confidentiality are constantly being pushed and eroded and that we should have a firm stance on this matter. Regularly the advice is given that whatever change, it is within the law. That doesn't always mean that the law is correct. We are keen to return to perhaps what could be called traditional values of confidentiality and this is at a time when many of us are deeply worried about the threat to our civil liberties from all sorts of government initiatives. We will try and put together a good argument for this case and perhaps some media publicity as well. Shortly after this comes the debate about the National Care Records, Choose & Book and Referral Management. It should be interesting!

EMERGENCY TREATMENT OF PATIENTS IN ROAD ACCIDENTS

We thought it would be helpful to bring this to your attention particularly at a time when practices are trying to maximise their earnings! Some of you may already be doing this but it is clear that this practice does seem to have been forgotten. The GMS Regulations and the Road Traffic Act 1988 both allow the first doctor providing emergency treatment to the victim of a road traffic accident to be entitled to a fee. A fee may be levied in respect of each person treated. The BMA's legal advice is that while treatment provided at the scene of the accident will be most common, treatment provided at the GP surgery can be included in the definition of emergency treatment and therefore attract a fee under the Road Traffic Act. It is common understanding that some injuries do not manifest until many hours after the accident and do not warrant a visit to a hospital A&E department but do warrant the attention of the local primary healthcare team. The basic premise is that you can charge the fee if you see the patient first. The fee is for a clinical examination and/or treatment and is not for medical legal examination. That would attract a separate fee should a report be required. The current level of fees for treatment for each person is £21.30 and mileage if you attend them is 0.41p per mile. The reference is the Road Traffic Act 1988, Section 158: Road Traffic Accidents (payment for treatment) Order 1995.

Every little helps as they say.

RETIREMENT DINNER FOR DR DAVID BROWNRIDGE

Hopefully you already have seen the circular we have sent round to practices advertising a retirement dinner we are holding to celebrate Dr David Brownridge's sterling service to the LMC and also as Secretary of the Worcestershire Division of the BMA. In

honour of this he has been made a Fellow of the BMA and a presentation will take place at this dinner which takes place at Rossini's Restaurant in Droitwich on Tuesday, 3rd July 2007. Tickets are available from the LMC at a cost of £28.00 per person. Please contact the office for further details.

NEW WORCESTER CITY REPRESENTATIVE

Dr David Lewis from Severn Valley Medical Practice has volunteered to take up the vacancy for a representative from Worcester City. He will be joining the committee at the July meeting.

WORCESTERSHIRE LMC WEBSITE

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

BMA/GPC Guidance:

Best practice guidance - contestability in relation to funding enhanced services from the enhanced services floor.

[http://www.bma.org.uk/ap.nsf/AttachmentsByTitle/PDFfundesfromesf/\\$FILE/Contestability+-+Best+practice+guidelines+-+May+07.pdf](http://www.bma.org.uk/ap.nsf/AttachmentsByTitle/PDFfundesfromesf/$FILE/Contestability+-+Best+practice+guidelines+-+May+07.pdf)

Statement to GP trainers - Potential Registrar Pay Cut

<http://www.bma.org.uk/ap.nsf/Content/Hubgpreistrars>

Primary Care Contracting:

New national guidance for Practitioners with Special Interests is available at:

<http://www.pcc.nhs.uk/173.php>

WORCESTERSHIRE LMC LTD

Email: info@worcslmc.co.uk

Website: www.worcslmc.co.uk

Regional LMC: www.wmrlmc.co.uk

Registered office: St Stephens Surgery, Adelaide Street, Redditch, Worcs. B97 4AL

Tel: 01527 65082

Fax: 01527 61211

MEMBERS OF THE COMMITTEE

CHAIRMAN:

Dr Bob Ingles

St Johns House Surgery, 28 Bromyard Road, St Johns,
Worcs. WR2 5BU

Tel: 01905 423612; Fax: 01905 420641

SECRETARY:

Dr Simon Parkinson

St Stephens Sugery, (address and contact details as above)

Email: sparkinson@worcslmc.co.uk

Executive Officer:

Michelle Hallahan, St Stephens Surgery (address as above)

Email: mhallahan@worcslmc.co.uk

Representatives:

BROMSGROVE:

Dr D Pryke

Dr K Hollier

REDDITCH:

Dr S Parkinson

Dr S Pike

WYRE FOREST:

Dr R Horton

Dr V Schrieber

Dr K O'Connor

WYCHAVON:

Dr C Ounsted

Dr J Rankin

Dr R Kinsman

MALVERN:

Dr D Radley

Dr G Wilson

WORCESTER:

Dr R Ingles

Dr D Lewis

Dr J O'Driscoll

Non-Principals:

Dr N Burger

Out of Hours:

Dr R Kelsey

Dispensing:

Dr D Brownridge

Registrars Rep:

Dr D Hughes

Practice Manager Group Representatives:

David Jago, Representative SW PM

Pam Ford, Representative Wychavon PM

Lisa Luke, Representative R&B PM

Don Beckett, Representative WF PM

Local GPC Representative:

Dr Grant Ingrams, gji@nhs.net

**THIS NEWLETTER IS PRODUCED FROM THE LMC OFFICE AT
ST STEPHENS SURGERY**

The next LMC meeting will be 7 June 2007