

NORFOLK LOCAL MEDICAL COMMITTEE

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January 2006

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NORFOLK LMC ELECTION

2006-2009

Election Day - 21st March 2006

In early February the LMC office will be writing to all GPs in Norfolk about taking part in the election of the 2006-2009 Norfolk Local Medical Committee.



Put your stamp on
the new LMC!

As the future configuration of Norfolk PCTs has yet to be determined the LMC has decided to continue with its current constituency boundaries and with a ratio of 1 representative to each 15 GPs therein which has resulted in:

Broadland (5 representatives)
Great Yarmouth (3 representatives)
North Norfolk (4 representatives)
Norwich (5 representatives)
Southern Norfolk (7 representatives)
West Norfolk (6 representatives)
Salaried, Sessional, Freelance & Locum (tba)

If you have thought about standing but are unsure and would like more information please contact the office. If you don't think you are LMC material but know someone who is then please encourage them to put their name forward. Ideally we need representation equally spread from within the constituencies so have a word with your partners and your neighbours to make sure someone will be representing your patch.

-oOo-

and - a bit like buses - you don't have an election for ages and then two come along all at once.....

GPC Election

Norfolk & Suffolk Constituency

The GPC is seeking nominations in the election of voting members of the General Practitioners Committee of the BMA for regional representatives for the Norfolk & Suffolk Constituency. If you are interested in standing for election to represent your GP colleagues on their national body nominations and election addresses have to be at BMA House by 5 pm on Friday 17th February. If the constituency is contested ballot papers and election addresses

will be despatched to all of you who are eligible to vote (the criteria is that your practice pays the voluntary levy) on Friday 17th March for return by Friday 7th April. If you think you might be interested in standing Shona Blass, Senior Policy Executive at the BMA, will be happy to give you more information (020 7383 6617) or email on SBlass@bma.org.uk

An election pack, which gives an overview of what being involved in the GPC entails and which includes the relevant nomination form and election timetable, is posted on the Norfolk LMC website (<http://www.norfolklmc.org.uk>) and on the BMA website <http://www.bma.org.uk>; a hard copy is available from the LMC office or electronically if you email norfolklmc@btconnect.com

VENLAFAXINE and ECGs

The LMC is aware that consultant colleagues from the Norfolk & Waveney Mental Health Partnership ask GPs to organise ECGs for patients in whom they are considering prescribing Venlafaxine. The LMC view is that this is not GP work and that the mental health trust needs to have a process whereby it can arrange ECGs which are reported on by a person competent to decide whether any abnormality shown militates against the patient being prescribed Venlafaxine.

There are issues of clinical responsibility as well as of payment if GPs organise or carry out the ECG. However, in the current state of commissioning in Norfolk, the LMC does not seem able to get anywhere towards resolving this problem. We have not been able to get any clear statement from any PCT that it would be willing to fund provision of ECGs by practices as an enhanced service, nor any agreement from the Trust that it will make its own arrangements and stop putting GPs in a difficult position.

As ever, it looks like something will only happen if GPs cease giving their and their staff's time for nothing, so practices will need to decide their own practice policy and advise the mental health trust accordingly. If all practices decline that will force a new process or the use of alternative medication.

Oxygen

We would like to remind practices that the new supply arrangements for the provision of oxygen come into force on the 1st February 2006. Prescriptions written up to the end of January will be honoured by chemists but from 1st February new forms will have to be filled in so that patients can receive oxygen from BOC. We have raised our concerns regarding this process with PCT and pharmacist representatives. Worryingly they all agree that the forms are

badly designed and the process of implementing the changeover is inflexible. Unfortunately the DoH has been totally intransigent and despite concerns from various bodies has made no changes to the procedures from 1st February. This will mean additional work for practices in the early stages. Clearly we cannot interfere with the provision of oxygen to our frail and vulnerable patients. If you experience any particular difficulties please let us know.

Note: We understand that the Stores at Eastern Support Services have supplies of HOOF (Home Oxygen Order Forms) and HOCF (Home Oxygen Consent Forms) which can be ordered via the usual channels.

Memory Treatment Services

Patients are to be discharged back to their GP on "memory drugs" for follow up. This, it is said, will allow room in clinics for new patients to be assessed. Some constituents have contacted the LMC office asking whether this is unfunded secondary to primary care shift work. The LMC office would be interested in your thoughts.

As you know, the current BNF states: "... drug treatment should normally continue only if MMSE score remains above 12 and if treatment is considered to have a worthwhile effect on the global functional and behavioural condition."

Do you consider a six monthly assessment linked with the repeat prescription is core GP work? An email response would be very acceptable (to norfolklmc@btconnect.com).

Contract Review

In the GPC's view the letter Barbara Hakin, NHS Employers' Chair of nGMS negotiations, sent to PCTs on 20th December provided partial and incomplete information and caused much confusion and anger amongst GPs.

Although aware of the pressures on NHS Employers to present these negotiations as a success, the GPC believes that implying agreement where it had not been reached, or suggesting implications for the future negotiations that have not been agreed, was unacceptable. The GPC has raised this matter directly with NHS Employers in writing.

In addition a joint letter from the Chairman of the GPC and Ms Hakin was sent to GP Magazine in response to its misleading front-page article concerning the future of the corrections factor.

Reconfiguration of PCTs in Norfolk

As you are no doubt aware the reconfiguration of PCTs in Norfolk is out for consultation. As far

as Norfolk is concerned the StHA is seeking views on two options: →

- 1 Three PCTs for Norfolk, Suffolk & Cambridgeshire - *which would result in a single Norfolk-wide PCT*
- 2 Norfolk & Suffolk Primary Care Trusts with a separate Gt Yarmouth & Waveney PCT. *For Norfolk this would result in two PCTs, one for GtY & Waveney, the second covering the remaining 5 Norfolk PCT areas*

Norfolk LMC will be making a formal response but would encourage practices to respond individually if they so wished. This consultation document, along with two other consultations on the (a) The Reconfiguration of Strategic Health Authorities and (b) The Reconfiguration of Ambulance Trusts, are available at www.nscsha.nhs.uk/yoursay/cplnhs/index.html

Recent Postings on the LMC Website

The following guidance have been posted on the LMC website <http://www.norfolk-lmc.org.uk>

- ▶ GPC Focus on Agenda for Change
- ▶ GPC Guidance on Jury Service
- ▶ GPC Guidance on Patients Presenting With Dental Problems: GP Responsibilities
- ▶ GPC Election Pack

"The Expert Patients Programme: Opportunities for Patients & Doctors"

The BMA and the DoH are organising this conference to be held on Tuesday 14th March at BMA House, London. The NHS Expert Patients Programme has been developed to assist patients to self-manage their long-term medical conditions. This conference aims to:

- ▶ raise awareness of the EPP amongst GPs
- ▶ present UK research evidence for lay-led self-management of long-term health conditions
- ▶ discuss where the EPP fits into healthcare and the opportunities the programme presents for GPs in supporting patients with long-term conditions
- ▶ provide a forum for GPs to critically review and appraise the EPP and other approaches to support the self-management of long-term health conditions.

All GPs are welcome - attendance is £25.00 + VAT and booking may be made via www.bma.org.uk/epp

Further information may be obtained from BMA Conferences on 020 7383 6605/6137 or email confunit@bma.org.uk

Forthcoming equality legislation

GPs should be aware of imminent equality legislation including the Disability Discrimination Act 2005, Employment Equality (Age) Regulations 2006 and the Equality Bill.

The Disability Discrimination Act will entail the most immediate changes for NHS organisations as Disability Equality Schemes must be in place, and ready to put into action, in public bodies within a year.

The Act includes a new general duty on public authorities to eliminate unlawful discrimination against disabled persons and promote equality of opportunity between disabled persons and other persons. The major difference from previous legislation is that the definition of discrimination has been broadened, and can now include 'not making a reasonable adjustment to the way the public authority function is carried out. Further information on the implications of the legislation can be found at the following link: www.dh.gov.uk/PublicationsAndStatistics/LettersAndCirculars/DearColleagueLetters/DearColleagueLettersArticle/fs/en?CONTENT_ID=4126389&chk=otMOio

Allergy Recording in GP Clinical Systems

The GPC has recently published advice on allergy recording in GP clinical systems. This has been developed following discussions and consultation with the GP2GP team, system user group suppliers and the GPC's legal advisor to highlight the importance of correctly Read coding diagnoses within the patient record so that the accurate translation of information from one system to another can potentially take place. The full guidance will shortly be available on the LMC website.

Locum GPs: Pension Arrangements

The office has received several queries regarding the responsibility for the employer's superannuation contribution for locum GPs.

We have confirmation from the GPC that this remains with PCOs "for the foreseeable future". The regulations for locum GP pensions have not changed and locum GPs should continue to claim for this in the normal way.

Flexible Careers Scheme

There is great concern that Deaneries are currently unable to accept any new Flexible Career Scheme applications due to funding problems. This scheme has provided doctors with the opportunity to return to general practice after a career break, retaining those who require flexible part-time working and encouraging good employment practice through mentoring and continuing professional development. Without this reimbursement many practices would not be able to afford to employ this group of GPs. The GPC is urging the Department to reinstate funding for new schemes, although it is our understanding that funding for existing schemes will continue to be honoured.

BMJ Learning

BMJ Learning is now a new benefit of BMA membership. BMJ Learning is an interactive online learning website. It provides a wealth of evidence based and up to date learning resources. In the next year it will continue to expand its content and will also increasingly provide multimedia material. GPs have always been and will remain the core target audience.

BMJ Learning hopes you will have time to register and enjoy its content. Please let them know if you would like particular content or are

interesting in writing for them. Please also spread the word amongst colleagues about this new membership benefit.

JOB PLANNING GUIDANCE

The sessional GPs subcommittee has produced a helpful guidance note for both salaried GPs and their employers on job planning. This is available on the BMA website under the salaried and freelance GP section. The development of a job plan is a core component of the model salaried GP contract. A job plan translates expectations of employee and employer into a working schedule, and ensures that the post delivers its aims and the requirements of the contract of employment are met.

Advertisement

Dr Helen Vanston, MBChB, BMedSci, DRCOG completing a 1 year, self-construct, GP registrar post with Norwich VTS.

Keen to work in Norfolk from 1st February 2006. Looking for salaried/locum work initially.

Tel: 01508 537189

email: helenvanston@hotmail.co.uk

GP Trainers £750 CPD Payment

Following Lord Warner's assurance that the £750 CPD payment to all GP Trainers would be made in 2005/6 the GPC Chairman wrote twice to seek details of when exactly this payment would be made. Lord Warner has confirmed that the allocation will be made to Strategic Health Authorities in January 2006. If you are a Trainer and if, by late February, you have not received your payment, please let the LMC office know and we will pass this on to the GPC.

AWAITED

Practice Based Commissioning: We are advised that the latest DOH guidance on practice based commissioning should be available by the end of the month. Immediately this is published the LMC office will forward a copy to your practice via the Practice Managers' Email circulation and post a copy on the website.

White Paper Similarly we understand that the white paper on out of hospital care will be published on the 31st January. If anyone is interested in receiving a copy please email the LMC office on norfolk-lmc@btconnect.com after that date.

NNUH - GP Dedicated Telephone Line

Following reports that some constituents have experienced difficulty getting through we wrote to the trust. They tell us that the lines have tested technically sound, that the switchboard

operators have to answer GP lines within a certain amount of time and before any other calls which come into the hospital so the GPs have priority. Response stats show that response times have been met and only GP calls are accepted on these lines. During peak times the lines are very busy and they know GPs have to wait lengthy times for certain bleep holders, eg the 0002 medical bleep holder is always inundated with calls especially around lunchtime. The Switchboard manager would welcome any suggestions of how they may help. Please let us know if and when you run into difficulties so that we can help them find and sort out problems.