



# LMC LINKS

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## In This Issue

- The LMC - your guide to the "New NHS World order."
- Good practice in prescribing and managing medicines and devices
- Making your voice heard – LMC motions for conference
- GMC Child protection guidance
- Advising CQC of patient deaths
- Meetings with local MPs
- Bite size seminars
- Results of our workload survey
- Giggle of the day!

## Up & Coming Events

**Bite size seminar:** on how to ensure your practice doesn't go under – a free seminar entitled "Financial intelligence"

The meeting is open to all Salford and Trafford practices and will be held 12.30-2.30 pm on Wednesday April 24<sup>th</sup>, Sam Platts, Trafford Wharf Road, Old Trafford M17 1EX

A working lunch will be provided from 12pm. If you would like to attend please email Kerrie Rowlands at [lmc.office@trafford.nhs.uk](mailto:lmc.office@trafford.nhs.uk) and advise if you have any special dietary requirements.

## THE LMC - YOUR GUIDE TO THE "NEW NHS WORLD ORDER".

There is a brand new world out there – April 1<sup>st</sup> looms large, and it would seem that post April day the world will be less GP friendly and you can expect to hear increasing cries of "that will be a business decision!" if you seek management assistance. As an LMC we will continue to send you information as it unfolds: with its new structures; new payment methods; new ways of working and new organisations. It is certainly a time of great uncertainty – LMCs have been around for 101 years and we would doubt that there has ever been such wholesale change. The LMC is however a constant. We are here to support and assist you and try to be your guide to the "new NHS world order". So remember "don't get in trouble, get in touch!"

## GOOD PRACTICE IN PRESCRIBING AND MANAGING MEDICINES AND DEVICES.

The GMC updated **Good practice in prescribing and managing medicines and devices**, attached, comes into force on 25 February - It replaces *Good practice in prescribing medicines* (2008) and incorporates *Remote prescribing via telephone, video-link or online* (2012). The Clinical and Prescribing subcommittee of GPC are particularly concerned about paragraphs 67-70 which seem to suggest that cheaper generic medicines should not be used off licence, even when there is strong scientific evidence for that use, if a medicine with a licence for use in that situation exists; and about paragraph 63, which seems to place an unreasonable burden on GPs prescribing to patients in care homes. They have already written to the Chair of the GMC Standards and Ethics Committee about their concerns on unlicensed prescribing, and will follow up with a letter to Sir Peter Rubin. We will keep you informed should the situation change or be clarified.

## CLINICAL WASTE IN TRAFFORD

Trafford PCT stopped reimbursing practices in Trafford for their clinical waste for a period of time. With our persistence they are now paying again in full, but there was a time when they did not pay. That situation has now resolved and Trafford is paying in line with the Premises Directions. For a time it looked like we would not be able to retrieve the money for practices for the interim period – but we are pleased to say that we reached agreement with the PCT to pay for 50% of the outstanding amount rather than pay for nothing. All affected practices have now confirmed their agreement to accept this and the PCT will release over £35,000 in total to the practices concerned.

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## MAKING YOUR VOICE HEARD - LMC MOTIONS FOR CONFERENCE

With many of us struggling through the winter it can be all too easy to be submerged in the expanding workload and feel impotent in trying to change the circumstances of General Practice.

I am writing to you to explain briefly how the GPC medico-political process works and to call on you to replace resigned acceptance with thoughts feelings or ideas that can be developed into political change.

By Mid March every LMC in the UK will have submitted motions to the Conference of LMCs which will address any area of UK General Practice over which the GPC has responsibility. Motions which are debated and accepted at the Conference then become part of GPC national policy.

The point of this message is to remind every GP, whether partner, salaried, sessional or locum that you have a voice in this process and that whether you find yourself irritated, exhausted, angry or just feel you have an idea on how processes might be carried out in a better way, you have an opportunity to put such ideas forward for national debate.

Next time you read an article in the lay or medical press, get annoyed at buck passing or bureaucratic nonsense or just muse on how our professional life can be better just write it down, as an e-mail, fax or letter and submit your thoughts to the LMC as a potential motion for conference (to [vsimenoff@nhs.net](mailto:vsimenoff@nhs.net) or [Vivienne.simenoff@trafford.nhs.uk](mailto:Vivienne.simenoff@trafford.nhs.uk)).

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### Visit our website

<http://www.salfordandtraffordlmc.org.uk/>

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## GMC CHILD PROTECTION GUIDANCE

The guidance has been designed to give doctors the confidence to act when they need to and makes clear where they can turn to for support.

The GMC's guidance, Protecting Children And Young People: The Responsibilities Of All Doctors, was produced following a two-year working group chaired by senior family judge the Rt. Hon Lord Justice Thorpe after hearing evidence from a range of child protection experts. [http://www.gmc-uk.org/guidance/ethical\\_guidance/13257.asp](http://www.gmc-uk.org/guidance/ethical_guidance/13257.asp)

It covers:

- Identifying children and young people at risk of, or suffering, abuse or neglect
- Meeting the communication needs of children, young people and parents
- Confidentiality and sharing information
- Child protection examinations
- Giving evidence in court

The guidance makes clear that if doctors are treating an adult patient, they must consider whether the patient poses a risk to children or young people.

Doctors must be able to identify risk factors in a patient's environment that might raise concerns about abuse or neglect.

They must also listen to parents and children, recognise parents' understanding of their children and keep an open mind about the possible cause of an injury or other sign that may indicate abuse or neglect.

The GMC has also produced a short guide for parents to help them understand what they can expect from their doctor when child protection concerns are raised.

Niall Dickson, Chief Executive of the GMC, said "Child protection is a difficult area of practice, complicated by uncertainty and often very emotionally challenging. Parents and carers need to have full confidence that if there are any issues raised about the safety of their child, their doctor will take the right course of action. 'Part and parcel of this is making sure that doctors communicate properly with both parents and children to convey any concerns they may have. Our new guidance will help guide doctors toward making the correct decisions in this challenging but essential area of work."

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## ADVISING CQC OF PATIENT DEATHS.

Primary medical services providers will be required to notify the CQC where death occurs within two weeks of care being provided **and:**

Where the death has or may have resulted from the carrying on of the regulated activity (i.e. care and treatment provided by the practice) and could not be attributed to the course which that patient's illness or medical condition would have actually taken if that patient was receiving appropriate care and treatment.

If any of our practices are advised incorrectly by the CQC please contact us with the details so that we can raise this with GPC who will raise it with the CQC centrally.

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## MEETINGS WITH LOCAL MPs

The LMC Executive recently met separately with both Graham Brady MP (Conservative MP for Altrincham and Sale West) and Kate Green MP (Labour MP for Stretford and Urmston) to discuss the provision of care in each of their constituencies. Conversation also covered our areas of concern relating to the myriad of changes that face general practice and the difficulties these will pose both for our constituents and their patients. We welcome these open and friendly discussions and look forward to further meetings.



**Left to Right: Dr Iain Maclean; Dr Ravi Mene; Hon. Graham Brady MP; Dr Mhairi Yates; Dr Girish Patel and Dr Jenny Walton.**



**Left to Right: Dr Ravi Mene; Hon. Kate Green MP; Dr Jenny Walton; Dr Iain Maclean and Dr Mhairi Yates**

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## BITE SIZE SEMINARS.

We have listened closely to our GPs – the outcome of our recent survey shows how the stresses and strains of general practice are beginning to take their toll, and we have listened to the concerns you raised. In response we will be running the first of our Bite size seminars on how to ensure your practice doesn't go under – a free seminar entitled "Financial intelligence"

- Where are we now with the NHS? A look at the current landscape and the potential impact on GP practices.
- Controlling expenses
- Cash flow and profit forecasting and their importance in maximising profit and managing the practice
- Managing drawings
- The future – maximising profits, alternative sources of income, practice structures and mergers

The meeting is open to all Salford and Trafford practices and will be held 12.30-2.30 pm on Wednesday April 24<sup>th</sup>, Sam Platts, Trafford Wharf Road, Old Trafford M17 1EX

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## RESULTS OF OUR WORKLOAD SURVEY FOR PRACTICES IN SALFORD AND TRAFFORD...

We are grateful to all the GPs who completed the survey we recently sent out – It confirmed what we thought, but the results were very stark.

In answer to the following questions responses from our GP's were as follows:

Q. Compared to 3 years ago how would you describe your working day?  
**86.4%** felt their day was **longer** or **much longer**

Q. Compared to 3 years ago how would you describe the intensity of your work?  
**92.5%** Felt that their work was **more intense** or **much more intense**.

Q. Compared to 3 years ago how would you describe the complexity of your work?  
**92.4%** Felt that their work was **more complex** or **much more complex**

Q. Compared to 3 years ago how much unresourced "dumping" of secondary care work is taking place?  
**84.9%** Felt it was **more** or **much more**

Q. How sustainable is your current working pattern over the next 3-5 years?  
**67.2%** Felt that it was **not sustainable** or **dangerously unsustainable**.

Q. How sustainable will your working pattern be when the extra work detailed in the government's contract imposition becomes reality?  
**80.6%** felt that it was **not sustainable** or **dangerously unsustainable**.

Q. Will the government's unilateral contract imposition tend to make you:  
**54.6%** would consider **other options for earning a living** or consider taking some form of **retirement** (including 24hr retirement)

Q. What effect do you think the government's contract imposition will have on the viability of your practice?  
**73.1%** Felt that their practice would **struggle to be viable** or would **become unviable** as a result of the imposition.

The full survey results entitled GP Workload Pressures can be found on our website [www.salfordandtraffordlmc.org.uk](http://www.salfordandtraffordlmc.org.uk)

We will be sharing this information widely.

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## GIGGLE OF THE DAY...

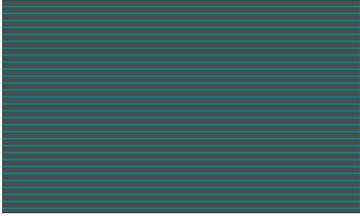
We have been blessed with a new projector screen which is very simple to use – the only thing that is complicated (and very amusing!) is the opening instructions. Hope you enjoy the same giggle these gave us.....

"Floor screen using explanation  
Safety proceeding

1. don't let your hand poke inside of the framework of brace when open or close the screen in order to get hurt
2. Avoid to using it in the vehement wind in order that betting hurt while the screen downward

Product feature

1. double air-press installation, can be controlled by one hand lightly
2. subtle alloy hall, can be taken more convenient
3. Can be opened and closed freely, locating it in any height



#### Operating Method

1. Please drag the supporting basement at each side before use it in order to increase the stability of the shelf"