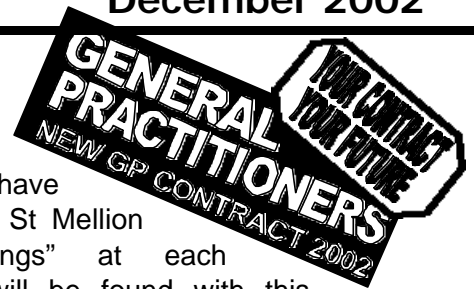


Devon Local Medical Committees

Newsletter Issue No 27

December 2002



Devon LMC News

Chief Officer's Corner

THE NEW GMS CONTRACT – DECISION TIME?

Following the presentation of the priced “new contract” to LMCs on 10th January the GPC negotiators will be “on the road”. We have arranged meetings on 28th and 31st January in Tiverton and St Mellion



Debbie Galbraith
Executive Officer – South

respectively with two “sittings” at each presentation. The full details will be found with this newsletter and we have again arranged for GP co-operatives to cover your practices from earlier in the afternoons. On this occasion we would ask you to arrange early afternoon surgeries where possible. Voting will take place in February – **PLEASE VOTE!** Make a positive personal decision either for or against rather than let others decide your future for you.

LAY EXECUTIVE OFFICERS

I am pleased to announce that we will be joined on 13th January 2003 by Nicola Heywood and Debbie Galbraith who will become the main liaison people between the PCTs and the LMC allowing us to work more proactively with the 8 PCTs with whom we are in “partnership”. PCTs and the LMC are all small organisations and it is therefore imperative that we work together more “smartly” than in the past. Nicola is currently the Practice Manager for College Road Surgery, Cullompton and Debbie was Deputy Practice Manager there before joining Pfizer! Thank you to College Road for your “training” of our new team members!



Nicola Heywood
Executive Officer – North

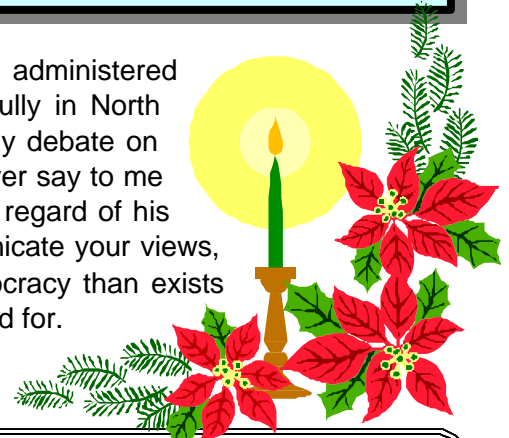
APPRAISAL IN PLYMOUTH

Appraisal has been the surprising cause of much electronic debate in Plymouth because of aspirations to bring lay people into the potential GP appraisal team. There are all sorts of

“processy” issues that are largely irrelevant to the main questions of who are a GP’s peers and who can best fulfil the potential for the whole scheme being genuinely “educative, formative and supportive” and who may find they have a potential conflict of interest? We hope both to arrange a debate at the Post Graduate Centre early in the New Year and to spread the LMC administered “Voxpop” electronic communications set up and trialed successfully in North Devon over the past months. The latter will allow open and timely debate on any subject of relevance to all GPs and will ensure that no GP can ever say to me again (however erroneously) that the LMC does not listen to or take regard of his views. You will be able (*subject to the laws of libel! Ed.*) to communicate your views, beliefs and ideas to your colleagues giving a more “real time” democracy than exists currently. We will also have the facility for on-line voting if such is called for.

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Dr Rob Orrell

On November 7th Dr Rob Orrell, a GP in Heavitree, Exeter died after a brief and brave battle with cancer. I was privileged to be able to advise him, with superb assistance from Paul Ham at the PPSA, about his options with regard to how he and his family could best be supported by the NHS pension scheme. I have learnt that the scheme is even better than I had previously believed it to be and we will be doing an article in the near future so that that learning can be spread about more widely. Rob will be missed and remembered by many; by his family, his GP partners and colleagues and by his patients.

And finally...

May I take the opportunity to thank you all for your support and good wishes over the year and now as Christmas approaches. General Practice and General Practitioners are the bedrock on which good patient care is founded. We are lucky that the "bedrock" in Devon is one of the most solid in the country – and please take that as a compliment at Christmas! Have a Merry Christmas and a good rest in time for next year's fun!!

BMA Junior Members Forum 2003

I am looking for general practitioners for the LMC to nominate to be selected to attend next year's Junior Members Forum, with all expenses paid, for the weekend of 12 and 13 April 2003. The Forum will take place at the Holiday Inn Hotel in Belfast.

In order to be invited to attend you have to be a BMA member, within 12 years of your provisional registration or within 11 years of the first full registration with the GMC. Preference will be given to those who have not previously attended such a Forum. Overnight

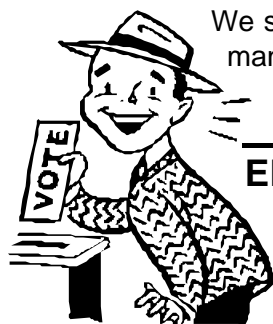
accommodation and all meals will be provided from the Friday evening and obviously your travelling expenses will be reimbursed. The programme next April consists of a Saturday symposium on bullying, harassment and discrimination, followed by group meetings and general debate and then the Sunday will be a medico political day, which has been fun in the past and is often seen as an informal training ground for young doctors in medico politics and could be a good starting place for people who feel they might like to give politics a go!

Please get your names and details to me as soon as possible, either by phone, by email (peter@devonlmc.org) or by letter.

Internet Christmas Factoid

While both male and female reindeer grow antlers in the summer each year, according to the Alaska Department of Fish and Game male reindeer drop their antlers at the beginning of winter, usually late November to mid-December. Female reindeer retain their antlers until after they give birth in the spring. Therefore, according to every historical rendition depicting Santa's reindeer, every single one of them, from Rudolph to Blitzen - had to be a girl!

We should've known. Only women would be able to drag a fat ol' man in a red velvet suit all around the world in one night and not get lost....



Election Update

Torbay LMC Sub Committee have co-opted **Dr Derek Greatorex** on to the Committee as an additional representative within the Teignbridge constituency. Derek can be contacted either via the LMC office or through the Kingsteignton Medical Practice on **01626 883312**.





MISSING CHILDREN?

When NHS Direct Nurses receive a call from a carer or a child which makes them suspicious about possible child abuse, the caller will be advised to go to the local A & E department for examination, and the NHS Direct nurse will tell A & E to expect them.

A protocol has been developed between NHS Direct and the Royal Devon and Exeter Hospital A & E so that appropriate people see the child on arrival and feed back the outcome to NHSD. They are aware that a significant number of callers do not arrive in A & E and there have been concerns about the children involved.

If the referring nurse has not heard back from A & E after 6 hours she will ring through to confirm that the child arrived. Where there is no record of attendance NHSD will contact the family again and reiterate the need for an examination. Despite this some children will not be seen and the guidelines recommend that the nurse then refers her concerns to the Duty Social Worker.

But some of these children may have been seen in our practices, either by a doctor or a nurse, instead of going to A & E.

This leads to some questions on which I would be glad of comment:

1. Should our practices be part of the follow-up procedure at NHSD. For instance, during working hours, should the nurse check with the practice before referring the case to the Duty Social Worker?
2. Are we sufficiently suspicious of potential child abuse when confronted by minor injuries to children in our practices?

Dr Jane Richards (Devon LMCs - Child Protection Portfolio Representative)

OH Service for Primary Care in S&W Devon and Cornwall

Georgina Wingfield (OH Nurse Specialist) has at last been able to move into her new office in Truro (only a month behind schedule!).

The new office details are:

OH Service for Primary Care in S&W Devon and Cornwall
Meridian House, Heron Way, Truro TR1 2XN
Tel: 01872 274374 Fax: 01872 273378

Comings and Goings November/December 2002

Welcome to:

Dr Alexander Harding, St Leonards Practice, Exeter

Dr Ian Guildford, Part-time at both Moretonhampstead and Chagford Health Centres

Dr Miranda Coberman, Queen's Medical Centre, Barnstaple

Dr Mark Adams, Waterloo Surgery, Plymouth

Dr Nigel Yeo, Channel View Surgery, Teignmouth

Goodbye to:

Dr Margaret Ross, St Leonards Practice, Exeter

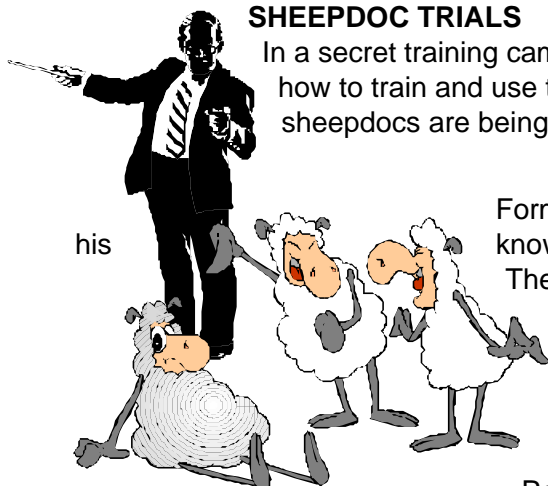
Dr David Joselin, Pines Road Surgery, Exmouth



Please note that Dr Lucy Trippleton of Knowle House Surgery has now changed to her married name of Dr Lucy Hillman.

SHEEPDOC TRIALS

In a secret training camp near Harrogate hundreds of PCT executives are being taught how to train and use their sheepdocs. First introduced in hospitals in the 1980s sheepdocs are being used increasingly in Primary Care.



his

Former foundation hospital chief executive, Phil Drabble, now shares knowledge and skills at the "Beacon Farm NHS Training Centre". The LMC has managed to acquire various parts of his training manual:

Choosing your Sheepdoc

Careful selection is vital. Look for a good coat, shirt and tie as well as sharp teeth.

Potential sheepdocs should be hardworking, eager

to please and show willingness to come to a whistle.

Your doc should be old enough to understand (and spell) "corporate loyalty". Basic numeracy of at least Key Stage 2 is also essential (especially knowledge of negative numbers).

An ability to survive from September until March 31st with no sandwiches is essential.



Training

For the first 6 months you should keep your doc outside and on a leash at all times. He or she should be made to feel special with lots of praise and snippets of confidential information. Regular motivational videos and the hope of meeting Mr Milburn one day are of course an integral part of training.

Initially some may waver at seeing their colleagues managed, culled or castrated (using the traditional "quick but kind" rubber band method). Your doc needs to be constantly told that this is all part of normal practice in a new modernised NHS if the holy grails of targets and balanced budgets are to be achieved.

For at least half the week allow your doc to return to play with partners and patients. (A carefully selected few may reach the coveted Calman standard and never return.)

Caring for your Sheepdoc

1. Appraise your Doc regularly. Away from the sterile environment of the PCT they can easily pick up harmful germs of ideas quickly making them useless for work. Regular stool checks for LMC cynicus should be done once a month and your doc wormed if found.
2. *Grooming* – should be done at least once a week but be careful not to change their outward appearances too much.
3. *Merger Redundancy Fear (MRF)* – If your doc returns to the PCT from playing in their practice looking pale, sweating and shaking immediate action is required. They have almost certainly been affected by acute MRF caused by Merger Rumours. Sit your doc down quietly, give them lots of reassurance and then show them brochures and job adverts for "Quangos". Give them the confidence that they will never have to return to full time general practice whatever positive modernising reorganisations occur. (In the unlikely event of this not working your doc should be taken to the vet and retired early.)
4. *Broken Oath of Corporate Allegiance* – Such breaks are rare but always fatal. You should have your doc put down as publicly as possible.

COMPETITIONS: 1ST ANNUAL NATIONAL SHEEPDOC TRIALS APRIL 2003

April 2003 will see the first national trials – giving you the chance to show what you and your doc can do in front of the TV cameras. Only the best will win the coveted 3 star rosette.

To prepare for this you should practice regularly with your doc. Take him or her out into the countryside and find a GP surgery to practice on. Remember that in the competition itself you will have to demonstrate control of a large flock of GPs.

Judges will award marks in 6 categories and you should remember these when training.



- a) **Obedience**
- b) **Appearance** – you and your doc should be squeaky clean on the day
- c) **Driving** – you will need to drive your GPs toward 5 different goalposts demonstrating the ability to change direction when they are moved.
- d) **Circling** – to achieve anything above one star rosette you must use your doc to get GPs running round in circles for at least 20 minutes without getting bored or running off.
- e) **Splitting** – marks are awarded for the splitting off of 4 GPs from their colleagues. Initially singly then as a group. Use your doc to calm his GPs whilst these 4 are quietly castrated (see previous techniques).
- f) **Penning** – In the final part of the competition you should bring all GPs into an enclosure built of protocols and managed care agreements. (You may use your stick at this point.) Close the gate and then

bow to the chief judge (Mr Milburn).



PS. PCT executives who follow this guidance should be able to achieve at least a one star rosette and move on. For those who don't the NACAs yard awaits!!

Dr G Down-Shep – Sangatte Refugee Camp, Northern France.

Surgery	VACANCIES
<p>Exwick Health Centre New Valley Road Exeter, EX4 2AD Tel: 01392 676600 Email: Alison.Smith@gp-L83016.nhs.uk</p>	<p style="text-align: center;">GP Retainer/Assistant Required For friendly, 3-Partner Health Centre in Exeter 2 days per week No on-call commitment</p> <p style="text-align: center;">Computerised, PMS, Research Practice For further details, please contact Dr Alison Smith</p>
<p>Walnut Lodge Surgery Walnut Road Torquay TQ2 6HP Tel: 01803 605359 Email: jean.waring@gp-l8311.nhs.uk</p>	<p style="text-align: center;">Replacement Manager Required due to retirement. Post ideally to commence at the beginning of March but we are willing to wait for the right applicant. We are a friendly, progressive practice and are looking for a skilled Manager with good interpersonal skills who will be able to lead the practice through future NHS developments.</p> <p>The successful candidate will have proven Management, Financial, HR and IT experience with excellent communication and organisational skills.</p> <p>Salary and hours are negotiable according to experience and qualifications.</p> <p style="text-align: center;">Closing date for applications: Friday 17 January 2003. Informal visits welcome.</p>

<p>Chiddenbrook Surgery Threshers Crediton Devon EX17 3JJ Tel: (01363) 777887 E-Mail: Jenny.Read@gp-L83065.nhs.uk</p>	<p style="text-align: center;">Salaried GP</p> <p>We are looking to appoint a GP for 18 hours per week for a six month fixed term contract initially, renewable by mutual agreement and subject to the practice continuing its PMS 3b Pilot. Salary £29,000 per annum</p> <p>We are a 4-Partner, Semi-Rural Training Practice (7,000 patients) with purpose built premises. The Practice Team includes a GP Retainer (currently working 3 sessions a week) and 3 part-time Practice Nurses. We run the 'Advanced Access' appointment system and the post-holder would need to be flexible to enable us to manage this system effectively. We are mostly computerised (EMIS). The Partners are Clinical Assistants at Crediton Community Hospital.</p> <p style="text-align: center;">Please phone our Practice Manager Jenny Read for further details.</p> <p style="text-align: center;">The closing date for your application and CV is Friday 3 January 2003.</p>
<p>Imperial Surgery 49 Imperial Road, Exmouth, EX8 1DQ Tel: 01395 270388 Email: penny.rye@gp-l83628.nhs.uk</p>	<p style="text-align: center;">Locum Practice Manager</p> <p style="text-align: center;">Maternity Cover late Feb-Aug 2003 26-30hrs/week</p> <p style="text-align: center;">Applications in writing with CV to Mrs Penny Rye. Closing Date: 8 January 2003</p> <p style="text-align: center;">Informal enquiries welcome.</p>
<p>Chard Road Surgery St Budeaux Plymouth PL5 2UE Tel: 01752 363111 Email: postmaster@gp-l83037.nhs.uk</p>	<p style="text-align: center;">Replacement Partner</p> <p style="text-align: center;">The surgery is looking to replace a partner who is retiring on 1 April – the commencement date of the new position.</p> <p>We are a friendly 5-doctor practice in Plymouth who has applied to become a 5th wave PMS pilot as from April 2003 and are awaiting DoH approval for this.</p> <p>As a PMS pilot practice we would be able to offer great flexibility in offering this position. All options can be discussed including partnership – full or part-time, salaried post – full or part-time, job share or other agreed arrangements depending on the suitability of the candidates. The position is for a WTE so each option can be entertained. A "golden hello" payment may also apply according to the individual's circumstances.</p> <p>We own our superb purpose built surgery, which offers excellent facilities. We operate using EMIS and are virtually paperless. We have an enthusiastic supportive team and attached staff. We use deputising doctors to cover OOH care. We have an excellent Nurse Practitioner who triages our emergency calls and have another nurse starting to train as a Nurse Practitioner.</p> <p style="text-align: center;">If you are interested in joining the team please apply with your CV to Mrs Kay Slater, Practice Manager. For an informal chat or to look around please contact either Kay Slater or Dr Mike Burdon.</p> <p style="text-align: center;">Closing date: 25 January 2003.</p>
<p style="text-align: center;">Dr Clive Long MBBS MRCGP DRCOG FPCERT.</p> <p style="text-align: center;">Experienced Devon GP available for locum work. Qualified in all aspects of general practice. Please see www.drclivelong.biz for full contact details, CV, photos of certificates and online availability – 07967646630</p>	

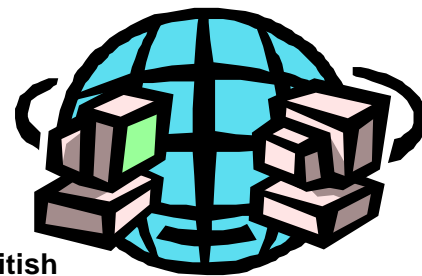
GP Retainer Seeks Vacancy

Enthusiastic, experienced ex –principal recently relocated to Devon seeks retainer, or other type of salaried post, 2-4 sessions per week in Teignbridge PCT area from mid January 2003.

Please contact secretariat office for further details.

News from the web site - www.devonlmc.org

After a relatively quiet autumn with hardly anything new appearing, we have recently had a flurry of interesting documents, which have now all been posted to the web site. All these links plus many more are available on the site.



Medical Information & Insurance - Joint guidelines from the British Medical Association and the Association of British Insurers

This joint guidance has been drawn up by the British Medical Association (BMA) and the Association of British Insurers (ABI) to set out best practice and practical advice on the use of medical information in insurance. It is primarily designed for general practitioners and other doctors who are asked to provide medical information to insurance companies.

<http://www.devonlmc.org/Whats-hot.htm>



NHS GP Flexible Career Scheme (FCS)

The Flexible Careers Scheme - started in November 2001 for hospital doctors and doctors in training – has been extended to those wanting to work part-time. GPs will be able to organise their hours on an annual basis, working different hours at certain times of the year, for example working more hours during term time and fewer during school holidays.

<http://www.doh.gov.uk/pricare/fcs/index.htm>

Primary Care Premises Website

A website designed to help find information about improving and developing primary care premises has gone online. NHS Estates has compiled the site, which gives advice on guidance on all aspects of the processes involved. Designed for strategic health authorities, primary care trusts, clinicians and staff, it includes features on capital and revenue funding options and NHS LIFT. The site also covers developments in primary care and the changing demands on premises, including options for diagnosis and treatment centres and research projects.

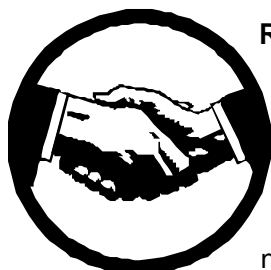
http://www.nhsestates.gov.uk/primary_care/index.asp



Revised NHS GP 'Golden Hello' Scheme

A flexible package of measures to boost recruitment and retention of doctors, consultants and GPs in the NHS has been launched. The measures include an increase in 'golden hello' payments for GPs of up to £12,000. Since being introduced in April 2001 more than 1,700 'golden hello' payments have been made. The incentive scheme has now been extended to GPs who return to practice – with the maximum payment increased from £10,000 to £12,000 in areas where doctors are most needed.

<http://www.doh.gov.uk/pricare/goldenhello/goldenhelloguidance.pdf>



Personal Medical Services (PMS) Pilots - A Guide to Pensions in PMS

<http://www.doh.gov.uk/pricare/guidepensions.htm>





LMC Secretariat Office Christmas Closure

The Secretariat Office will be closed from Monday 24 December until the 6 January 2003. If you have an emergency during that time and need to contact the LMC urgently you can leave a message and a contact number on

Dr Jolliffe's mobile (07968 484116) and
as possible.

he will get back to you as soon



Peter Jolliffe and his staff would like to wish you all a
Merry Christmas and a Happy New Year

Regional GPC Roadshows & Events...

We expect the majority of Devon GPs to attend either at Tiverton or at St Mellion but remind you all that all venues are open to any GP and if you happen to be in Bristol, Southampton or Yeovil I am sure you will be made welcome!

(Particularly if you let them know you are coming...)



Date	Venue	Time
Wednesday 15 January	University West of England Coldharbour Lane Bristol	Area: Avon LMC Time: 7.30-8.00pm Tel: 0117-970-2755
Thursday 16 January	Novotel Southampton	Area: Wessex LMCs Time: 7.30pm Tel: 01962-867793
Tuesday 28 January	Tiverton Hotel Blundells Road Tiverton Devon	Area: Devon LMCs - North & East Time: 5.00 pm First Session Time: 7.30 pm Second Session Tel: 01392-834020
Thursday 30 January	Westland Leisure Complex Yeovil	Area: Somerset LMC Time: 8.00pm Tel: 01823-344314
Friday 31 January	St Mellion Golf & country club St Mellion, Nr Saltash Cornwall	Area: Devon LMCs – South Devon & Cornwall Time: 5.00 pm First Session Time: 7.30 pm Second Session Tel: 01392-834020