

Devon Local Medical Committee

Newsletter Issue No 61

May 2006

Chief Officer's Corner

Pat Holberton

I am sorry to have to inform LMC News readers of the sudden death of Pat Holberton last month. She and her husband Norman were both devoted to each other and also to the cause of the NHS and worked in both Plymouth and Exeter as the management of the NHS evolved. She and Norman were also long time servants of the Devon LMC and it was their imminent retirement from the LMC that brought me down to Devon in 1995. They were both welcoming and supportive and Pat was particularly kind to my, then, small boys when they came with me when I visited Norman in my "induction period". I have very fond memories of her and I know from what was said at her funeral that that is a very common thing. Norman remains at their old address and I am happy to pass any messages if you no longer have it to hand.

Professional Education and Training (PEAT)

The title above is "a starter for ten" for what is proposed to be a new professionally led charitable body which will identify professional education and training needs for Primary Care team members and then either provide or facilitate the provision of the identified needs. Since my last piece on the redundancies of our three "generic GP Educationalists" I have had helpful discussions with the Deanery and chaired a meeting of educationally interested and experienced GPs (ex GP tutors/VTS course organisers and trainers), Plymouth tPCT managers, LMC officers and the three educationalists in their first week of unemployment! There was universal acceptance of the idea that we should take on the task of assisting GPs and their staff and other members of their teams to learn both individually and in teams where appropriate. This acceptance was shared by the LMC Executive and the representatives of the 8 (as I type!) Devon PCTs. My experience many years ago when I was a founder of GP Education in Essex in 1992 which became "EQUIP" in 1996 (have a look at <http://www.equip.ac.uk/> to see what they do) leads me to believe that this is possible, sustainable, affordable and desirable.

We will be publishing an LMC NEWS SPECIAL in the next few weeks as details become clearer. I should flag up that we have all agreed that commercial (including Pharmaceutical) sponsorship will probably prove necessary and also that we would seek GP practices to make a financial contribution so that there is "ownership". We would also expect some assistance from PCTs however cash starved they are at present!

Please would anybody else (particularly from other than Plymouth but not excluding more interest from there!) with either experience or interest in being involved in this new venture contact me or Sarah Hale at the LMC Office on 01392 834020 or by email on peter@devonlmc.org or sarah.hale@devonlmc.org. We need to make this a Devon-wide reality!

The "Phoney War" is coming to an end!

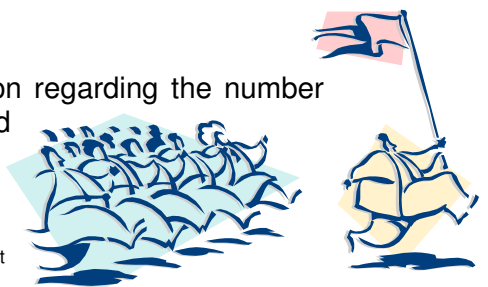
Since typing the article above I have heard about the decision regarding the number and configuration of PCTs in Devon and also that WAST and Dorset Ambulance Trust are indeed to merge. OK – get out your sweepstake tickets please!

(Drum roll) And the winning number is**3**...! What – you all had the same number? Well what a surprise! So come 1st

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Devon
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DEVON



October 2006 we will have Plymouth tPCT, Torbay Care Trust and a new Devon PCT. I wonder where the new one will be based. Any bets Ladies and Gentlemen?

The mechanism for selecting a new Chairman and CEO for the Devon PCT will no doubt swing smoothly into action and there is, as ever, a complex system that details who may apply and when so there is yet fun to be had. Sadly the matter is not so much fun for the current post holders in the six merging PCTs. As I have often said their jobs were set up from their inception to be next to impossible to achieve and with that in mind I would like to thank them for their efforts. Some real achievements have been made even against such odds but it would be invidious and smack of favouritism if I was to list any and I would be sure to offend by missing something of which a PCT is rightly proud.

LMC Attendance Rate for 2006/07

Please remember that this is the rate at which the LMC funds the attendance of its members at meetings and that it is intended to ensure that no practice or individual GP is out of pocket for representing their colleagues. It makes no effort to “pay” members for their expertise or their service. At our recent LMC/PCT Negotiation and Liaison meeting the PCTs agreed merely to note our rate”.

Ever since the former two Health Authorities replaced the Devon FHSA this rate has been used by HAs and their successors to reimburse GPs for the time they have given to help the authority with its work. In some cases, such as GP appraisers, there has been a “professional fee” in addition to the sessional rate and that has aimed to recognise the additional effort and expertise that the GP has brought to the role. In the case of GP appraisers that fee should be agreed with the LMC so that the process “has the confidence of the profession” and that has largely been the case but for various reasons some PCTs have “forgotten” to update their rates on an annual basis. For your information the appraisers rate should now (from 1st April 2006), to have LMC “confidence”, be set at two sessions at £208 each plus a professional fee of £206 making a grand total of £622 per appraisal completed. I trust that the Devon PCTs will continue their sensible policy of paying at this rate but will understand if their concerns over finance lead them away to somewhere less sensible! The OFT have made it impossible to dictate rates so what I am doing here is giving you a guide if you are required to negotiate your own rates with a PCT. I would suggest that anybody achieving less than the LMC attendance rate plus the up rated professional fee above should put themselves down for an LMC run “Negotiating Skills Course”!! If the PCTs decide to continue “following” our rate there will be no problem. If they fail to do so this would, of course, have knock on effects with respect to payments to GP PEC

members where already there is some controversy about superannuation payments. I do hope they “do not wish to go there” but that is a matter for them.....



LMC Joint Conference with SHA and Cornwall & IoS LMC 3rd May

I am happy to report that this was a resounding success with 75% of attendees filling in their feedback forms and all average scores being over 4 on a 1 to 5 scale! I stood in for Roy Lilley to Chair the Conference at the last minute so at least my bits about GP pay were genuinely tongue in cheek rather than barbed! Our speakers did universally well apart from “the man from Serco” who got “held up on the M5” and never made it at all! I hope they manage to do better getting to Cornish patients out of hours..... I got “brownie points” for coercing my morning speakers, Nigel Watson, Rhidian Morris and David Jenner into doing an impromptu “Q&A” to fill the gap which allowed some of the difficulties of PBC to be explored more forensically.

In the other room Helen Lyndon, Mary McConnell, Beverly Stretton-Brown and Dr Strat Liddiard all covered specific PBC issues from their different perspectives and were very well reviewed by their audiences. As I have not yet been cloned (*Never! Ed.*) I am reporting what I was told and have read from feedback.

After lunch Serco were still absent so Geoff Burch (a former “hippy guru” who has removed his pony tail since he last spoke to us at the Riviera Centre Conference) took the opportunity to handle “change” in his own inimitable way that was described by one attendee as “bloody brilliant”! (*Do we have any Australian GPs with us on an exchange or something? Ed.*) Essentially, the message was “Well done – lets have some more!” We will see what we can arrange....

Debbie Galbraith

Executive Officer for South & West Devon



Just a short note to let you know I shall be returning to the office on 22nd May. I have been off for a few months but have kept an eye on emails etc so I know of the GANFYD (get a note from your doctor) saga that still continues and seems to have got worse!

This will be my priority on my return to finally put an end to this ludicrous situation. Not that you need reminding, but **you do not have to respond to any of these requests** even the collaborative arrangements as that is also in a state of confusion! We will get further details on “collaborative arrangements” to you when we have them but essentially the central negotiation process for setting fees has failed and the default position is that you do not have to do them without an agreed fee.

The GPC is taking legal advice as to who may negotiate such fees locally and it is hoped that it will not fall to individual negotiation as that would really cause aggro!!

We will be meeting with the Chief Executives of the Councils on the 23rd May and will let you know the outcome after we have discussed “GANFYDs”.

In the meantime please keep the letters coming if you feel the practice is being asked to do unnecessary paperwork.

I attended the recent LMC Conference at St Mellion and it was so good to see some of you there. It was very well received and the feedback has been excellent.

Sarah Hale

Executive Officer for Exeter, Mid & East Devon

Following on from the training on VAT in March provided by Winter Rule, a few practices were unable to attend and have been in touch asking for some further guidance. If there is enough interest expressed I will arrange another event. If this is something you would be interested in, please let me know. Email: Sarah.hale@devonlmc.org

Practice Merger – Torbay

With effect from 1 April 2006 the Kirkham and St Marychurch Practices merged and the new name is **Brunel Medical Practice, St Albans Road, Torquay TQ1 3SL**. Surgeries will still be held at Fore Street, St Marychurch and Collaton Way, Shiphay.

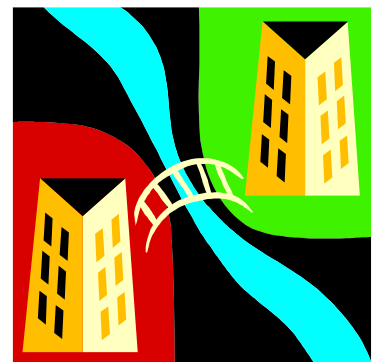
Comings and Goings March 2006

Welcome to:

Dr Stephanie Bowler, Brunel Medical Centre, Torquay
 Dr AbdulKadir Gardi, Crownhill Surgery, Plymouth
 Dr Craig Barker, Plym River Practice, Plymouth

Goodbye to:

Dr Christopher Westwood, Ridgeway Practice, Plymouth
 Dr Kouros Torabi, Crownhill Surgery, Plymouth
 Dr Christopher Molan, St Marychurch Medical Centre, Torquay
 Dr John Makin, Plym River Practice, Plymouth



Freedom of Information Act (FOIA) – Item from GPC News

The Information Commissioner (IC) has decided to extend the lifetimes of current publication schemes for at least two years. This will mean that there will not be a requirement for practices to rewrite their schemes and submit them for approval by October this year. There remains a requirement for practices to keep their existing schemes up to date and notify the IC of any changes or deletions to them.

The IC will be producing guidance about the anomalous position regarding the records of deceased patients. A date for the publication of this guidance has not yet been made available. However, the IC will give advice on a case by case basis, should practices require it.

Information Commissioner's Office - www.ico.gov.uk

Salaried GPs: Prescribing Numbers – Item from GPC News

Following pressure from the GPC Sessional GPs and clinical and prescribing subcommittees, we are pleased to report that salaried GPs are now entitled to have their own prescribing number. PCOs can apply to the NHS Information Centre (GMS Team) for an individual unique number for each of the salaried

GPs on their Performers' List. We therefore advise salaried GPs to contact their PCO for a prescribing number. We continue to make representations for locum GPs also to have a unique prescribing number.

Devon Medical Sailing Rally Saturday 17th June 2006 at the Royal Dart Yacht Club, Kingswear

An open invitation to all sailors: all you need is a doctor, dentist, medical student or other health professional on board

Lunch from 12:00 onwards

A pursuit race from the mouth of the Dart out into Start Bay

Early evening prize-giving and an opportunity to enjoy an evening meal at the RDYC. Please reply to Dr Norman Doidge, (Devon Medical Sailing Rally), Albany Surgery, Albany Street, Newton Abbot, Devon TQ12 2TX [Courier Box 16] or Email: norman@ndoidge.fsnet.co.uk



Clinical Cabinet 'goes live'

After four months of preparation and a great deal of developmental work behind the scenes, Devon Partnership NHS Trust's Clinical Cabinet is due to go live on 28th April 2006.

Fifteen health and social care professionals have now been appointed to the Cabinet and they are ready to usher in a new era that will see clinical leadership right at the heart of the organisation's strategic thinking and decision making.

Devon Partnership NHS Trust

Working closely alongside the Board and the Operational Management Group, the Cabinet will consider a number of key themes as it starts to gather momentum over the next few months. These will include the management, leadership and development of the Trust's health and social care professionals; clinical governance and performance; the prioritisation, integration and coherence of our services and clinical practice development.

The success of the Cabinet will depend very much on the support and engagement of staff right across the Trust and clinicians outside the Trust within primary care. Commenting on the importance of this wider participation, Chair of the Cabinet, Consultant Psychiatrist Peter Aitken, says: "The Cabinet is an exciting opportunity for all of us to prove that we can genuinely shape our services, and the overall direction of the Trust, around the needs of our service users and carers.

"However, we cannot achieve this simply through a small group of professionals sitting around a table and discussing the big issues amongst themselves. We will be reliant upon on input from staff in every professional discipline and from every geographical location so that we can make balanced and informed judgements about the way forward. We want and need honest feedback from people. Our plea to all staff is to make themselves known to their relevant Cabinet member and to get involved with the Cabinet from day one so that they can make an ongoing contribution to its work."

The Primary Care lead is Maureen Casey. She will be creating a reference group of

interested GPs and other primary care clinicians to ensure that the Cabinet is able to communicate effectively and receive feedback from across Devon. In the first instance she will be happy to visit practices to discuss the Cabinet's work or meet with individuals who would like to be part of the reference group. She hopes to meet each of the local LMC groups over the next year and through the Devon LMC will have a discussion forum linked to the LMC *Voxpop*.

The Cabinet is keen to engage GPs in its work to improve the physical health of people with a serious mental illness and one of the first pieces of work being undertaken by the sub-group looking at NICE issues will focus on the depression guidelines - which have a huge primary care component. Maureen will also be involving GPs in a project to establish a set of personal descriptors which will work as clinical measures across the whole mental health network, including primary care. You can contact Maureen on 07976965245 or at maureen.casey@eastdevon-pct.nhs.uk

The members of the Cabinet are:

Nursing	Oriana Rogers and Doug McLynn
Psychology	David Jeffery
Occupational Therapy	Hilary Bailey
Psychological Therapies	Peter Whittle and Peter Kay
Forensic	Adrian James
Learning Disability	Nory Meneer
CYPD	Peter Kay
R&D	Peter Aitken (Cabinet Chair)
Older People	David Somerfield
Adults	Keith Dudleston
Pharmacy	Amanda Gulbranson-Brown
Primary Care	Maureen Casey
Social Work	Amanda Hesford
Substance Misuse	To be appointed
Medical Director	To be appointed

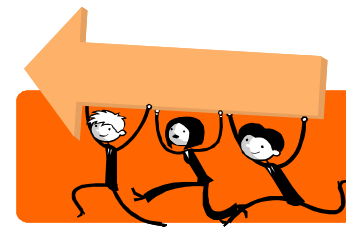
The Chief Executive, Medical Director and Director of Nursing are also part of the Cabinet.



Scam Alert: Confirmed as genuine by Royal Mail:

If you receive a card through your door from a company called PDS (Parcel Delivery Service) to say they have a parcel awaiting collection, and to contact them on 0906 6611911 - DO NOT call as this is a scam.

If you call and start to hear a recorded message you will already have been billed £15. If you do receive a card then please contact Royal Mail Fraud on 02072396655 or ICTIS at <http://www.icstis.org.uk>



The Local NHS Primary Care Contracting Team – UPDATE April 2006

PCC supports the development of primary care across all PCTs in England. Our team of advisors work with PCTs and SHAs to provide detailed and expert information to help maximise the benefits offered by the new contracts.

Our advisors also support local and national networks, communicating and facilitating change and good practice, in particular the identification of change drivers in primary care

The South West local Primary Care Contracting Advisor (PCCA) is Carla Miller who can be contacted at: Email: Carla.Miller@pcc.nhs.uk. Mobile: 07966 068311.

Please note Carla now works on a part-time basis covering Devon, Cornwall, Dorset and Somerset. Website: www.primarycarecontracting.nhs.uk

South West Peninsula SHA

The South West Peninsula SHA has recently concluded its public consultation on the re-configuration of PCTs and SHAs. The Secretary for State announced on the 12th April 2006 that there will be a single SHA for the South West. During the next few weeks as the new organisation is developed, the current SHA will be working on a transition plan to ensure business continuity. For Primary Care contracts Topsy Murray will be leading the work on Practice Based Commissioning and ensuring that the GMS/PMS contracts, the new Dental contracts and the pharmacy contracts are in place and working well. Topsy will be working with the PCTs and the National Primary Care Development Team to support the roll out programme for Practice Based Commissioning which will engage about 60 practices across the SHA area. The target to achieve universal coverage of PBC by December 2006 is being monitored with PCTs. Topsy is also involved in working with the DH on policy issues and has been nominated to join the national group working on the patient survey which will be used to monitor patient experiences and will be linked to achievement payments for the Access and IMT/Choice and Booking DES.

Topsy Murray, Associate Director Primary Care. Topsy.Murray@swpsha.nhs.uk

National Primary Care Development Team (NPDT)/Improvement Foundation, South West Peninsula Spread Centre

NPDT aims to support individuals and organisations in programmes of work that will help them deliver rapid, systematic and sustainable improvement for patients and communities. At the same time, we aim to help people develop a set of practical, transferable skills in quality improvement that they can use in any area of their work.

Ali Stephens – Lead for Practice Based Commissioning (PBC), Long Term Conditions and Unique Care. Email: alisonstephens@nhs.net

Maggi Clough – Lead for Quality Improvement Skills for Practices (QuISP), Sexual Health and Mental Health. Email: Maggi.Clough@nhs.net

Guy Boosey – Lead for Information Management

Maria Axford – Events Co-ordinator
Email: Maria.Axford@nhs.net

You can contact the team at the Lescaze Offices, Dartington.
Tel. 01803 861863

Website: <http://www.npdt.org>





Westcountry Ambulance Services

NHS Trust

Urgent Detail Requests

Westcountry Ambulance Service is phasing in a Department of Health report called Taking Healthcare to the Patient - *Transforming NHS Ambulance Services*. One of the recommendations of this report is how the Ambulance Trust measures its performance on Urgent transport requests.

The agreed standard of measurement for Urgent requests has been for many years to arrive at the designated Hospital no more than 15 minutes after the agreed time in 95% of cases. From April 2006 this has changed and the performance will be measured by what time the ambulance clinician arrives at the scene (ie the house) and not the Hospital.

Central Ambulance Control will therefore have to adapt their working practices to accommodate this recommendation concerning urgent transport requests. Therefore as from Monday 1st May 2006:

- Control staff taking an urgent transport booking will offer the caller a time by which the ambulance clinician will arrive at the patient's location.
- The initial time given for arrival will be **three hours** from the time of origin of the call:
 - ❖ For example if the call is being taken at 12:15 hours then the caller will be informed that an ambulance clinician will arrive with the patient by 15:15 hours.
 - ❖ If the caller indicates that this is an inappropriate time scale then a shorter time of **two hours** can be agreed as an exception.
 - ❖ If the patient's condition is such that two hours is deemed an inappropriate time scale then the caller will be offered an upgrade to an **emergency call** and the case will be triaged accordingly.

The caller will be asked if the patient is likely to require clinical intervention en route or whether an Urgent Transfer Vehicle (technician crew) is suitable.

This subtle change in measurement will not affect the standard of service given to the patient but will help Ambulance Control to prioritise the booking according to the medical need.

I would be obliged if you could share this letter with those staff who make regular Ambulance bookings requests on your behalf. Many thanks for your assistance in this matter.

Neil Le Chevalier

Assistant Chief Ambulance Officer - Central

Locums Available

Nurse Locum available South Devon

13 years Practice Nurse and Nurse Practitioner experience in Devon.

I am looking for short or longer term locum work. Tel: 01803 214864

CV/terms on email: katetj@tiscali.co.uk

Dr Louise Knight MRCGP

Flexible Careers Scheme GP Seeks 2 - 5 Sessions in Exeter/East Devon Practice

I completed my GP registrar year and continued at the same practice in Ivybridge for a year on the flexible careers scheme. However, my family have now moved to East Devon and I am looking for a position closer to our new home. I have 18 months remaining on the scheme, although ideally would like to find somewhere that I could work longer term.

Please contact me at lojones@lycos.co.uk or on 01404 815570

VACANCIES

<p>Beaumont Villa Surgery 23 Beaumont Road St Judes Plymouth PL4 9BL Email: janice.stabb@nhs.net</p>	<p>Locum required to cover sabbatical leave from 3 November 2006 to 5 February 2007, 5 Sessions per week. No out-of-hours. Fully computerised, EMIS, paper-light University Branch Surgery Engaged with Peninsula Medical School for teaching Written applications with CV to Mrs Janice Stabb, Practice Manager. Informal enquiries telephone Dr Paul Hardy on 01752 663776. Closing date for applications: 7 July 2006</p>
<p>Church View Surgery 30 Holland Road Plymstock Plymouth PL9 9BN Tel: 01752 495517</p>	<p>Maternity Locum Cover Required from mid August for 6 months 4 sessions per week (may include on-call during the day) Tuesday pm, Wednesday all day and Friday afternoon. For further enquiries please contact either Practice Manager, Amanda Sharp. Email: amanda.sharp@nhs.net or Dr Nina Kaitiff: nkaitiff@nhs.net or telephone the Practice Manager on 01752 495517.</p>
<p>Modbury Health Centre Poundwell Meadow Modbury Devon PL21 0QL Email: angela.clarke2@nhs.net Closing date: 22 May 2006</p>	<p>Practice Manager Vacancy Rural dispensing 2½ Partner practice in South Devon. We are paper-light, highly-achieving in GMS contract and are looking for a manager with a record of good business and management skills, including financial management, human resources and IT. Experience within General Practice or an NHS environment preferable but not essential Salary negotiable according to experience and qualifications. Preferred starting date 26 July 2006 Enquiries to: Mrs A Clarke, Practice Manager Applications in writing with full CV to Dr P Holley.</p>
<p>The Ridgeway Practice Plympton Health Centre Mudge Way Plympton PLYMOUTH PL7 1AD Phone: 01752 346634 Fax: 01752 346466 Email: michael.curran@nhs.net</p>	<p>Long-Term Locum GP - October 2006 We are a 9-partner practice with 14,500 patients and we are looking for an enthusiastic locum to work with us on a long-term basis for a total of 4 morning sessions per week (Monday, Tuesday, Thursday & Friday) from early October 2006. The precise duration of this arrangement will be open to negotiation. During the course of the week you will see patients at each of our three surgeries (Plympton, Chaddlewood and Wotter) and work alongside our experienced practice team. We are a paper-light practice and use the Microtest clinical system. If you are interested in working with us, please write to our Practice Manager, Michael Curran, enclosing a copy of your CV.</p>

<p>Glenside Medical Centre Glenside Rise Plympton PL7 4DR Tel: 01752-341340 Email: pat.forsbury@nhs.net</p>	<p style="text-align: center;">Practice Nurse</p> <p>Required for 6 months maternity cover, 3 days per week, commencing 1.8.2006. Experience in the care of diabetic patients preferred. Please contact Mrs Pat Forsbury, Practice Manager.</p>
<p>Bramblehaies Surgery College Road Cullompton Devon EX15 1TZ Tel: 01884 33536</p>	<p style="text-align: center;">Retainer</p> <p>Required to join our team from June 2006 working four sessions a week (Wednesday all day, Thursday and Friday morning). We are a friendly 4-partner (3.5 WTE) PMS practice in the heart of Devon, with high standards of care, a supportive partnership and an excellent primary health care team.</p> <p>We are looking for an enthusiastic and committed individual to join the team where humour, mutual support and balance are valued, and assist us in delivering a patient-focused service from excellent purpose-built premises with a team of attached staff based at the local health centre.</p> <p style="text-align: center;">If interested, please send covering letter and CV to Dr Stephen Straughan, Senior Partner. For an informal chat or visit please telephone.</p>
<p>Sampford Peverell Surgery 29 Lower Town Sampford Peverell Tiverton EX16 7BJ Tel: 01884 820304</p>	<p style="text-align: center;">Practice Nurse (due to retirement)</p> <ul style="list-style-type: none"> • Single Applicant or Job Share • 20 hours a week over 4 days • The role will include full treatment room responsibilities and chronic disease management • Training available for the right candidate • Salary according to qualifications and experience • Informal visits and enquiries welcome <p>Apply with CV and covering letter to: Amanda Wilcock.</p>

Conferences, Courses and Information



National Patient Safety Agency

General Practice Patient Safety Day Learning and Sharing

Friday 16th June - 10am – 4.30pm (buffet lunch provided)

The Novotel, Plymouth

Speakers:

Dr David Colin-Thome – National Clinical Director Primary Care, Department of Health

Dr Nina Moorman - National Clinical Assessment Service Advisor

Hazel Crook, Patient Safety Manager, National Patient Safety Agency

This event is aimed at General Practitioners, Practice Managers and Practice Nurse Managers, or any member of the practice team with responsibility for patient safety. The day will be split into two halves.

FREE to NHS Staff – To register your interest:

Please email your Name, Job Title, Contact details to Hazel.crook@npsa.nhs.uk

Plymouth Primary Care Education Team – Final Educational Programme

DATE	TOPIC/SPEAKER	VENUE/TIME
Events for Sessional GPs		
Weds 21 st June	Gynaecology update – with Peter Scott, Consultant, Derriford hospital and former GP	Plymouth Post Grad Medical Centre 6.30-9.00 pm
Thurs 14 th Sept	CHD – with Dr Rosie Heath, GP with Special Interest in Cardiology, Plymouth PCT	China House Restaurant, Sutton Wharf, Plymouth 6.30-9.00 pm
Weds 15 th Nov	Substance abuse – Dr Charlie Lowe (tbc)	China House Restaurant, Sutton Wharf, Plymouth 6.30-9.00 pm
Events for all GPs		
Tues/Weds 10-11 th October	Build your own PLP – with Dr Mandy Beasley and Lisa Baxter	Kitley House Hotel, Yealmpton, 9.00 am – 4.00 pm (2 days)
Multidisciplinary learning		
To Suit you	IT training to order – MS Word, Excel, e-mail and the internet.	Contact Judy Wild – IT Training Administrator on (01752) 763874 or judy.wild@phnt.swest.nhs.uk



BCS Primary Health Care Specialist Group
Spring Conference - May 23rd & 24th 2006,
Heythrop Park, Oxfordshire

‘Making the Right Connections’

**Can You Afford Not to Go?
Do you know all you need to about?**

* Practice Based Commissioning?	* The IT Direct Enhanced Service?
* GP Systems of Choice?	* The Patient Summary Record from NHS Connecting for Health?

Speakers include:

Richard Jeavons, NHS CfH Director of Implementation
David Johnstone, Director of Devon Social Services
Dr Gillian Braunold & Prof Mike Pringle, the NHS CfH GP Clinical leads
Fiona Godlee, Editor of the BMJ
Paul Cundy, Joint GP IT Committee
Richard Smith, CEO, UnitedHealth Europe
Members of the NHS CfH teams running the Choose & Book, QOF/QMAS, ETP and GP2GP programmes.

HOW TO BOOK AND SPECIAL HALF PRICE OFFER

Make one booking for the conference and get a second booking for half price. Further details and on-line booking available on our web site, go to <http://www.phcsg.org/index.php?p=conferences> or ring Jill Riley, BCS PHC Specialist Group Administrator on 01905 727461.

Get Yourself Fit - Exeter Area

Following discussion and negotiations with Healthworks. Devon LMC is pleased to announce a 25% discount package for all Primary Care Staff in the Exeter Area at "The Stable Club" located at the Friends Provident site on Winslade Park, Clyst St Mary, Exeter.

Full facilities are available which include: Gym, Squash and Swimming. Current fitness classes include: Pilates, Boxercise, Cycle Reebok, Aero-combat and the popular Legs, Bums and Tums.

	Full Rate	Discounted Rate
Single Membership	£30.00 pm	£22.50 pm
Joint Membership	£54.00 pm	£41.00 pm
Family Membership	£60.00 pm	£45.00 pm



A further discount will also be applied to the joining fee which is reduced from £25 to £15
For more details please contact the club manager Mr Les Hatcher on 01392 282491
To access to this offer please quote reference - LMC001

Devon Doctors Ltd

Telephone Triage Workshops

Devon Doctors Ltd are running a series of Telephone Triage Workshops this year:

Tuesday 13th June at the Duke of Cornwall Hotel, Plymouth

Thursday 21st September at the Imperial Hotel, Torquay

Tuesday 5th December at Broomhill Hotel, Barnstaple

Workshops start at 9.30am and finish at 4.30pm

A £50.00 deposit is required, returned to you on completion of workshop (if you are due to work a DDOC session in next 6 weeks).

If you are interested, please contact sarah.avery@devondoctors.nhs.uk
or 01392 823158



The good, the bad and the ugly...

A round up of recent new Guidance and Documents

The following documents have recently been posted on the LMC Web – www.devonlmc.org

GPC Guidance - Practice Based Commissioning: Consortium Working

This document is the first in a new series of guidance notes from the General Practitioners Committee (GPC) on practice based commissioning (PBC). For the most part, the series is aimed at practices who intend to take on a level of commissioning activity wider than the scope of the 'Towards practice based commissioning' Directed Enhanced Service (TPBC DES). Despite this, a large part of the guidance will still be relevant to practices undertaking the DES.

GPC Guidance - Information for PMS practices and APMS GPs following publication of Department of Health guidance on non-GMS contracting arrangements for 2006/07 – England Only

This GPC guidance note seeks to provide PMS practices and GPs holding APMS contracts for essential services and LMCs with information in light of the Department of Health guidance. Note that although the Department of Health guidance does not apply to PCT Medical Services

(PCTMS), there may be implications for these practices. Where applicable, these are set out in this GPC guidance.

GPC Guidance - Implementing the IM&T DES: Data Accreditation

As part of the agreed changes to the GMS contract for April 2006, a directed enhanced service (DES) was developed to facilitate the use of information management and technology (IM&T) to support the delivery of the National Programme for IT. The specification for this DES can be found in Revisions to the GMS contract 2006/07: delivering investment in general practice which is on the BMA and NHS Employers websites. Practices and PCTs will need to familiarise themselves with the specification before reading this guidance note. A key objective of this DES is to support practices to achieve accredited data quality standards that are fit for sharing in the NHS Care Records Service. This guidance provides PCTs and practices with further information about the data accreditation process. Additional technical guidance will be published by the end of summer 2006.

GPC Guidance - Practice Based Commissioning: Division of Freed Up Resources

The incentive to free up resources from the indicative budget with practice/consortium-level control on how funding is reinvested in patient services is a key driver for practice engagement in practice based commissioning (PBC). In its current guidance 'Practice based commissioning: achieving universal coverage' (January 2006), the Department of Health recommends that practices are able to access and redirect at least 70% of freed up resources, with the remaining percentage to go to PCTs to meet needs across the PCT area (paragraph 47). There has been some confusion however over the interpretation of paragraph 48 which states that '...as a last resort, these resources may be used to cover PCT overspends' and whether 'these resources' refers to 100% of freed up resources, or just the PCT's share.

GPC Guidance - Alternative Provider Medical Services (APMS)

The government is currently initiating far-reaching reform of health services organisation and delivery. Its reforms are based on a philosophy of diversification of health care providers, patient choice and competition and include initiatives in primary care such as practice based commissioning, choose and book and Alternative Provider Medical Services (APMS).

APMS in particular has the potential to alter radically the face of primary care in the UK. The extent to which this will happen and the direction of any change following the introduction of APMS remain uncertain. While there are many legitimate concerns about APMS, this method of contracting, if fairly implemented, does offer GPs the potential to further shape primary healthcare provision.

NHS Connecting for Health Primary Care Guidance

A new 19 page guidance - NHS Connecting for Health, an agency of the Department of Health, is driving forward the implementation of the Government's Information Technology strategy for the NHS. The agency is developing and implementing a new generation of integrated systems across organisations to enable people treating patients to have secure access to the information and services that they need to support patient care. These changes will require a new approach to the use of IT by those who work in general practice, paying special attention to accuracy and completeness of electronic patient health records so they are fit for sharing. The new tools will have real benefits for you in your patients' care, administrative support processes and in your budgetary work. This publication gives an overview of developments that will take primary care to another level in the provision of high quality patient focused services. It describes what is going on and gives practical steps and advice on what to do next.

GPC Guidance - Personal Administration Fee

Some of you may be aware that the Personal Administration Fee has now altered under the Statement of Financial Entitlements 2006. The GPC has produced a brief description of the changes for non-dispensing practices, also "A Focus On" document will be published in due course outlining the changes to Dispensing Practices of the recent negotiations.

