

MORGANNWG LOCAL MEDICAL COMMITTEE

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LMC Newsletter June 2010

The Patient Experience Survey 2009/10

The Patient Experience Survey 2009/10 results in Wales were published on 17 June 2010 and the figures for all Practices can be accessed at:

<http://Wales.gov.uk/topics/statistics/headlines/health2010/100617/?lang=eng>

The headline figures are that 83% of patients replied that they could see a GP or health professional on the same day or next day and 73% replied that they could book more than 2 days ahead. Even more encouraging the numbers “*very satisfied*” or “*fairly satisfied*” with the service were 92%. These figures are encouraging and are about 2% up on 2008/9 despite the Swine Flu pandemic but many Practices have complained they don't reflect the level of access they know that they offer.

Since the inception of the Patient Experience Survey, the General Practitioners Committee has made it clear that the funding (and in many cases the de-funding) of Practices on the basis of patients' perceptions is fundamentally wrong. It is also counter intuitive to remove resources from a Practice at the very time that they need these resources to strive to improve access for their patients..

As to the survey itself, the PE7 question is followed by further modifying questions, and whilst the first is “*no appointments available*” the others are:

- *could have seen someone but time not convenient*
- *it was a doctor I didn't want to see*
- *could have seen a nurse but wanted to see a doctor*

In all three cases it is clear that the answer to the PE07 question should therefore be “Yes” and GPC Wales has asked the Welsh Assembly Government (WAG) to ensure that payments in Wales should be made on this basis for 2009/10. To date, the WAG has yet to make that decision although the Scottish government has agreed to calculate the results and make payments to Practices on this basis. Should the WAG decide not to calculate on the same basis, GPC Wales will provide all Practices in Wales with a letter and ready reckoner to assist them in making an appeal.

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More about the DDRB Award 2010 for Wales are awaited but Practices should receive the increases in July (back-dated to 01 April 2010). It is extremely unlikely that the increase in Practice expenses will be met unless economies are made. All DESs in the SFE will be automatically uplifted by 0.4% and WAG will “remind” LHBs to treat all other Enhanced Services in the same way.

The Award will be paid at 0.4% across the Contract (except Seniority) and 0.4% into Global Sum only. Practices not receiving a Correction Factor will have a slight advantage and a very small number of Practices in Wales will come off MPIG. The final figures for the uplift to Global Sum and QOF points

Secondary Care / Primary Care Interface Issues

Morgannwg LMC continues to receive many expressions of concern about services at the Secondary Care / Primary Care interface in the ABMU Health Board area. Many of the issues are about poor communication and there is also a feeling amongst GPs that some Secondary Care colleagues treat them as their Community House Officers. Most of the issues that come to Morgannwg LMC are raised with the Assistant Medical Director (Primary Care) or at the ABMU Primary Care Interface Group (PCIG).

One of the areas of real concern and some annoyance to GPs is the operation of the Pre-op Assessment Clinics in the western area of ABMU HB where patients deemed to be unfit for anaesthetic are referred back to their GP (and may even be removed from the Waiting List) without the GP being sent an adequate communication. However, there is good news in that following the last PCIG, the AMD has been able to reassure the LMC that the following changes will be brought in:

- GPs will be given a clear contact telephone number, details of the operation under consideration, the reason for the referral back and what is expected of the GP
- Direct referrals on to other specialists from the pre-op assessment clinic will be made without automatic referral back to the GP (for appropriate conditions)
- There is a recognition that risk assessment is often a factor in the difficult cases that end up with the GP when it is really an anaesthetic / surgical decision as to whether to proceed
- There will be automatic population of 3 BP readings from the GP system onto the e-referral form

Most of the above are already working well in the eastern part of ABMU HB and Morgannwg LMC hopes that they will become embedded in the procedures at the Pre-op Assessment Clinics in the western sector in the near future as the present situation is not good for patients or their GPs.

Annual Conference of LMCs 2010

The ACLMCs 2010 took place in London on 10 & 11 June 2010 and you were well represented, with five Morgannwg LMC motions chosen for debate. Subjects covered included:

- Research and confidentiality/demands that researchers may place on GPs for "free" data
- Medical Certification and the new "Fit Note"
- Quality & Outcomes Framework
- The General Practitioners Defence Fund

However, the Morgannwg LMC motion that created the most interest and received most publicity was under "Clinical & Prescribing" as follows:

That conference, in respect of patients with so-called minor mental health problems, is:

- concerned that many PCOs and many psychiatrists believe that such patients should be dealt with entirely in general practice*
- concerned that many psychiatrists will not see such patients when referred by their general practitioner*
- distressed that therapy services that are likely to benefit many of these patients are not available to many general practitioners*
- angry that GPs are criticised for inappropriate or excessive prescribing of antidepressants, even when therapy services are not available.*

All parts of the motion were carried and this now becomes the policy of the GPC.

A full report of the conference and the fate of all the debated motions can be found at www.bma.org.uk and in GPC News M10.

Independent Safeguarding Authority (ISA) Vetting & Barring Scheme (VBS)

The new Home Secretary has put on hold the new VBS which was due to come into operation in England, Wales and Northern Ireland on 26 July 2010. Whilst the Scheme is being remodelled, existing Safeguarding Regulations remain in force and should be adhered to.

The Open Exeter System

Morgannwg LMC endorses the ABMU Health Board and BSC initiative in promoting the *Open Exeter* system. *Open Exeter* allows Practices to view their GMS monthly statement, acquire previous statements, download them for analysis into spreadsheets, enter immunisation target dates and check the Practice List size held at the BSC. Familiarisation with *Open Exeter* will enable Practices to move more smoothly into using the system for the submission of Enhanced Services claims in the future.

Sandra Williams, Patient Data Registrar, BSC, has e-mailed all Practices and further details can be obtained by contacting her on 01792 607228.

Cervarix

Did your Practice buy Cervarix to vaccinate female patients who fell outside the national HPV vaccination programme but where the immunisation course was clinically appropriate? If you did, you will be interested in the news from GPC Wales that Practices who did this will be able to apply to LHBs for discretionary reimbursement of the drug costs even though Cervarix was removed from the Drug Tariff on 01 October 2009.

Next LMC meetings: Full Committee 7.00pm Tuesday 13 July 2010 - Towers Hotel, Jersey Marine
Exec Committee 7.00pm Tuesday 10 August 2010 - Uplands Surgery, Swansea
Full Committee 7.00pm Tuesday 14 Sept 2010 - Towers Hotel, Jersey Marine