

# MORGANNWG LOCAL MEDICAL COMMITTEE LIMITED

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## LMC Newsletter September 2011

### **Chairman's Blog**

*'Dear All*

*I will be very brief as the Liaison Officers are also reporting this month.*

*GPs' concerns regarding appointment systems being used in hospital have seemed to resonate with our consultant colleagues who are also experiencing their own difficulties. Meetings have been set up with the Head of Health Records and LMC, the Local Medical Advisory Group and Practices.*

*Robust concerns have been expressed by the LMC into the Community Resource Teams proposals to reconfigure their services. Key elements of response include lack of engagement of GPs in consultation, fragmentation of the Primary Health Care Teams by their not being based within surgeries and importance of continuity. The LMC accepts that service delivery is challenging for all and we all need to use resources as effectively as possible to meet demands placed but any redesign needs to involve key stakeholders before change implemented. The role of networks as the key element in any service redesign of community services has also been highlighted by us.*

*The Health Board needs to complete an Annual Quality Operating Framework report which this year looks at Access to GP Services. The Locality Health Board officers have designed a questionnaire which will be used instead of the "mystery shopper" exercise. Where they know the answers to some of the questions, they will pre-populate the questionnaires to avoid duplication of work and it is aimed to be supportive of Practices in highlighting the variety of Access they offer to patients as well as ensuring contractual requirements are met. This is a positive way forward.*

*Before passing onto the Liaison Officers to update you on the focus of their work across the Localities, I am delighted to inform you that Dr Ashok Rayani has been nominated by his patients for the RCGP Wales Doctor of the Year award. This is a true honour and very well deserved and I am sure you will all want to join me in congratulating him on this achievement.*

*Regards,*

*Charlotte'*

### **Liaison Officers' Blogs**

*'The three Community Networks in Bridgend have made good progress and now have staff in place and have increasing engagement with a variety of bodies in the area.*

*Bridgend North has been involved in Early Identification of Dementia (which includes aide mémoire cards and education packs) and Development of Supportive Care Pathway for COPD.*

*Bridgend West is looking at DVT Pathways, Medication at Home, medicines waste, falls risk, chronic condition support, prevention programmes with a focus on Flu and Stroke Prevention/TIA and life after Stroke.*

*Bridgend East has now rolled out Wound Care Procurement and Management to all six Practices and it is now looking at IUCD/Family Planning, Osteoporosis and Dexa scanning proposals.*

**Nimish'** [Dr Nimish Shah - Morgannwg LMC Ltd Liaison Officer to the Bridgend Locality]

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*'I have attended a number of meetings on behalf of LMC. This month saw me completing training in supporting doctors called to attend a Reference Panel under the Performers List regulations. This work is a vital area for all to get right. It was a most illuminating session - even trying to find the venue in Mamhilad near Pontypool tested my little grey cells.*

*Other work includes highlighting importance of continuity within General Practice, highlighting problems of fragmentation of Primary Health Care Teams and attending local and national Prescribing meetings to ensure that the value, expertise and efforts of General Practice are recognised.*

*Regards,*

**Ashok'** [Dr Ashok Rayani - Morgannwg LMC Ltd Liaison Officer to the Swansea Locality]

### **The Seasonal Flu Vaccination Programme for 2011-2012**

The Seasonal Flu season is approaching, and the BMA and the Chief Medical Officer for Wales have issued letters giving guidance on the arrangements for the Seasonal Flu vaccination programme.

The BMA letter states; "Evidence collected over the last few years has shown that patients in at-risk groups were **11 times** more likely to die from Seasonal Flu than otherwise healthy individuals, which shows the importance of the flu vaccinations for those groups. Evidence also showed that in 2010-2011, uptake in the at-risk groups in patients under 65 was much lower (50.4%) than that recommended by the WHO (75%). Uptake in pregnant women was only 38%." At-risk groups for 2011-12 are:

- All patients aged 65 years and over
- Chronic respiratory disease aged six months or older
- Chronic heart disease aged six months or older
- Chronic kidney disease aged six months or older
- Chronic liver disease aged six months or older
- Chronic neurological disease
- Diabetes aged six months or older
- Patients who are Immunosuppressed
- Carers
- Pregnant women - this group is at particular risk and all Midwives in the ABMU Health Board area has been given clear guidance on Flu vaccination for all pregnant women by their GP / Practice.

GPC Wales is keen to see an extra "push" on Seasonal Flu vaccination this year to convince the Welsh Government that the Seasonal Flu vaccination programme should stay with General Practice.

### **Guidance for GPs on applications for firearms licences**

The BMA has issued guidance for GPs on applications for firearms licences as follows:

"Application forms for both firearm and shotgun certificates require permission from the applicant, for the police to approach their GP, in order to obtain factual information about their medical history. Following discussion between the BMA and the Association of Chief Police Officers (ACPO) in 2010, it was agreed that when an individual applies for a licence, or applies for a renewal of a licence for a firearm or shotgun, a letter will be sent from the police to his or her GP informing them of the fact. Ordinarily, certificates are renewed every five years.

The purpose of the letter is to give the patient's GP an opportunity to alert the police to any medical concerns that may have a bearing on the individual's ability to safely possess a shotgun or firearm. If there are no concerns, the letter does not need to be replied to. If, in the GPs view, the patient presents an immediate risk of serious harm to themselves or others, consent for any disclosure will be required from the patient.

If the GP does wish to disclose a concern, and the patient refuses consent to any disclosure, the refusal will have to be relayed to the police, thereby potentially jeopardising the application.

Following advice from the Information Commissioner, copies of the original letter from the police should not be retained in the medical record,

but doctors are at liberty to make a note in the medical record, as they would with any other request for health information by a third party."

### **GP locums working for agencies as from 01 October 2011**

After 12 weeks in the same job, a GP locum will be entitled to the same durations of working time, rest periods and breaks, annual leave and public holidays, night working, paid time off for antenatal care, pay (including basic pay), overtime payments, shift/unsocial hour premiums, holiday pay, bonus/commission related to individual effort and vouchers with cash value (but not salary sacrifice). More information can be found on the Londonwide LMCs site at: <http://bit.ly/noehms>

### **Doctors providing assistance at sporting events**

The BMA's Board of Science has published an updated version of its resource for doctors providing assistance at sporting events and this can be accessed at [www.bma.org.uk](http://www.bma.org.uk)

The aim of this resource is to provide information for doctors who are interested in providing medical care at sporting events in a professional (whether paid or unpaid) capacity. In particular, it emphasises the importance of a doctor contacting their medical defence organisation prior to assisting or providing care at a sporting event.

This resource was first published in 2001, with an updated version in 2009. This latest edition, published in August 2011, includes specific guidance for doctors providing medical care at the 2012 Olympic and Paralympic Games.

**Next LMC meetings:** *LMC Executive 7.00pm Tuesday 11 October 2011 - Venue TBC*  
*Full Committee 7.00pm Tuesday 08 Nov 2011 - Towers Hotel, Jersey Marine*  
*LMC Executive 7.00pm Tuesday 13 December 2011 - Venue TBC*