

# MORGANNWG LOCAL MEDICAL COMMITTEE LTD

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## LMC NEWSLETTER

### AUGUST/SEPTEMBER 2015

#### LMC NEWSLETTERS

The LMC Executive team discussed the newsletter at its recent meeting and questioned its value in terms of it being the best way of disseminating information and obtaining feedback and perhaps more importantly, interacting with you. We are planning to develop a communication strategy that will facilitate this and will be updating and modernising the LMC website to provide;

current and up to date information about the LMC.  
details of practice vacancies and locum availability  
twitter feed /blog / facebook

In the meantime please let us know by email [morgannwglmcld@btconnect.com](mailto:morgannwglmcld@btconnect.com) \* if you think the newsletter should continue along side the above and how often it should be circulated. We shall assume, in the absence of a reply that;

- a) you do not have an opinion  
or
- b) you did not read this!

#### INAPPROPRIATE TRANSFER OF WORK FROM SECONDARY CARE:

The LMC is being copied into an increasing amount of correspondence from constituents about inappropriate work being transferred from secondary care.

Examples include requests;

- to refer patients to another speciality
- to order blood investigations
- to explain blood / investigation results to patients
- to undertake treatments not considered to be part of general medical care /GMS and having then to re-refer patients to be reinstated on a waiting list
- to manage anticoagulation preoperatively

We want to monitor the above on an ongoing basis so please continue to include the LMC if you write to the speciality concerned having received such requests. We have also written to the ABMU Medical Director to request that guidance previously circulated is reissued to Consultants and junior staff. A standard template document is attached which you may find helpful and a copy can also be found in the document section of the website – <http://www.morgannwglmc.org.uk>

#### WORKLOAD ISSUES / SUSTAINABILITY PROGRAMME

Members of the LMC Executive team will shortly receive training for their role in the panels which will consider requests for assistance under the programme and also to consider appeals. Further information will be circulated as soon as it is available. Members of the team have already been involved in several Practice Support Visits which will continue as part of the programme when support is requested by Practices.

### **OOH Service – SPECIAL PATIENT NOTES (SPN)**

The LMC has reviewed the new Standard Operating Procedure for SPNs which is effective from 1 September 2015 and was pleased to note that the Palliative Care handover sheets can continue to be faxed as well as emailed to the service. There is an expectation that the majority will be completed electronically prior to email submission or faxing and we would encourage this process as far as it is possible. We have however, advised the OOH service that there may be a small number of occasions when a GP does not have access to an electronic copy of the Palliative Care Handover sheet which may have to be completed manually. It is **essential** that the content is legible. We have also commented that there should continue to be another handover sheet one for those patients who are not palliative/terminally ill but for whom other relevant information needs to be provided to clinicians in the OOH setting.

**DISCHARGE SUMMARIES:** Performance, which is currently poor, is being monitored by the LMC and has been identified as a significant clinical risk. The Health Board has been advised that this will be escalated to HIW if no significant improvement is demonstrated.

**CROSS BORDER ISSUES:** Currently being addressed through the LMC/ABMU Liaison Group

**ENHANCED SERVICES:** The LMC/ABMU Enhanced Services Steering Group is currently reviewing all LES Specifications the first of these being Care Homes / Wound Management / Substance Misuse

**DATIX reporting system:** This is just a reminder about the importance of recording incidents, accidents, risks or complements on the ABMU DATIX system which can be accessed on any AMBU PC Desktop or via the following link;

[http://7a3b7svmdatixlv/datix/live/index.php?module=INC&form\\_id=7](http://7a3b7svmdatixlv/datix/live/index.php?module=INC&form_id=7)

You should receive feedback following the submission of a report so let us know if you don't or have any other relevant feedback

### **FLU PLANNING 2015-16**

The LMC knows that GPs have already spent a considerable amount of time planning and advertising / informing patients of the upcoming flu vac campaign. Despite objections from WGPC and GPC UK WG and NHS England have decided to encourage increasing involvement of community pharmacists in the programme. The main reason cited is the alleged convenience that community pharmacies claim to offer on a 'drop in' / 'walk in' basis and during hours when surgeries are closed. GP Practices may want to reconsider their arrangements to minimise the risk of unused stock which will not be reimbursed by WG.