

LMC ViewPoint

The Newsletter of the Leeds Local Medical Committee Issue 126 – January 2006

CHOOSE AND BOOK PAYMENTS LOST

Leeds LMC understands that Leeds NE, Leeds NW, South Leeds and East Leeds PCTs were the only PCTs in the country not to achieve the July Choose and Book target, and therefore the only ones not to receive the significant incentive capital payments on offer – on average £6,000 per practice.

LMC ViewPoint understands that this failure was attributable to problems with the Leeds Teaching Hospital Trust's Directory of Services and the LMC is naturally concerned about the resultant loss of significant new investment.

The BMA's GP committee and the NHSE have almost reached agreement about proposed DES's for "Choose and Book" and for IT which will mean that most - if not all - practices in Leeds will start seriously to consider using Choose and Book in 2006. Most PCTs in receipt of incentive payments have used the money to ensure that all their practices have the IT hardware necessary to allow them to do "Choose and Book" and other "Connecting for Health" priorities efficiently.

Leeds LMC has written to the four PCTs to seek assurances that, even though they did not receive the "Choose and Book" incentive payment, they will ensure that all practices wanting to use Choose and Book will be provided with all the necessary additional hardware (e.g. dual-bin printers) necessary for successful implementation.

Leeds LMC is keen to ensure that all practices are supported as much as possible in moving forward with the IT agenda which will be clarified by both the Choice and Booking DES and the IT DES. It wants to work with the PCT to make Leeds a success story rather than a failure in the future.

If practices wanting to move forward are having difficulty in getting PCT support, the LMC would like to hear from them.

OFF-SETTING THE DEFICIT – SHA REPLY

LMC ViewPoint readers will recall that, in the December issue, we reported a £15m overspend within the SHA area and the fact that somewhat ambiguous phraseology in an SHA Board paper implied that surpluses from Leeds PCTs would be vired to make good the shortfall.

Mr Robert Cooper, Deputy Chief Executive of the SHA has now replied to the LMC's letter, calling for clarification on the topic, saying that, "The 2005/06 Finance Plan works on the basis that for the NHS in West Yorkshire to financially balance the deficit projected by Mid Yorkshire must be matched by surpluses and under-spends elsewhere within West Yorkshire." Mr Cooper goes on to explain that: "...those surpluses will remain the property of those organisations making them and deficit resolution will remain the responsibility of those organisations overspending."

The LMC remains concerned that monies intended for primary care development will not be spent this year in the light of the on-going financial crisis affecting the whole of the NHS and we will continue to monitor our local situation closely.

SICK NOTES

Following BUPA's offer to remind consultants that they should issue sick notes when discharging patients, if this is appropriate, it would be helpful if practices would let the LMC know whether they perceive any improvement in this area.

LMC ELECTIONS

The start of the new year means that it's time for the annual round of LMC elections, once more.

The elections are in two stages. First, elections are held for the seats representing GPs in the five PCT areas. When these elections have been completed, a second round of elections is held to fill vacant city-wide seats. GPs of all types - GMS / PMS; Partners / Salaried; Sessional - are eligible to stand for either type of seat.

If the number of nominations exceeds the number of vacancies, a postal vote is held, using the single transferable vote (STV). Software from the Electoral Reform Society is used to allocate the preferences expressed for each candidate. If there is more than one vacancy in a PCT, the candidate placed first by the STV system is deemed to have secured the seat with the longest term of tenure and candidates placed second and third are awarded the second- and third-longest terms, as appropriate.

A copy of the electoral roll is available for inspection at the LMC office and inquiries may be made by telephone, if this is more convenient.

The timetable for the election process is set out below:-

Date	Election Process
23 January, 2006	PCT elections called
3 February, 2006	Deadline for PCT nominations at the LMC office
7 February, 2006	PCT voting papers issued
17 February, 2006	Deadline for receipt of PCT Votes at the LMC office
20 February, 2006	PCT results announced and city-wide elections called
3 March, 2006	Deadline for receipt of city-wide nominations at the LMC office
7 March, 2006	City-wide voting papers issued
17 March, 2006	Deadline for receipt of city-wide votes at the LMC office
20 March, 2006	Full election results dispatched to all practices

LEEDS SECTION 136 SERVICE

Consultant Psychiatrist, Claire Flannigan is putting out a call to all Section 12-approved GPs to become involved in the expansion of the Section 136 service

A police pilot has been running since October, 2005 with all those detained on S136 between 5am and 5pm seen by CRHT Section 12-approved psychiatrist and CRHT ASW. Assessments are now conducted in 2 to 4 hours, rather than the average wait of 12 hours. Outcomes are now communicated directly to GPs.

The background information faxed from GPs so far has been greatly appreciated and it is hoped that this will continue in the future.

Dr Flannigan is considering options to increase the Section 12 expertise available to the service and will be contacting Section 12-approved GPs in the near future, as well as recruiting any interested GPs who wish to become Section 12-approved.

If you are interested, please contact Dr Flannigan on 0113 295 4577 or Rachel Lynam via email - rachel.lynam@leedsmh.nhs.uk

PRIMARY CARE DEVELOPMENT SCHEME

The Primary Care Development Scheme was intended to replace the “Golden Hello” scheme as a means of supporting primary care in areas where it was difficult to recruit GPs.

The funding for the scheme - which has to be spent in-year if it is not be lost – has still not been allocated to PCTs in spite of the LMC’s repeatedly pressing them for allocation criteria and a start date since the scheme was announced in the summer of 2005.

The LMC has written to the SHA seeking a clear and unambiguous commitment that the full amount of PCDS money will be released to PCTs as soon as possible.

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