

# LMC ViewPoint

*The Newsletter of Leeds Local Medical Committee*

*October 2009*

## **GP EARNINGS AND EXPENSES ENQUIRY 2007/08**

The 2007/08 GP earnings and expenses enquiry was published on 16 September, showing the predicted decrease in average net profit for contracted GPs (3.1% decrease since 2006/07 and 5.6% since 2005/06 for GMS and 2.1% decrease since 2006/07 and 3.5% since 2005/06 for PMS GPs).

Further falls in income are anticipated for 2008/09 (DDRB recommended increase in global sum only, but this was offset by reduction in Correction Factor, equating to a 0% award for the vast majority of practices), with further rises in expenses. There were changes to the QOF introduced in 2007/08 which had an effect on GPs' workload.

It must also be emphasised that these figures are now historic and do not reflect the increase in global sum only, with an offsetting decrease in Correction Factor and increases in expenses, in 2008/09. The BMA estimates that the effect of the 2008/09 award will be a further drop in income of 4% and that the award for this year, 2009/10, will be offset against increases in expenses and result in zero change in income.

The average income for salaried GPs had increased. We hope that the increased figure reflects practices paying salaried GPs the DDRB recommended rate of increase. The LMC continues to encourage all practices that employ salaried GPs to uplift their salaries in line with these recommendations even when practice income is falling.

- **Investment in General Practice 2003/04 to 2008/09**

In England, annual investment was £7,957.4m, compared to £7,867.2m spent in 2007/08 (an increase of 1.1%). The large increases in investment in general practice between 2003/04 and 2005/06 have not occurred in more recent years.

It is important to note that much of the increased investment in general practice was via streams such as premises and IT and therefore not directly income for practices to provide patient services.

## **QoF RESULTS FOR 2008/09**

The QoF results for 2008/09 were published on 29 September 2009 practices in England achieving 954.2 points (95.4% of the 1000 points available) compared with 96.8% of the available points in 2007/08.

The continuation of high scores in the clinical domain shows that patients are still getting extremely good care from their GP practice. Much of this work is preventative which means patients are benefiting from early diagnosis and treatment.

The overall result has gone down slightly as a result in a drop of the Patient Experience domain which itself was caused by the Patient Experience Survey being incorporated into the QoF

The dip in the Patient Experience QoF scores is a direct result of changes to the funding of the Patient Experience Survey and not because quality in this area has dropped. Practices got very similar, high patient satisfaction results to last year's Patient Experience Survey, yet this year they have lost points and resources.

## PANDEMIC FLU UPDATE

The latest news on flu is available on the BMA website <http://www.bma.org.uk/> including an updated Q&A, in the section '[pandemic flu information for GPs](#)'.

- **Register of available Locum GPs**

NHS Leeds are looking to offer a form of contract with locum GPs who are willing to be included on a register of available doctors able to support those practices most affected by swine flu. National negotiations have clarified the in-service benefits.

The idea is that the register will list those doctors who are willing to be assigned work in practices whose usual GPs are absent due to swine flu. If you are interested please contact Dr Simon Balmer on 305 9831 or email [Simon.Balmer@nhsleeds.nhs.uk](mailto:Simon.Balmer@nhsleeds.nhs.uk)

- **Vaccinations for sessional GPs**

Please ensure that you bring your smart card with you when attending one of the PCT organised sessions.

### **New guidance on use of Antiviral Vouchers and a change in the recommended dose for oseltamivir for children aged 6 months up to 1 year**

The dosage of oseltamivir (Tamiflu) for babies aged 6 months to 1 year has been changed by the European Commission from 2 mg to 3 mg per kg body weight twice daily for 5 days. New antiviral authorisation vouchers have been sent out by the DH to PCTs from 23 September. These will be used to prescribe the antivirals Tamiflu and Relenza free of charge from antiviral distribution centres.

Guidance on how to use the new forms is available on the DH website:

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_105998](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_105998)

The pandemic flu Q&A has also been updated to reflect the information above and a pandemic flu glossary has been added:

[http://www.bma.org.uk/health\\_promotion\\_ethics/influenza/panflugp/panfluga.jsp](http://www.bma.org.uk/health_promotion_ethics/influenza/panflugp/panfluga.jsp)

### **Oseltamivir – patient decision aids**

Oseltamivir PDAs are now available on the National Prescribing Centre website:

[http://www.npci.org.uk/therapeutics/infect/commonintro/patient\\_decision\\_aids/patient\\_decision\\_aid\\_1.php](http://www.npci.org.uk/therapeutics/infect/commonintro/patient_decision_aids/patient_decision_aid_1.php)

## FINAL SENIORITY FIGURES

The NHS Information Centre has published the Final Seniority Figures for 2004/05 and 2005/06 for GMS in England and Wales. The figures for England are: £81,123 and £91,123 respectively.

After taking legal advice, the Department of Health has decided that the NHS Information Centre should not work out a Final Seniority Figure for PMS because PMS contracts are local contracts. We therefore advise PMS practices that they should also use the GMS figure.

Further details about how the Final Seniority Figures have been calculated are available on the NHS Information Centre's website at [www.ic.nhs.uk](http://www.ic.nhs.uk)

These figures will mean that some GPs, including some who have now retired, will have to pay back money that was over paid, whilst others may be owed money. WYCSA expect to start reconciling payments this month.

## OUT OF HOURS SERVICE

It is now seven months since the OOH contract was re-tendered and the LMC continue to closely monitoring the level of service that is being provided. We would welcome your views, positive or negative, from doctors who work for the service and from practices whose patients have had the need to use the service. Please provide feedback to [mail@leedslmc.org](mailto:mail@leedslmc.org)

## NHS COMPLAINTS PROCEDURE

A document has been produced to provide practices and GPs with guidance on the requirements of the NHS complaints system, including advice on how to deal with complaints that come into the practice. This guidance also addresses some of the concerns GPs and practices may have about the way the complaints system operates and offers advice on ensuring that the system works for GPs and practices as well as patients.

[http://www.bma.org.uk/employmentandcontracts/independent\\_contractors/managing\\_your\\_practice/complaintfaq.jsp](http://www.bma.org.uk/employmentandcontracts/independent_contractors/managing_your_practice/complaintfaq.jsp)

This guidance is supplemented by the '[New complaints process FAQs](#)' which can be found on the [BMA website](#).

## TRAINING FOR SAFEGUARDING CHILDREN AND ADULTS

We would like to raise awareness of the importance for GPs to be educated to at least Level 1 for the training requirements for safeguarding children and adults. NHS Leeds is in the process of arranging a number of training sessions, details of which will be circulated shortly. We would like to encourage you to attend one of these important events. GPs may want to consider including this within their appraisal documentation and planned PDP.

## LOOK AFTER OUR NHS

The BMA continues to run its campaign highlighting concerns about the increased commercialisation of the NHS. If you haven't yet visited [www.lookafterournhs.org.uk](http://www.lookafterournhs.org.uk) and registered your support for an NHS which is **publicly funded, publicly provided** and **publicly accountable**, now is the time to do so. Every vote counts so please visit the website today, and register your support. But whatever your views, they would like to hear them!

## WELFARE ADVICE IN PRIMARY CARE

Offering welfare advice is an excellent strategy for primary care to address social, economic and environmental influences on patients' health. The service impacts on health through reduced stress, better social arrangements, and healthier behaviours.

The NHS Leeds Public Health Directorate commissions three agencies to provide welfare advice: Leeds CAB, Chapeltown CAB and the Welfare Rights Unit. They offer a total of 20 outreach sessions in GP surgeries and Health Centres, with high levels of patient and staff satisfaction. For more detail, please contact Myrte Elbers – Health Improvement Specialist (Primary Care) on (0113) 2953188 or [Myrte.Elbers@nhsleeds.nhs.uk](mailto:Myrte.Elbers@nhsleeds.nhs.uk).

A web portal was launched earlier this year by Leeds CAB and the City Council's Libraries and Information Service: [www.leedscitizensinfo.org](http://www.leedscitizensinfo.org). The site acts as a 'one stop shop' for the public and professionals regarding financial, legal and consumer issues.

## INTRODUCING THE LICENCE TO PRACTISE IN 2009

The GMC is introducing the licence to practise on 16 November 2009. From this date any doctor wishing to practise medicine in the UK will, by law, need to hold both registration and a licence to practise. If you have any questions about licensing, please email [licensing@gmc-uk.org](mailto:licensing@gmc-uk.org).

## **DVLA - Consent for the Release of Relevant Medical Information for Patients**

From the 17<sup>th</sup> August, new rules called *Consent by Assurance* are being implemented by the DVLA relating to the release of relevant medical information for patients applying for driving licences. The BMA has given agreement that DVLA no longer need to provide the patients written consent from the patient for access to the relevant parts of their records for the purposes of being granted a driving licence.

We are aware that this agreement might generate concerns amongst GPs about patient confidentiality. The GMC web site has a frequently asked questions supplement to their confidentiality guidance – [http://www.gmc-uk.org/guidance/current/library/confidentiality\\_faq.asp](http://www.gmc-uk.org/guidance/current/library/confidentiality_faq.asp)

and one query advises that doctors should:- “Obtain, or have seen, written consent to the disclosure from the patient or a person properly authorised to act on the patient’s behalf. You may, however, accept **written assurances from an officer of a government department that the patient’s written consent has been given.**”

The BMA has taken legal advice about a system of accepting such assurances from a government department, and received written assurances from the DVLA, in the form of a written legal indemnity.

## **OPPORTUNITY TO BE A SESSIONAL MEDICAL ADVISER AT NHS LEEDS**

NHS Leeds is keen to have ‘Medical Advisor’ input on a regular sessional basis to support their professional development team. The role can involve seeing through the smooth implementation of revalidation, advising the TARGET and educational programmes, helping appraisal lead team, and mentoring colleagues.

It is envisaged there will be a small team of GP colleagues who can work together, enhancing the existing team of lead appraisers, supporting the professional development programme.

- Expected commitment – form one to six sessions a month
- Anticipated remuneration - £80.00 per hour.

We realise that it is hard to balance the demands of General Practice and yet still have a portfolio of skills and interests, but we hope that some GPs will feel that this represents valuable work to undertake which ultimately supports colleagues. The opportunity lends itself to newly qualified GPs, those with educational experience, as well as long serving experienced GPs.

So if you’re interested in education, mentoring, audit or any element of professional development, please contact Damian Riley email [damian.riley@nhsleeds.nhs.uk](mailto:damian.riley@nhsleeds.nhs.uk) 0113 2033401 or 07940 754795

## **SESSIONAL GP CONFERENCE**

The BMA is holding a one day educational conference for sessional GPs entitled ‘Recognise your Talents, Realise Opportunities: Key steps for sessional GPs’ on Friday 13 November 2009.

The aim of the conference is to provide salaried and locum GPs with the tools that they need to succeed in their careers. It will be divided into three key areas:

- Step 1 - Marketing yourself
- Step 2 - Effective planning and career development: making the job work for you
- Step 3 - How to meet the challenges of revalidation.

This event will be of interest to all current salaried GPs (including Retainer Scheme GPs) and GP locums. It will also be relevant to those considering becoming a salaried or locum GP. The cost to attend is £65 + VAT for BMA members and £225 + VAT for non-members.

We are pleased to be able to offer to fund two sessional GP BMA members to attend, plus travelling expenses. Please contact the Leeds Office for further information.

For further details, including details about how to book, [http://www.bma.org.uk/whats\\_on/SESSGP09.jsp](http://www.bma.org.uk/whats_on/SESSGP09.jsp)

### **GP Trainees Subcommittee Chairman and Deputy Chairman**

GP trainees will be interested to know that Saira Malik has been elected as Chairman of the GP Trainees subcommittee for the 2009/10 session, and James Parsons has been elected as her deputy. The subcommittee held its first meeting of the session this week, where they discussed a wide range of topics including this year's GP trainees' DDRB evidence, NHS Employers' current scoping study to review the effectiveness of the contract for doctors in training (see next article), the RCGP's development of a business case to support an extension of GP Training to five years, and the organisation of the 2010 'Conference for GPs to Be'.

The subcommittee will shortly be circulating an e-bulletin to GP Trainees giving a detailed update on its first meeting of the session.

### **NHS Employers Review of Effectiveness of Contract for Doctors in Training**

NHS Employers are undertaking a review of the effectiveness of contracts for doctors in training. The main thrust of their review is junior doctor hospital contracts, but they are also looking at "the interface with contractual arrangements for doctors and dentists in the practice/community settings of GP or dental vocational training".

The GPC and JDC have been asked to contribute to the review, and to help they are seeking the views of GP trainees and Junior Doctors. To let them know what you think about your current contractual arrangements, please visit the BMA website:

[http://www.bma.org.uk/employmentandcontracts/employmentcontracts/junior\\_doctors/jdcontractscopingcampaign.jsp](http://www.bma.org.uk/employmentandcontracts/employmentcontracts/junior_doctors/jdcontractscopingcampaign.jsp)

### **NHS JOB WEBSITE**

Agreement has been reached with NHS Leeds for those practices who wish to advertise their vacancies on the NHS job site. Please note, however, that there is a cost involved and this will need to be negotiated on an individual basis. Contact NHS Leeds direct for further information.

### **OLD AND UNWANTED BNFs**

Just a reminder whilst you are still unwrapping your new BNFs issue 58, that you can recycle your old BNFs issues 56 & 57 via the Pharmaid scheme in November. It appears that many developing countries in the commonwealth are unable to fund supplies of the new BNF and rely on the slightly outdated ones we cast off.

### **WEIGHT LOSS PROGRAMMES**

Some practices have recently brought to our attention that there has been an increase in weight loss programmes which are advising their clients to consult their GPs both prior to and during the diets. Just to confirm, this is private work and therefore practices are entitled to charge for this service accordingly.

---

## **COMINGS AND GOING**

*A warm welcome to.....*

*Dr Mallika Ponnusamy, salaried GP who has recently joined Whitehall Surgery, Wortley Beck Health Centre*

*Dr Deborah Shrimpton who joins Dr Lightfoot and partners early September under the Retainer Scheme*

*Dr Chris Barraclough who joins Grange Medicare Ltd on 1st September*

*Dr Jamie O'Shea has joined Manor Park Surgery as a new partner*

*Dr Ikram Haq, salaried GP, Dr Sahar Alikhan who has returned from maternity leave as a Partner and Dr Geraldine Actom who joins as a Partner at the City View Medical Practice*

**Congratulations to.....**

*Dr Nina Amedzro from Whitehall Surgery, who is now on maternity leave*

**Good bye and best wishes to...**

*Dr Ravi Sood who left Grange Medicare Ltd at the end of August*

---

New useful documents on [www.leedslmc.org](http://www.leedslmc.org)

- GPC News Issue 2 – Sept 09
- Referrals to complementary therapists May09 (updated)
  - Local Involvement Networks (LINKs) Sept09
  - The child death review process – July 09
  - Focus on Improving GP services July 09

---

LMC ViewPoint is published by Leeds Local Medical Committee  
2 Farrar Lane, Leeds, West Yorkshire LS16 7AA  
Tel: 0113 295 1460 Fax: 0113 295 1461 Email: [mail@leedslmc.org](mailto:mail@leedslmc.org) Website: [www.leedslmc.org](http://www.leedslmc.org)