

WINTER PRESSURES AND FLU PLANNING

Now that we have reached high summer, it is time to get really serious about Winter Planning!

We would like to remind Practices that now would be a good time to review and, if necessary, update their Business Continuity Plans.

We suggest that all Practices plan for the contingency that we might get as much snow next winter as we had last winter. We suggest that Practices look at plans for getting staff into work in bad weather and the possibility of staff needing to stay overnight either at the Practice or nearby. It would also be worth individuals thinking about whether there are any alternative work places that they could help out at that might be more easily accessible to them than their own Practice in the event of very severe weather conditions.

Flu immunisation remains a vital part of our winter preparedness plans and we hope that all Practices will do their very best to hit or exceed the targets for elderly people and people in the ‘at-risk’ groups.

Much work is currently being done to ensure that our midwifery colleagues are fully on-board with the need to get the message across to pregnant women that they are particularly ‘at-risk’ and that the benefits of immunisation clearly outweigh any theoretical risks.

CENTRAL PROCUREMENT OF SEASONAL FLU VACCINE. The Department of Health published a consultation on the central procurement of seasonal flu vaccine today, 25 May 2011. This document asks for comments on the proposal that the DH should procure all seasonal flu vaccine for the seasonal flu immunisation programme. You can find this document and submit a response at <http://www.consultations.dh.gov.uk/> These proposals do not affect the 2011/12 flu immunisation season. The consultation closes on **17 August 2011**.

LMC BUYING GROUP

If Practices have mislaid their log-in details for the LMC Buying Group, they are available from Nottinghamshire LMC - <http://www.nottinghamshirelmc.co.uk/contact-us>

PATIENT PARTICIPATION DES—ACT NOW!

For Practices participating in the DES, patients must be consulted to gain their views about issues that are of priority to the practice and these must be included in a local practice survey. The LMC would like to remind practices that the results of the survey have to be publicised on the practice website by **31/03/2012** in order to qualify for payment. Arrangements should be put in place as soon as possible to glean patient’s views and comments.

Page 10 of the BMA’s PP DES Guidance lists the DES requirements. http://www.bma.org.uk/employmentandcontracts/independent_contractors/enhanced_services/patientdes.jsp

FAQs and online resources for practices have now been published on the BMA website:

http://www.bma.org.uk/employmentandcontracts/independent_contractors/enhanced_services/patientpartdes.jsp

CARE PATHWAYS FOR OUTPATIENT REFERRALS AND EMERGENCY ADMISSIONS INDICATORS (QP6-QP11)

Following a number of queries asking whether the care pathways for Outpatient Referrals and Emergency Admissions indicators need to be new or not, please see the following clarification of the issue.

The QOF guidance (fourth revision), p168, http://www.bma.org.uk/employmentandcontracts/independent_contractors/quality_outcomes_framework/gofguidance2011.jsp which is in the SFE, varies slightly to the joint GPC / NHS Employers supplementary Quality and Productivity guidance issued in May http://www.nhsemployers.org/SiteCollectionDocuments/QP_supplementary_guidance_and_FAQs_bt270511.pdf

For the avoidance of doubt: There is therefore some flexibility for practices to use developing pathways already in existence as long as they are in the development phase as far as the practice is involved. What you cannot do is to designate a pathway you already use as a “new” pathway for the purpose of QOF.

INR TRAINING

CRH are running a 1 day INR course on 13th October for up to 35 people at £250 per delegate. (They may run this course 2/3 times a year). Andrew Ebbage has sent further information out to Practices. To book contact Helen Cooke, 01246 512240 or email her at helen.cooke@chesterfieldroyal.nhs.uk.

Advertisements**HOLLYBROOK MC, HEATHERTON, DERBY**

We are looking to recruit a GP for 4/6 sessions per week worked over 2/3 days who will contribute to the on-going development and growth of our expanding APMS practice. We currently have 10 GPs, 3 registrars, 2 Nurse Practitioners and 8 nurses working from modern, purpose built premises across two sites with a list size of 15,400.

Application by CV to Deborah Partridge, Practice Manager, Hollybrook Medical Centre, Heatherton, Derby DE23 3TX or by e-mail to Deborah.Partridge@nhs.net. Telephone 01332 523300 for an informal chat. Closing date 31 August 2011.

STAFFA HEALTH - TWO GPS REQUIRED

Permanent: Salaried GP 4/5 sessions from Oct.

6 months: GP for 6 months from Nov 2011 - 8 sessions

Wanted two enthusiastic GPs to join our friendly innovative semi rural practice. Provide services over 4 sites, to 15,800 patients using EMIS PCS. Paper light, Teaching Practice, high QOF achievement and active members of Hardwick Health Consortium. Offer the usual employment benefits such as pensions, 6 weeks' holidays. Informal enquiries and visits welcome. To apply send CV with covering letter stating why you are interested to V Beattie, Practice Manager. valerie.beattie@nhs.net. Staffa Health 189 Birkinstyle Lane, Stonebroom, Alfreton, Derbyshire DE55 6LD Closing date 22 August 2011.

WHITEMOOR MC, BELPER

GP Locum required (7-8 sessions) Oct - Dec 2011

Whitemoor Medical Centre is a GMS Practice with 6 Partners and 2 salaried GPs, and a list size of 12,500 patients situated in and around the Belper area. A dynamic forward thinking, high QOF achieving Practice, and provide excellent facilities for staff and patients, in our purpose built premises. EMIS PCS clinical system with Voice Connect and Internet automated appointment booking. Due to changes in the Partnership we require a Locum GP (7-8 sessions per week) for 3 months from October - December 2011. For further information please contact Sue Latham, Practice Manager on 01773 881140. To apply, please email CV and covering letter to lindaclarke2@nhs.net

DHU - SALARIED DOCTOR

Salary: Negotiable

Location: Derbyshire

Vacancies for experienced GPs in particular for those willing to work occasional overnight shifts. In joining DHU we offer a comprehensive induction programme and training in the use of Adastra our IT system. Well respected and high quality team and receive a competitive salary pro rata to hours worked. We are able in addition to offer NHS pension on top of the payments. Please contact Laura Spencer, HR Assistant on 01332 545666. **Closing Date:** 5th August 2011

ARE YOU A GP JUST COMING OFF SCHEME?

If you're looking to join a **fast growing, dynamic and innovative** organisation with **great career opportunities... One Medicare is that organisation.**

Opportunities for full time or sessional GP work- pro rata'd package: £79,000 - £85,000 (includes NHS pension) + time and a half payment for weekend working

For more information, please contact Georgie at careers@onemedicare.co.uk

Burton VTS GP looking for work Burton/Derby - Contact d.kidder@nhs.net. Practices to contact direct if interested. (Usual GP employment checks should be followed).

ON-LINE EQUALITY TRAINING

Anita Thomas at Derbyshire County PCT has provided details of the above flexible course. This will enable staff based in GP practices to be up-to-date on the relevant law that relates to promoting accessible and inclusive health services for all and to help ensure compliance with the relevant CQC standards. Click on <http://www.skillboostersonline.com/nhsderbycounty/public/userregistration.aspx> and provide your email address as the user name and select your own password. (the key course to complete is Equality Essentials).

Chronic Kidney Disease FAQs

The GPC and NHSE have just published an updated set of questions and answers in relation to chronic kidney disease and the Quality and Outcomes Framework (QOF) indicators.

In particular, the updated guidance includes new sections on 'management of CKD: a summary' and on stages and complications of the disease. It also includes two new annexes on 'what should practices do if they do not have access to eGFR?' and a 'glossary of terms' at the back of the document.

The updated guidance can be accessed at

http://www.bma.org.uk/employmentandcontracts/independent_contractors/quality_outcomes_framework/faqkidney.jsp

REFRESHER TRAINING IN TAKING CERVICAL SMEARS

The GPC and RCGP have concerns that a number of PCTs insist that all GPs working in their areas undertake either a half day or a full day's update training in taking cervical smears. Many have been told that this is a contractual requirement and therefore mandatory and others that successful completion of such a course is a requirement of their PMS contract.

The GPC and RCGP believe that this is an unreasonable requirement, given that the training for undertaking cervical smears is already included in the GP curriculum. If a GP felt that he/she required refresher training in taking cervical smears then they could obtain this through their continuing professional development either through attending an appropriate course or using other training materials. Both bodies will be writing to the DH and NHSE, asking that this practice should be discouraged.

Latest advice - Past month GPC information:

- * Conference summary
- * Chronic Kidney Disease

Further details from the LMC office or www.bma.org.uk

How to contact us

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