

Absence from exams

Now that the exam season is here, you have probably been asked give "medical certificates" to those who happen to fall ill at the time of their examination.

This always comes up each year and basically the GP can only certify sickness if he or she actually saw the patient on the day in question, otherwise the exam centre can certify the validity of the absence or the patient/parent can self certificate. There is of course no obligation to provide a short term certificate.

We are grateful to Wessex LMC who contacted the Joint Council for Qualifications which regulates the exams and was referred to their guidance on the subject which is available at <http://www.jcq.org.uk/attachments/published/538/Final%20%20RAG%2007%2D08.pdf>

The relevant sections on special considerations are 10, 11 and 12.

The parent/child should fill in the Application for Special Consideration, Form 10, which is available near the end of the JCQ document. Form 14 is the self certification form, which is also available there. This has a space for the doctor, nurse or practice receptionist to fill in if they actually saw the patient, The patient/parent may also provide a medical report, but this is not essential. As it is not a prescribed certificate you are not obliged to provide a report, and a charge may be made for any report pro-

GP2GP



GP2GP transfer of electronic records is growing at an exponential rate and is threatening to outstrip the ability of suppliers to train up practices. The GP2GP team have produced some guidance to assist practices <http://www.connectingforhealth.nhs.uk/systemsandservices/gpsupport/gp2gp/goodpractice>

This guidance is particularly important now that we are beginning to see more EMIS to InPS and vice versa transfers.

Annual Conference of LMCs 2008

I have been attending the annual conference since 1982 and this was one of the most exciting and positive conferences I can recall. The mood of the conference was underpinned by the success of the Support Your Surgery campaign. 1.2 million signatures were collected in three weeks and the petition was handed in at 10 Downing Street on the first day of the conference by Laurence Buckman, Chairman of GPC, Natalie Teich, Patient Liaison Group Representative on the GPC, Prit Buttar, Chairman of the GPC Communications Group and Beth McCarron-Nash, campaign mastermind.

Laurence's keynote speech was resounding in the extreme and received standing ovations, not only at the end but also on two occasions in the middle – something I have never seen before. Laurence made it clear that the BMA and the GPC would do all they could to support the highly valued individual relationship between clinician and patient in this, the 60th year of the NHS.

Derbyshire's motion that "Conference has no confidence in the UK government's stewardship of the NHS" was carried overwhelmingly.

Professor Steve Field, Chairman of Council of the RCGP, made an excellent speech as a invited speaker, introducing the themed debate on the Darzi Reviews. It is heartening to see that the GPC and the RCGP have similar aspirations for the future of the NHS and that they are committed to working together. The speaker at the conference dinner was Jo Brand (an ex-community psychiatric nurse, but probably somewhat different from the ones you come across in your day to day practice!)

John Grenville

From Evidence to Excellence

Here is a weblink to East Midlands SHA's 'vision' that was published on 6 June 2008 as part of the NHS Next Stage Review:

<http://www.eastmidlands.nhs.uk/welcome/our-nhs/vision-launch>

Fees for reports to Occupational Health Department, Derbyshire County Council

The Corporate Resources Department of Derbyshire County Council approached the LMC when they realised that the Collaborative Arrangements were no longer in force regarding payments for reports requested by their Occupational Health Department from GPs.

At a meeting with Maxine Cooper of the Corporate Resources Department John Grenville explained that the LMC was unable to negotiate on behalf of practices, nor to recommend a fee structure to her or to practices. He did say, however, that if she were to suggest a fee that the County Council might be prepared to offer, many practices might be prepared to accept that fee without wishing to enter a prolonged negotiation with the County Council.

The meeting considered the level of the collaborative fees last set by the DDRB, the interval since there has been any uplift and the fact that practices have seen no uplift to their resources in the past three years.

Maxine Cooper has subsequently contacted the LMC to say that the County Council is prepared to pay, without discussion, a fee of £38 for a short report from the notes to their Occupational Health Department and a fee of £72 for a lengthy report. She has confirmed that these fees will be uplifted on 1st April each year in line with the Retail Price Index.

Clearly, it is for practices to decide whether they wish to undertake work for the Occupational Health Department at the County Council at these rates. This message is simply to bring to your attention the offer by the County Council.

Payments update

There remains uncertainty about the legality of the process for implementation of the DDRB recommendations on the uplift of global sum and reduction of the correction factor. This has been raised with the Department of Health and further expert legal advice is being sought. While this is ongoing, the implementation of the new clinical DESs continues to be in abeyance. DESs for Flu, Childhood Immunisation, Minor Surgery, and Violent Patients remain in place but DESs for Access and Choose & Book have disappeared.

In the interim, Derby City PCT and Derbyshire County PCT have set up Local Enhanced Services (LES) for Extended Hours and Choose & Book. In

Derbyshire County PCT the latter is called Quality Referral & Booking LES and includes clinical review of referrals.

Payments for 24/48 hour access to GP services will be included in QOF. These points will be dependent on the results of access questions in the new patient experience survey on 48 hour access and advanced booking. There will be 23.5 points if 70-90% patients indicate that they were able to obtain a consultation with a GP within 2 working days. There will be 35 points if 60-90% patients indicate that they were able to book an appointment with a GP more than 2 days ahead.

Support your Surgery

Many thanks to practices who provided the LMC with information about the number of signatures they gathered. Just over half of Derbyshire's 133 practices sent us a final number and this gave a total of 20,316 signatures (2% of the patient population in Derbyshire).

The largest percentage of patients and overall number was gathered by Hema Medical Centre in Derby, but the following practices all got signatures from over 10% of their patients: Moss Valley Medical Centre, Gomersal Lane Surgery in Dronfield, Mickleover Surgery, The Poplars in Castle Gresley, The Maples in Staveley, Eden Surgery in Ilkeston, Heartwood Medical Practice in Swadlincote North Wingfield Medical Centre and Barlborough Medical Practice.

Latest advice

In the past month GPC has issued the following:

Appendix to maternity guidance

Further details are available on application to the LMC office or on the BMA website www.bma.org.uk

How to contact us

Derby & Derbyshire LMC Ltd office is at Norman House, Friar Gate, Derby DE1 1NU. Our telephone number is 01332 210008, fax 01332 341771. Our email address is now office@derbyshirelmc.co.uk. The two Practice/PCT Liaison Officers are Melanie Beatham and Kate Lawrence who will continue to liaise with the same North and Southern practices as before the PCT reorganisation. Their email addresses are: melanie.beatham@derbyshirelmc.co.uk and kate.lawrence@derbyshirelmc.co.uk.

