



### CQC Inspections - Media Reports

Following the recent CQC press release about its inspections of General Practices and the subsequent very negative press coverage, we wish to reassure Derbyshire Practices that the vast majority of inspections in our area have had positive outcomes. Much of the reporting was inaccurate but; despite the best efforts of GPC, Area Team and CCGs to correct the inaccuracies, no retraction has been published. Many of the problems highlighted by CQC in its press release were corrected by the practices concerned within a few days of the visit but this was not acknowledged by CQC in the material it released to the press. We have met with our Area Team who have advised us that they have reminded local CQC Inspectors to advise them of their visit to a Practice so that they can offer Practices support should they need it.

### Fit Notes

If a condition has lasted longer than 6 months, a fit note can be given for any clinically appropriate period up to 'an indefinite period'. In case of those under appeal the LMC recommends you write 'until the appeal/adjudication process is complete' in order that you do not have to see the patient again (**with kind acknowledgement to South Staffordshire LMC**).

### The Criminal Injuries Compensation Authority (CICA)

The Criminal Injuries Compensation Authority (CICA) is a government body which provides compensation to blameless victims of violent crime and relies on evidence from the medical authorities to help its work. As a result of the Government consultation "Getting it right for Victims and Witness", the Criminal Injuries Compensation Scheme (the Scheme) was revised on 27 November 2012. Under the new provisions of the 2012 Scheme the applicant must now obtain and pay for the initial medical evidence to up to a maximum value of £50.

### "MAKING A DIFFERENCE"

A few snippets of topics on which the LMC have recently actively pursued Practices interests:

- ♦ We have worked collaboratively with Notts and Derby Area Team to help handle disputes and speed up the payment process.
- ♦ Helped to reduce workload for practices by liaising with Nikki Hinchley from GEM and the Area Team with retrospective Read coding requests from HSCIC.

### Action on Hearing Loss

One in six of the population has some form of hearing loss, rising to over half of people over 60 years old. This is a condition affecting a high proportion of patients. Action on Hearing Loss (formerly RNID), have produced [guidance for GPs](#) to help make surgeries more accessible to people with hearing loss.

### CQC New Model for Inspection from April 2014

CQC now have 3 Chief Inspectors in post with Professor Field heading up primary care to include Dental, Pharmacy and Optoms. The 3 Chief Inspectors will have deputies who in turn will have Inspection Managers. A new model in acute hospitals is currently being looked at to see if it works. This new model will change the way in which inspections are carried out, essential outcomes will go, to be replaced by looking at the key quality and safety issues for NHS hospitals and identifying the data there is available to measure them. They have based them around the five main questions they will ask about services:

- Are they safe?
- Are they effective?
- Are they caring?
- Are they responsive to people's needs?
- Are they well-led?

From 2014-2015 there will be a dual inspection system running. Practices will be informed as to which system they are to be inspected upon. For more information <http://cqcnnews.org.uk/?ofP5tKay-65BxZbmFx2GouDo5VQSKi2Jo>

### Medical Chambers—come and join us.

Following much interest and encouragement, members of the board and senior management team from Derbyshire Health United is leading in development of a GP Medical Chambers. We are looking to provide a Hub for practices/providers and independent free-lance GP locums. This Hub aims to provide a simple and enduring solution for Locums and the primary health care community. The GP Medical Chambers will provide in-house education, and support the requirements of Audit/QP for Appraisal/Revalidation. It will also assist/perform the associated bureaucracy for its members i.e. booking sessions/payment/pension etc. So if you are thinking of deferring your pension contributions, are recently retired, thinking of retiring, or just looking at being self-employed without the burden of paperwork and remaining up to date, then give us a call... contact [debi.slack@derbyshirehealthunited.nhs.uk](mailto:debi.slack@derbyshirehealthunited.nhs.uk) or via 0300 100 0404 for more information.

**For more details of all the vacancies advertised below:**  
<http://www.derbyshirelmc.org.uk/adverts.htm>

**Salaried GP(s)**

4-10 sessions per week

Contact: [Anette.jennison@nhs.net](mailto:Anette.jennison@nhs.net) or 01332 706930

**Salaried GP**

3 sessions per week from April 2014, with opportunity for possible Partnership.

Contact: [julie.coles@nhs.net](mailto:julie.coles@nhs.net)

**Salaried GP Maternity**

Up to 6 sessions per week from March - October 2014.

Contact: [Valerie.beattie@nhs.net](mailto:Valerie.beattie@nhs.net) or 01773 309045

**Full time salaried GP**

Contact: [Stephanie.haslam@nhs.net](mailto:Stephanie.haslam@nhs.net) or 01246 277287

**Salaried GP Maternity Locum**

Early April-Sept 2014.

Contact: [Rachel.taft@nhs.net](mailto:Rachel.taft@nhs.net)

**DHU GP Medical Chambers - Hub services for Practices/Providers Freelance Locums**

Contact: 0300 1000 404

**Practice Nurse**

20 hours per week

Contact: [elainegibbs@nhs.net](mailto:elainegibbs@nhs.net)

**Experienced Practice Nurse**

Grade F

Contact: [mikecarey@nhs.net](mailto:mikecarey@nhs.net) or 01332 777072

**Salaried/GP Partner**

6 sessions per week from April 2014 with additional sessions, from July 2014

Contact: [sharondraper@nhs.net](mailto:sharondraper@nhs.net) or 01773 571248

**Part-time Salaried GP**

with potential for Partnership

Contact: [f.bolstridge@nhs.net](mailto:f.bolstridge@nhs.net) or 01332 685116

**Locum GP**

7-8 months from mid January

**Fixed term GP**

7-8 sessions per week from 6 January -31 March 2014.

Contact: [wendy.sandner@nhs.net](mailto:wendy.sandner@nhs.net) or 01629 581586

**LMC Training Courses 2014:****NHS Pension Updates**

28 January 2014

Contact: <http://www.derbyshirelmc.org.uk/training.htm>

**Partnership & Valuation issues for GP owner occupiers**

13 February 2014

Contact: [amy.bolton@notts.lmc.co.uk](mailto:amy.bolton@notts.lmc.co.uk)

Derbyshire LMC considered shared care for dementia patients at its meeting in April 2013. The approved minute of this meeting reads as follows:

“ 11/101c) *Memory clinic*. Shared Care prescribing for Memantine and other Dementia drugs had not been agreed by the LMC on the grounds that ongoing reassessment of a patient's suitability to continue on the drug was not an activity within the skillset of GPs (as suggested in the proposed Shared Care guideline) but was a specialised area of work. Subsequently however, JAPC have agreed this Shared Care protocol and patients are being started on these drugs by the hospitals with a shared care approach. Dr Grenville advised that Shared Care decisions should be on a patient by patient basis so that Practices can write back to the Trusts as necessary, declining to take on Shared Care if they do not feel they have adequate skills. Practices may feel a moral obligation to prescribe; however, if the Practice feel that they do not have the capability to prescribe the medication safely they should refuse. It was suggested to devise a standard letter/words for Practices to use reflecting this matter; the LMC will put something on their website. Dr Grenville noted that this is also a Commissioning issue as it is a clear transfer of work from secondary to primary care and member Practices need to raise this with their CCGs. One Practice raised an issue with a particular Nursing Home who specialise in Dementia, with patients on a mixture of drugs and were unsure that they could properly support these patients. Dr Grenville advised to refer to the Mental Health Trust where necessary and to ensure that their CCG are aware and to enquire how they would like to commission the required care for this Home. It was recognised that Mental Health Assessments for the purposes of QOF are very different to the proposed new Dementia Reviews and that NICE guidance states that Specialist Clinics should start and stop any dementia drugs. It was proposed that Shared Care Guidelines should be written with/by GPs rather than the current proposal for dementia drugs, which had been devised and promulgated by the secondary care Provider Trust”.

**A suggested letter for practices to use when declining shared care can now be found on our web site [www.derbyshirelmc.org.uk](http://www.derbyshirelmc.org.uk)**  
**Dr John Grenville**

**How to contact us**

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