



Pandemic Flu

Whilst the workload from swine flu appears to be decreasing, you will recently have been forwarded by the LMC letters dated 27th January 2010 from the Chief Medical Officer and the National Director of Flu resilience.

These communications have advised that the national pandemic flu service will be stood down as of 11th February 2010, therefore from 11th February onwards antivirals will only be authorised via health care professionals using the system of antiviral vouchers or the endorsed right hand side of FP10.

The Government have, however, stressed the continued importance of vaccination of at risk groups and front-line healthcare workers and most of you will have signed up to the DES and LES for these purposes. The CMO has further stressed the importance of trying to make contact with your patients in the high risk groups who have not yet had the swine flu vaccine. These are:

- Individuals aged over 6 months in the seasonal-risk groups
- Pregnant women
- Those who live with immuno-compromised individuals

If you have signed up to the DES, you should of course be proactively contacting these patients for vaccination. Furthermore, if you have signed up to the LES for the vaccination of children aged over 6 months and under 5 years, the CMO has again asked that you make further contact with patients in those groups who have not yet been vaccinated.

Maintaining Patient Confidentiality

The LMC has been approached by Dr Kaveh Manavi, clinical lead of HIV services at University Hospital Birmingham, who has exposed a serious potential breach of patient confidentiality by a number of general practices. For sometime HIV Clinicians and GPs have been concerned that a large number of HIV patients have refused to allow their hospital doctors to pass on any clinical information to their GPs. Obviously this has very serious implications for the continuous and holistic care that should be provided. At an open forum of HIV patients recently held at Selly Oak Hospital many patients cited lack of confidentiality as their reason for refusing permission to pass on this information to GPs. In particular it was stated that some GPs' receptionists insisted that patients should give a reason why they wanted to see a doctor before they would make an appointment and that this conversation was carried out at the front desk in full earshot of other patients.

This, of course, would be a gross breach of confidentiality and could result in any offending practice being referred to the GMC. We are sure that no Birmingham GP would condone such an activity but there maybe some colleagues who are just not aware of what is occurring at their front desks. Please make every effort to ensure that your own staff are clear on the rules of maintaining patient confidentiality at all times and that your booking procedures are watertight in this respect. It may also be helpful to raise this issue within your own patient participation group if you have one, and also on your website, practice leaflet or even by surgery posters pointing out the measures you take to maintain confidentiality.

National Care Records Service Roll-Out – BEN and HOB PCTs

As you are aware South Birmingham PCT is an early adopter site for the national care records service. Despite the fact that the LMC continues to have considerable reservations about this project, particularly in respect of issues of patient consent, confidentiality and use of information, accuracy of clinical summaries uploaded and work load implications for practices, we have been represented on the South Birmingham project board in order to offer appropriate advice, and to ensure that patients' and practices' interests are protected. We are happy with the processes that South Birmingham PCT has adopted in order to implement the project. In particular, as participation by practices remains entirely voluntary, South Birmingham PCT wrote about the scheme only to the patients of those practices who had agreed to sign up to it.

It has come to our attention that BEN and HOB PCT have now applied for central funding in order to write to their patients detailing their intention to participate in roll out of the summary care record. In order to secure this funding, they have to write to patients by the end of March. The LMC is very disappointed to hear that the PCTs plan to write to all patients in advance of seeking their practices' involvement in the project. Our view is that it would be totally inappropriate to write to every patient, when their own practice might then not agree to take part. This could result in numerous problems for these practices and we believe would be counterproductive for the PCTs as it risks an enormous loss of goodwill from practices in return for what, compared to the PCTs' total budgets, amounts to a drop in the ocean of government funding. The LMC has protested in the strongest terms to BEN and HOB PCTs about this issue and we are awaiting their responses.

Use of 084 Numbers

You will have been forwarded by the LMC guidance from the GPC on the use of 084 in the NHS. This document is available on the LMC

website at www.blmc.co.uk. In summary GP contract regulations are being amended to ensure that patients no longer have to pay more than the cost of a local call to phone their practice. Practices with 084 numbers may wish to switch to local numbers, however if a 084 number is no more expensive than local geographic calls then the practice can continue to use the 084 number. If a practice is tied into a contract which does not comply with the new regulations, it must remain with its supplier until the contract terminates. Thereafter it will be obliged either to ask for a revised contract which complies with the new regulations or to find another supplier.

Safeguarding Children Procedures

The LMC has been negotiating with the City Council for more than a year to ensure that requests by Social Workers for confidential information in relation to childcare issues are correctly made; that relevant consents have been obtained or, if not, the reasons why; that the nature of the concerns have been stated and that these reports are remunerated under the "collaborative services" arrangements.

The LMC is pleased to report a successful outcome to these discussions and you will already have been sent a joint memorandum addressed to all GP practices and social workers explaining the agreed procedures that will now apply, together with the forms that will be used. Please keep copies of all these documents in order to ensure that when you are approached for information the correct steps have been taken. If, for any reason, a social worker deviates from these protocols you should quote the terms of the joint memorandum and inform the LMC of the identity of the social worker or council employee in question. The relevant documents are also available on the LMC website at www.blmc.co.uk