



supporting the **business** of General Practice

LMC Election

An election for the new Committee was held during the summer. A full list of elected and co-opted members is included. Dr Aamir Syed was elected Chairman, Dr Michael Downes Vice-Chairman and Dr Fay Wilson re-elected as Treasurer. The appointments of Dr Charles Zuckerman and Dr Robert Morley as Medical Secretary and Executive Secretary respectively were ratified. The LMC extends its warm and sincere gratitude to Dr William Walker who has served as a superb and popular Chairman for the preceding six years.

The Future of General Practice

You will be aware from recent communications that the GPC and NHS Employers tried to reach agreement on a package of changes to the GMS contract which would be acceptable to the profession. This deal was scuppered by the DoH who put forward their own offer. These included proposals to increase routine surgery hours in a manner which is totally inflexible and grossly underfunded. This could not be accepted by the GPC. These changes are clearly politically motivated and directed from Number 10. Not only does the GPC find the proposals unacceptable but the government has used the despicable tactic of threatening to impose an even worse deal should the package not be accepted by the profession. This threatened imposition includes, amongst other things, significant increases to QoF target thresholds and the removal of QoF funding to the value of 135 points, to be diverted to local extended hours deals. The implications of the government's actions reached far beyond the issues of extended hours, changes to the QoF and GP income and clearly indicate an agenda which could lead to the destruction of general practice. The GPC intends to poll the profession and you will already have been invited to a meeting on 4th February to discuss the current grave situation. Please make every effort to attend.

These difficulties over contract negotiations come, of course, in the context of the government's obsession with the convenience of the demanding few at the expense of the needy many, and fly in the face of the results of last year's national Patient Experience Survey which confirm the overwhelming satisfaction with GP access and opening hours in Birmingham as well as nationally. Last autumn Health Minister Lord Darzi issued his interim review of the NHS. This threw up no surprises; his report was clearly written in advance of a sham consultation exercise, at which the LMC was represented in one local "road show". The Government

has made clear its intention to hasten new providers via APMS contracts. Birmingham East and North and Heart of Birmingham PCTs have been chosen amongst others nationally which have been instructed by the Department of Health to open new GP surgeries and health centres. Needless to say this will have enormous future implications for all practices in the city and the LMC will continue to do all it can to ensure the best possible outcome for existing practices.

HOB "Corporate Franchise Strategy"

Another significant issue arose in November when Heart of Birmingham Primary Care Trust published a "Corporate Franchise Strategy" at its public Board meeting. This document detailed the PCT's intention to terminate all existing GP contracts and force practices to work together in 24 HoB "franchises" under time-limited contracts which were to be subject to annual performance management and break clauses. The explicit aim of the strategy was to give a perception of excellence in these new units, with implications that corporate branding and image be prioritised above true clinical excellence. Public perception was to be managed in order not to give the impression of privatisation and fragmentation. The PCT itself drew direct comparisons both with supermarkets and fast-food franchises, therefore opening itself up to ridicule. The LMC brought this issue to national attention through the GPC and it received considerable prominence throughout the national and local media. As a result of this, and following a meeting with the LMC, the PCT has backtracked somewhat on its proposals, stressing that it only ever wished new contracts to be given to local GPs rather than private providers, that no practices would be forced to participate against their will, and that it wished to work with the LMC in order to progress matters. The HoB strategy can, of course, only succeed if fully supported by its general practitioners, with whom it failed to consult prior to producing the paper in public. The LMC will continue to watch developments closely and to offer advice and support to its constituents in the Heart of Birmingham.

Patient Registration

Last summer it became apparent that the Shared Services Agency was misinterpreting guidance from the Department of Health following the decision to phase out temporary NHS numbers because of the advent of the NHS Spine. As a result the SSA was refusing to register new patients unless GMS1 forms were fully completed; this despite the fact that complete data was quite often unavailable. This action put the PCTs in breach of contract with practices. This was

compounded by a letter issued to all practices informing them that existing patients with temporary NHS numbers would be removed from practice lists after three months unless practices provided details about them. Again this was clearly in breach of contractual regulations. The LMC has already issued appropriate advice to practices and had repeated meetings with SSA and PCT representatives in order to ensure that these breaches of the regulations are put to an end and that a satisfactory resolution to the matter can ensue. If you continue to encounter further problems in this area please let the LMC know.

Closure of Birmingham City Council Care Homes

In the autumn the LMC was made aware, via the local press, that the Council had instigated a policy to close all its care homes and relocate residents. Despite this issue having enormous implications for the GP care of the patients concerned, there had been absolutely no consultation with either the LMC or any GPs on this matter. The LMC brought this to the attention of the Council and the PCTs who apologised unreservedly for this omission. A meeting was held between LMC, Council and PCT representatives in order to obtain further details about the proposals. It is likely that this issue will impinge on many practices in the future and once again the LMC will endeavour to advise practices whenever necessary. This matter also received national attention and was taken up by the BMA Community Care Committee.

National Care Records Service

As you should already be aware, South Birmingham PCT is one of the five national Early Adopter sites pilots for the National Care Records Service. The LMC has repeatedly expressed considerable concerns about the project, particularly with respect to patient consent, confidentiality and GP workload. The confidentiality issue was brought into stark relief following a number of incidents at the end of last year when various governments departments lost confidential data, and medical records went astray from a number of Trusts. The LMC has held a number of meetings with both national and PCT representatives in order to explore the aims of the project and put forward our concerns. Dr Charles Zuckerman has been nominated to represent the LMC on the project board, in order to ensure that GP and practice concerns are dealt with and that any lessons learnt from the project were acted upon appropriately. Any practice requiring help or advice about NCRS is urged to contact the LMC.

Directed Enhanced Services

A large number of practices in BEN PCT reported significant problems with regard to both the administration of and the correct and timely payments for the Access, Choice and Booking and IM&T Directed Enhanced Services. The LMC has pursued this vigorously with the PCT, in order both to help bring about improvements in the way the relevant PCT department works with practices, and to ensure that all practices have been fully advised with regard to claiming payment for all money to which they were entitled.

HOBPCT Performance Management

Advice and support to practices has been given concerning inappropriate performance management policy in HoB , where many practices have been informed by the PCT that breach of contract measures would be taken against them should they fail to reach an arbitrary PCT target for cervical cytology. Such action would, of course, be totally in breach of regulations and the PCT have been advised about this in uncertain terms. Again practices are urged to contact the LMC if they encounter further problems.

Enhanced Healthcare Services

All the Birmingham PCTs have commissioned the above private company to contact practices in order to access and obtain information from patient records. Whilst the ostensible reason for this is to identify high risk patients in order to invite them for cardiovascular screening, it is believed that EHS may also use data for other purposes. There was no consultation with the LMC prior to commissioning this company, nor have the LMC been formerly advised of the consent and confidentiality processes they will use. We have considerable concerns about allowing EHS to access patient data and are awaiting further clarification from the PCTs. In the meantime we advise every practice to think long and hard about participation in this project.

Obituary

It is with great sadness that we report the passing of Dr Dudley Heath at the age of 96. Dudley was a stalwart member of the LMC representing GPs in South Birmingham from 1951 until 1990. He also represented the LMC on the GMSC from 1958 until 1986 and was awarded a gallantry medal for his service as a Ship's Surgeon on the Arctic Convoys during the Second World War.

Members and Co-optees following the Election

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