

## Committee News

Dr Peter Wiggins has retired from General Practice and the LMC and GP Subcommittee. Peter was one of our long standing members and brought a wealth of experience and knowledge especially around IT and GP systems. We wish Peter all the best for the future.

We are pleased to announce that Drs Hilary McNaughtan and Michael Rennick have joined the Committee as co-opted members for the South West and South East.

## LMC Webpage

The enhanced services issued so far for 2015/16 are now included in the GLMC library section. Please don't forget that advertising on our vacancies page is free to all our voluntary levy paying members. Simply complete add a vacancy form on the vacancies page and submit to advertise.

## Inadvertent Removal of Children from Practice

**Lists** It is important that practices realise that being contacted by PSD and **rejecting a change of address** in regard to a patient will result in that patient being removed from the practice list. Practices should be aware that PSD may have initiated this action on being notified of a change of address by another agency such as by Child Health Pre-School/School Health Team, or the Cervical Screening program which is able to update CHI directly. Whilst this may be a concern in an adult patient the major concern is in regard to a child patient. PSD do write to parents to inform them when a child is removed from a GP's list; however receipt of this is of course dependent upon the parent/guardian living at the updated address.

The possibility of exacerbating child protection risks for vulnerable children is raised where a child is de-registered from a GP practice and not registered elsewhere. In light of this practices may wish to review their processes for managing changes of address, particularly of child patients. All practice staff and GPs should be aware of the significance of **rejecting a change of address**. It may be that the practice will want to take steps to assure themselves of the child's new address by contacting the parent or guardian and considering whether all child protection needs are addressed before confirming de-registration. Further advice on this may follow from the board but it was thought important to draw this to practice's attention at the earliest opportunity.

## Protecting Vulnerable Groups (PVGs) Practice Responsibilities

Just a reminder that practices are required to carry out PVG checks on their employed staff such as nurses, HCA and any non-clinical staff who may have one-to-one contact with patients or vulnerable groups. Information on what is required can be found on <http://www.pvgscotland.org/>

If you have not already done so can we please encourage practices to register and carry out PVG checks on new and existing staff as soon as possible.

## Medical information and insurance – Subject Access Requests

The BMA's joint guidance with the Association of British Insurers (ABI) on the use of medical information for insurance purposes has been withdrawn and is under review. The BMA is aware that some insurance companies are now requesting full medical records (via a Subject Access Request – SAR) rather than asking for a report from the applicant's GP, as previously agreed with the ABI.

In the GPC's view, requesting the full medical record for any patient is excessive and potentially in breach of the third data protection principle under the Data Protection Act 1998 (DPA) which states that personal data shall be "adequate, relevant and not excessive" in relation to the purpose for which it is processed.

Under the DPA, patients are entitled to copies of their full medical record. We are awaiting guidance from the Information Commissioners Office (ICO) regarding the BMA's concerns about the use of SARs. Until this guidance is received, the BMA would recommend that a letter is sent to any patients requesting their medical records via a SAR. The letter can be found on the BMA website <http://bma.org.uk/practical-support-at-work/ethics/confidentiality-and-health-records>.

© GPC News

## Appraisal Payment for Sessional GPs

Appraisal payments to sessional GPs, introduced this year, are to be made on a quarterly basis. The SOAR system is apparently being developed to include a claim form which will be submitted at the end of the appraisal process. This has been delayed slightly. This form will include a request for information on clinical sessions undertaken. Practitioner Services Division have advised that they will ensure that any Sessional GPs having undertaken an appraisal before the electronic

from is operational will be included (through manual checking) in the quarterly payment run. If any sessional doctors do not receive payment as outlined, please contact [sallyrichards2@nhs.net](mailto:sallyrichards2@nhs.net) at Practitioner Services Division.

**Sessional GPs Changes to Superannuation Rates and New Forms for 2015/16** Members of the NHS Pension Scheme for GP Locums should be aware that the rates for superannuation contributions have changed and this needs to be reflected in all superannuation contributions for 2015/16. GP Principals undertaking locum work will also find that the employee rate of contributions has changed. New forms for 2015/16 also require to be used.

The PSD letter outlining these changes and revised rates together with the new forms can be found on the GLMC website at <http://www.glasgowlmc.co.uk/glasgow-lmc-library/> under Sessional General Practitioners and Locum General Practitioners. The new forms can also be found at this PSD link

<http://www.psd.scot.nhs.uk/professionals/medical/guidance.html#partne>

The relevant circular detailing the changes can be found on the PSD website at

<http://www.psd.scot.nhs.uk/professionals/medical/documents/nhs-circular-2015-4.pdf>

**Keeping Sessional GPs in GGC in the Loop; Sessional GP One Day Workshop** On the 21<sup>st</sup> March the LMC hosted a well-attended one day workshop for Sessional GPs. This event forms part of our efforts to engage with Sessional GPs working in the board area and to work to reduce any professional isolation faced by this group of GPs. The day's program included an update on important service and IT developments in the board area, a presentation on the possible shape of the 2017 GP contract and BLS and Child Protection training. It was clear that this group of GPs enjoyed the learning opportunity and opportunity to network both with the LMC and with Sessional colleagues and we are grateful to Primary Care Support for their assistance in delivering this event. It is anticipated that the next meeting in this series will be held in the autumn, possibly on this occasion an evening event.

## IT Update

### Server 2008 upgrade

This will involve at least 1 day of downtime and the Board are exploring the use of EMISWeb to allow practices read-only access to existing data.

80 new servers are being procured with a pilot starting in April to finalise the process with a formal roll out plan starting in May.

### Labs/Order Comms

74 practices are currently live on GP Order Comms with the Board rolling out to 6 practices per week until end of April with a plan to be increase up to 20 practices per week after that.

### Remote Access

A solution using a soft token is being tested. This will involve logging into a website with users' GXMP credentials. A 6 digit token will be emailed to the users NHSmail box. This allows remote access to the Board's network and the practice's server.

**DMARDS and the Housebound** We have been made aware that some practices have been told that community services are unable to undertake DMARD bloods for patients not on a nurse's caseload. This is contrary to the agreement for NPT. Can you please advise the LMC office if this has been the case in your practice?

**Penrose Report and Hep C** We have been advised that practices should only experience a very small number of screening requests from patients who had blood transfusions prior to 1991 as the majority of patients who were transfused in the relevant period have already been screened.

### **Validium Counselling Services**

This is a completely confidential service for all GPs in Greater Glasgow & Clyde, including Sessional GPs on the GG&C Performer's List. Validium employ a group of experienced accredited counsellors who can be contacted 24 hours a day, 365 days a year. This confidential service can be accessed by telephone on **0800 358 4858**.

### **From all the Team at the LMC**

Dr Michael Haughney, Chairman  
Dr Alastair Taylor, Vice-Chairman  
Dr John Ip, Medical Secretary  
Dr Patricia Moultrie, Medical Secretary  
Mary Fingland, Office Secretary  
Ian Mackie, P.C.Training & Development Mgr.  
Elaine McLaren, Admin Assistant