## **GLASGOW LMC LIMITED E-NEWS November 2015**

#### ∼ommittee News

Drs Punam Krishna and David Taylor have been coopted onto the Committee. Punam is a GP principal in Shawlands and David in Anniesland.

#### **T**pdate on Men ACWY

We have had some queries following the article in the October E-newsletter regarding Men ACWY. The Men ACWY DES specification is clear about the two groups that are covered within the DES. They are the Freshers group and also the 14-18 catch up cohort. The CMO letter is available herehttp://www.sehd.scot.nhs.uk/cmo/CMO(2015)15.pdf

However Men C is also within the existing GMS Contract under Annex J. The Public Health Division of Scottish Government (SG) wrote to GP practices in August explaining the update to Annex J.

We have sought confirmation with SGPC and SG about vaccine supply. When a young person is receiving ACWY under Annex J, central vaccine stocks can be used. Therefore it is not required to issue a GP10 for ACWY in those cases.

#### **P**atient Group Directive (PGD) and Patient Specific Directive (PSD)

Practices are reminded of the importance of ensuring that their processes when operating under PGDs and PSDs meet the strict legal requirements laid out for these arrangements. In particular practices should ensure that arrangements for flu vaccination programmes conform to the legislative requirements. These are laid out clearly in the BMA guidance which can be found within the vaccine and immunisation folder in the library area of our website at <u>http://www.glasgowlmc.co.uk/glasgow-lmclibrary/</u>. Information can also be found on the NHS Education for Scotland website and in the Practice Nurse Support and Development area of Staffnet. Further guidance is being developed but in the meantime to avoid risk practices are asked to have close regard to the BMA guidance and seek further advice where necessary.

# Unnecessary Bureaucracy Patient DNAs in Secondary Care

The LMC has approached the Board with a view to reducing the unnecessary work and lost GP appointments through GPs being asked to re-refer patients who have missed a hospital appointment. We have suggested that at a time when GP services are under immense strain it would be more beneficial for the Board to amend the current processes to require that hospitals put in place an automatic re-referral system to enable patients to directly rebook a missed appointment. Such a step would save money by reducing the unnecessary costs of administration and staff time both in hospitals and General Practice, by ending the duplication of rereferring, re-vetting and re-pre-processing of referrals. We look forward to working with the Board on this issue.

## **O**olden Hellos

Practices are reminded of the Golden Hello scheme which is designed to assist recruitment of new GPs to practices. Qualifying GPs taking up positions in selected practices are eligible automatically for this payment.

For those practices that are not in the eligible group, the Board has limited ability to make discretionary Golden Hello payments. This would be in situations where new GPs, who meet the qualifying criteria, are joining practices that are able to demonstrate significant recruitment difficulties. The Board and LMC have agreed criteria by which such recruitment difficulty may be evidenced. Practices wishing to discuss the possibility of a discretionary Golden Hello payment should discuss this with Kate McGloan on 0141 211 3760 or by email at kate.mcgloan@ggc.scot.nhs.uk

#### Community Learnpro

We would like to remind practices that through Board support practices continue to have access to Community Learnpro, the online learning platform. Practices are likely to find that resources on Learnpro are useful to both clinical and non-clinical members of staff. Practice Managers and other staff may be particularly interested in modules on; Freedom of Information, Adult Protection, Conflict and Challenging Behaviour, Equality and Diversity and Risk Management. Practice Nurses and other clinical staff may be particularly interested in updates on Anaphylaxis, Capacity and Consent, Cold Chain Management, Consent Information and Influenza.

Colleagues can access Community Learnpro by requesting an activation code through the Learnpro website <u>https://community.learnprouk.com</u> or by emailing <u>Ian.Mackie@ggc.scot.nhs.uk</u> who will issue one. Please note that you will require an activation code before you can create a Learnpro account via its website.

#### Dentists and Guidance for Patients on Antithrombotic Treatments

There are Scottish Dental Clinical Effectiveness Programme guidelines (SDCEP is the dental equivalent of SIGN) about patients who are on antithrombotic treatments and about to undergo dental procedures. The guidelines are available on line and dentists contacting GPs for advice on how to manage patients on antithrombotic treatments prior to dental procedures should be referred to the SDCEP website.

#### arly Access to Medicine Scheme

This is a scheme whereby patients are given access to newly licenced drugs before they have been approved by the Scottish Medicines Consortium (SMC) for use in NHS Scotland. Pharmaceutical companies supply newly licenced drugs to acute specialities at no cost while awaiting a decision by the SMC. GPs are not involved in any monitoring associated with drugs dispensed under the early access to medicines scheme as responsibility remains with the Consultant who initiates.

#### NR Self-testing and Test Strips

Let has not been agreed that the prescribing of test strips will be undertaken in General Practice. The GAS service has been advised that such a proposal needs to be put to the Primary Care Prescribing Management Group in the first instance and until agreement is reached the issuing of test strips remains with the GAS service as there are cost and workload implications to be considered.

#### **C** andyford Service Professional Helpline

Feedback from GPs is that there has been considerable difficulty getting through to the service on the 0141 211 8130 number. The service suggests that GPs should instead use the professional helpline number 0141 211 8639. Please inform the LMC office if you continue to have difficulty accessing the service despite using the professional helpline number.

#### **C** andyford Services Clyde

Clyde patients wishing to access the termination of pregnancy service are still able to directly access TOP services at the Social Gyn Clinic at the RAH.

#### **C** uperficial Thrombophlebitis

We have recently received some queries from practices who have been asked to prescribe and administer or train patients to self-administer Clexane for Superficial Thrombophlebitis. There has been no agreement for this work to be transferred to General Practice and where Secondary Care has determined that a patient requires anticoagulation it should be initiated by Secondary Care. Should tuition on self-administration from nursing staff also be deemed necessary this should be done either by ward or IAU nursing staff or arranged by Secondary Care through DNs or treatment room staff who have received appropriate training. GPs and their PNs should not be involved with this.

#### **X /**eighing Scales in GP Practices

✔ Unfortunately your weighing scales are subject to examination by trading standards officers under the Non-Automatic Weighing Instruments Regulations 2000. We have been made aware that some local authorities are now commencing spot checks in GP practices and practices are obliged to allow trading standard officers to enter their premises to carry out checks on scales.

## **V**orkforce Planning Survey

✔ Can we once again please encourage practices to complete (if possible) the recent workforce planning survey issued on behalf of Information Services Division (ISD) Scotland? Hopefully the results of this survey will strengthen SGPC's argument for more resources for General Practice and Primary Care.

#### **V**alidium Counselling Services

▼ This is a completely confidential service for <u>all</u> 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.



#### The Cameron Fund

The Cameron Fund is the only GP specific benevolent fund. Its principal activity is "the relief of poverty, hardship and distress of General Medical Practitioners and their dependants". The fund aims to meet needs in the fullest and most practical ways possible, conscious that the circumstances in which help is needed vary enormously, from the elderly in nursing homes to young, chronically sick doctors and their families. If you wish to donate details can be found on http://www.cameronfund.org.uk/making-adonation.shtml

#### The Royal Medical Benevolent Society

The fund is designed to help any member of the medical profession registered with the GMC in the UK or their dependents (usually a widow, widower, spouse or child who has not married or remarried outside the medical profession). Details on how donate to the society can be found on http://www.rmbf.org/pages/donate.html

#### From the LMC Team

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