

# SHEFFIELD LOCAL MEDICAL COMMITTEE

# NEWSLETTER

## DECEMBER 2006

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### **LMC OFFICE CHRISTMAS AND NEW YEAR OPENING TIMES**

Please note the following changes to the LMC office opening times:

Friday 22 December: 9am-2pm  
Monday 25 December: CLOSED  
Tuesday 26 December: CLOSED  
Wednesday 27 December: 9am-5pm  
Thursday 28 December: 9am-5pm  
Friday 29 December: 9am-4pm  
Monday 1 January: CLOSED

### **HOME OXYGEN ORDERING AND CHRISTMAS**

*Article submitted by  
Peter Magirr, Community  
Pharmacy Development Unit*

The new system for providing Oxygen to patients at home has been in place since February, and after a very shaky start, appears to be settling down.

Some issues do however remain, particularly with the ordering process, and as the Christmas period approaches it is vital that clinicians know how to use the Home Oxygen Order Form (HOOF). Remember - this will be the only method of ordering Oxygen for patients at home, as the community pharmacy service is being discontinued.

A standard HOOF will provide for Oxygen within 3 working days of the receipt of the faxed order by Air Products – (the HOOF should also be faxed to the PCT on 2711468).

When Oxygen is required urgently an emergency HOOF should be completed – this provides a supply within 4 hours and should last for up to 3 days, however a standard HOOF must also be completed and faxed, ideally at the same time, for the continuation of supply (this should also be faxed to the PCT). If this is not done the emergency HOOF stays in force, at a cost of £10.44 per day – this represents a greatly increased cost to the NHS compared with the

standard charge for LTOT of £1.37 per day.

Over the Christmas period Air Products will be providing a normal service for standard HOOFs, with deliveries up to Friday 22<sup>nd</sup> December (providing the order has been sent and confirmed by 5pm on Tuesday 19<sup>th</sup>). Between Christmas and New Year normal ordering will resume on 27<sup>th</sup> and orders sent and confirmed up to 5pm that day will be delivered by Friday 29<sup>th</sup>.

Throughout the entire Christmas and New Year period the emergency service will continue to operate, and your patients should receive their Oxygen within 4 hours of receipt by Air Products of an emergency HOOF.

If you have any queries about ordering home Oxygen supplies don't hesitate to contact me, or my colleague Sue Whitham at Brincliffe House (2263113 / 2263112).

## **LMC SECRETARIAT**

Sheffield LMC Secretariat is now fully staffed as follow:

Margaret Wicks, Manager (Full Time). [manager@sheffieldlmc.org.uk](mailto:manager@sheffieldlmc.org.uk)

Laura Gilbert, Administrator (Full time). [administrator@sheffieldlmc.org.uk](mailto:administrator@sheffieldlmc.org.uk)

Tina Smith, Administrative Assistant, (Part time - Tues, Wed, Thurs). [adminassistant@sheffieldlmc.org.uk](mailto:adminassistant@sheffieldlmc.org.uk)

The first point of contact with the LMC office will generally be Laura, our full time administrator, who will ensure that all communications are dealt with by the most appropriate member of staff or member of the LMC Executive.

The LMC office is normally open from 9am–5pm Monday to Friday. Occasionally, it is necessary to close within these times, for example, for meeting attendance at other premises, staff training etc. In these circumstances this will be made clear on the LMC's answer phone system.

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### **PRACTICE BASED COMMISSIONING: PRACTICAL IMPLEMENTATION**

The Department of Health (DOH) recently issued the above guidance, which covers issues such as:

- PBC governance and accountability
- PBC financial guidance
- Support for practices and incentive schemes
- Information for PBC
- Indicators for PBC.

In addition, the DOH has issued a brief summary of the above guidance, titled Practice Based Commissioning: Practical Implementation – What does this mean for practices? Copies of the guidance can be:

- Downloaded from the DOH website:  
<http://www.dh.gov.uk/assetRoot/04/14/09/40/04140940.pdf>  
<http://www.dh.gov.uk/assetRoot/04/14/09/41/04140941.pdf>
  - Emailed to practices (in pdf format) - please email a request to Laura in the LMC office - [administrator@sheffieldlmc.org.uk](mailto:administrator@sheffieldlmc.org.uk)
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## **CHLAMYDIA SCREENING**

Practices will be aware that the Chlamydia Screening programme that had been a pilot is now being rolled out nationally and practices will be asked to participate.

Whilst the LMC Executive recognises the worthiness of this programme and the clinical importance of it, we would question whether practices should be participating in a programme that has not been resourced.

Practices may be required to help patients fill in the form, label their samples, support them when they have the results and prescribe through the practice nurses using a PGD, if the patient has a positive test.

The LMC Executive is entering in to negotiations with the PCT to arrange recognition of this extra work, possibly through a LES and would advise practices to consider this if and when they are requested to participate.

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### **HEALTH REFERENCE FORMS FOR PROSPECTIVE REGISTRANTS WITH THE GENERAL DENTAL COUNCIL**

The BMA professional fees committee has recently issued the following guidance:

The General Dental Council (GDC) has introduced a requirement that states all prospective registrants for clinical practice must have a health reference form completed by a doctor or in some circumstances a supervising dentist. All dental professionals applying for registration or restoration with the GDC must provide certain information about their health. This applies to dentists as well as dental care professionals (DCPs) including dental hygienists, dental therapists, dental nurses, dental technicians, clinical dental technicians and orthodontic therapists.

The BMA has significant concerns about the current GDC guidance notes issued for the completion of health reference forms and the wording on the actual form to be completed by the doctor. Representatives from the Association have now met the GDC on a number

of occasions to highlight these concerns and outline the difficulties that have arisen over recent months. At the meeting the GDC confirmed that they are reviewing the process and would continue a constructive dialogue with the Association on improvements that could be made to the current procedures.

The Association has received legal advice on what constitutes 'treatment' under the GMS Contracts Regulations, which applies equally to PMS and APMS arrangements, and whether it would include the completion of health reference forms for prospective registrants with the GDC. The advice given to the BMA Professional Fees Committee has confirmed that investigations arising from the completion of health reference forms, such as chest x-rays and tests to verify freedom from infection do constitute treatment. Under the GMS Contracts Regulations, the PMS Agreements regulations and the APMS Directions, Regulation 24, no fee can be charged to a registered patient for this work. However a fee can be charged for completion of the actual health reference form.

The BMA considers that GPs should normally only provide factual reports on patients and procedures that require investigation (such as freedom from infection) should not normally be carried out by a general practitioner. If an opinion is required then this should be obtained from an occupational health physician with the appropriate expertise.

If GPs believe that that they are able to complete the report using factual information then the BMA suggested rate for a report on a pro forma (with no examination) is £73.50. This fee is included in BMA fees guidance schedule 11, section A2 and only applies if the services are provided by the patient's own GP or other attending doctor. Under the Competition Act 1998 the BMA cannot suggest a fee if the service is not provided by a GP to their own patient.

There have been anecdotal reports of suggestions that complaints should be made to the GMC where a GP feels unable to issue a report; the GDC have made it clear to the BMA that this is not, nor ever has been their view. This is also the view of the Association as one of the

principles underlining registration with the GMC is that doctors must work within their level of competence. The GMC have acknowledged that the completion of health reference forms does not form part of a GP's terms and conditions and therefore GPs are not obliged to undertake the work.

Medical practitioners are advised to retain a copy of any health reference forms in the event of any future enquiries regarding the information provided.

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**MENTAL HEALTH ACT  
SECTION 2S OUT OF HOURS**

The LMC Executive has recently sought guidance from the BMA and GPC with regard to Section 2, particularly with regard to GPs being unfamiliar with patients not registered on their lists whilst working for out of hours organisations.

The guidance quite clearly states that section 2s should only be signed by doctors who are familiar with the patient or who are section 12 of the Mental Health Act approved.

Unfortunately, because of the low number of section 12 approved doctors in Sheffield, situations are arising when doctors working for out of hours organisations are being asked by Mental Health Services to cross out the relevant statements on section 2 forms and proceed with the modified form. This would appear to be outside of BMA guidelines. Although the LMC Executive has some sympathy with the dilemma of the Mental Health Services teams, we would remind GPs of the BMA guidance.

We have recently met with Sheffield GP Collaborative representatives, who agreed that no doctor should feel under an obligation to sign a section 2 form out of hours, although there is nothing to stop them doing so if they so wish.

We will endeavour to continue to have a dialogue with the Mental Health teams with regards to organising section 2s within working hours, training more section 12 doctors and using section 4s when absolutely necessary.

**WESTFIELD REFERRAL  
FORMS**

The LMC Executive has been in negotiation with Westfield with regard to the problem of patients being requested to get GP approval during a course of complimentary therapy such as physiotherapy, chiropractor treatment or osteopathy.

We are pleased to say that we have come to an agreement with Westfield on an amended form which we feel is now acceptable to GPs.

We have also requested that Westfield make it clear to all practices that they may require approval for physiotherapy, osteopathy and chiropractic treatment from general practitioners but they are looking again as to whether acupuncture and homeopathy can be received as a benefit without prior GP approval.

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**RECEPTIONIST TRIAGE**

The LMC Executive would wish to make practices aware of the latest guidance from the BMA's public affairs division in relation to triaging in general practices.

We would advise all practice managers that their practice teams would be wise to follow the principles behind this advice. A copy of the guidance can be:

- Downloaded from the GPC website:  
<http://www.bma.org.uk/ap.nsf/Content/news4nov06?OpenDocument&Highlight=2.gpc.news.november#Receptionisttrriage>
- Emailed to practices (in pdf format) - please email a request to Laura in the LMC office - [administrator@sheffieldlmc.org.uk](mailto:administrator@sheffieldlmc.org.uk)

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**CONTACTING THE BMA**

*Article submitted by Paul Bourne, Industrial Relations Officer, BMA*

Following the closure of the Sheffield BMA office last year most advisors moved to a home working arrangement. Therefore, there is a considerable BMA presence in Sheffield and South Yorkshire.

If BMA members have individual queries they should contact the

national askBMA service on 0870 60 60 828. If the query requires more detailed advice it will be filtered down to the local advisors who are as follows:

Paul Bourne – Industrial Relations Officer covering South Yorkshire

Marion Selvey – Senior Employment Adviser covering South Yorkshire

Teresa Szwedzinska – Employment Adviser covering Sheffield and Barnsley

Saiqa Ullah – Employment Adviser covering Rotherham and Doncaster.

Rachael Backhouse – Employment Adviser covering Rotherham and Doncaster.

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**GPs' SIGNATURES**

The LMC receives numerous queries from practices regarding completion of medical reports and certificates.

The LMC advises that GPs should satisfy themselves that the declarations on any forms they are signing are true, before signing. The GMC guidance, Good Medical Practice, states 'you must do your best to make sure any documents you write or sign are not false or misleading. This means that you must take reasonable steps to verify the information in the documents and that you must not deliberately leave out relevant information'.

Therefore, in order to complete even the simplest of forms, a GP might have to check the patient's entire medical record or perform an appropriate examination or test.

Carelessness or inaccurate declarations can have serious consequences for the GP with the GMC or even the police.

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**PROVIDING AND PUBLISHING  
INFORMATION ABOUT GP  
SERVICES**

The LMC has received a number of queries from practices who wish to advertise their services.

GMC guidance states that when providing and publishing information about their services, GPs must note the following:

- 1) If you publish information about your medical services, you must make sure the information is factual and verifiable.
- 2) You must not make unjustifiable claims about the quality or outcomes of your services in any information you provide to patients. It must not offer guarantees of cures, nor exploit patient's vulnerability or lack of medical knowledge.
- 3) You must not put pressure on people to use a service, for example by arousing ill founded fears for their future health.

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### **REQUESTS TO RECORD INJURIES**

The LMC continues to receive reports of patients attending surgery inappropriately for documentation of injuries at the request of either the police or solicitors. With regard to the former, the Circular FME3, issued by the Joint Negotiating Committee for Forensic Medical Examiners (dated 22 March 2001, paragraph 16), entitled Victims of Crime, states:

“forces are asked to note that victims of crime should be sent to a forensic medical examiner for the documentation of their injuries and not to a general practitioner”.

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### **PATHOLOGY TEST SURVEY**

Practices will have recently received a letter from the Clinical Chemistry Department at the Northern General Hospital requesting details of the total number of patients who attended the surgery between 1 January and 30 June 2006.

Whilst there is no obligation to provide this information, a number of practices were willing to do so provided a number of issues could be clarified. As a result, the LMC obtained the following clarification:

- What is required is the total number of patients who have attended the surgery. It is not necessary to try to determine how many of these patients had pathological tests.
- The ideal time period to check is 1 January to 30 June 2006. However, a shorter time period is

acceptable (perhaps 3 months if the numbers can be extracted electronically and 1 month if it has to be done manually). It is requested that any practice using a shorter time period notes the time period used when submitting the figures.

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### **PERFORMING CHILDREN – REQUIREMENT FOR MEDICAL CERTIFICATES**

A number of queries have been received regarding children who are performing in pantos and parents expecting GPs to sign forms at no cost to say the child is fit to perform.

Performance licences are required for some commercial work, for example if the child will be receiving payment for their performance. The Local Education Authority (LEA) will only grant a licence when they are satisfied that the child's health, welfare and education will not suffer. This requires a medical certificate and it is made clear in LEA advice that the parent may be charged a fee by the doctor for this.

There is no obligation on GPs to provide such certification and, as always, the LMC advises doctors that they should only sign what they know and can verify to be true and that non NHS work such as this should be charged at a rate commensurate with the work undertaken.

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### **WHY DO GPs SOMETIMES CHARGE FEES? YOUR QUESTIONS ANSWERED**

The above GPC guidance was updated in February 2006. The guidance aims to explain to patients that some services they request are not part of the NHS and, as such, GPs are not obliged to provide the service but may charge a fee if they do provide the service.

Therefore, practices might find this guidance useful when needing to clarify these issues for patients. A copy of the guidance can be:

- Downloaded from the GPC website:  
<http://www.bma.org.uk/ap.nsf/content/whygpchargefees?>

- Emailed to practices (in pdf format) - please email a request to Laura in the LMC office - [administrator@sheffieldlmc.org.uk](mailto:administrator@sheffieldlmc.org.uk)

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### **INFECTIOUS LUMPS AND BUMPS**

*Article submitted by Anne  
Tunbridge, Consultant Physician,  
Sheffield Teaching Hospitals*

An educational evening meeting for GPs and practice nurses, run by the Department of Infection and Tropical Medicine, Sheffield Teaching Hospitals.

#### Date

7 February 2007

#### Programme

Spot the Hamster: Management of Mumps in Teenagers and Adults

Measles – would you recognise an outbreak? (And what to do if you do)

Conspicuous Consumption: TB in South Yorkshire

#### Venue

Lecture theatre (Room F518), Faculty of Health and Wellbeing Building (previously the YMCA), Hallam University, Broomhall Road, Sheffield

#### Time

Food served from 6pm  
Meeting 7– 8.45pm

To reserve a place contact: [jenny.sykes@sth.nhs.uk](mailto:jenny.sykes@sth.nhs.uk). Tel: 0114 271 1975.

Please forward any articles, comments etc for inclusion in the LMC newsletter to the LMC office via:

Email:  
[administrator@sheffieldlmc.org.uk](mailto:administrator@sheffieldlmc.org.uk)

Fax: (0114) 258 9060

Post:  
Sheffield LMC, Media House,  
63 Wostenholm Road,  
Sheffield S7 1LE

Articles for the January 2007 edition of the LMC newsletter to be received by **Friday 12 January 2007**.