

About GP Bulletin

Welcome to the March edition of the GP Bulletin, aiming to keep you up to date with useful information for your daily work.

Please send any feedback or views on the format and content of the GP Bulletin to

GP-Bulletin@doh.gsi.gov.uk

We do read all your comments and take your concerns on board.

If someone has cascaded this bulletin to you, we would like you to receive it directly by email. Please forward your details to gpbulletin@doctors.org.uk, giving your name, practice name and GMC number.

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Contents

Top News

New GP contract	1
Expansion plans for patient Choice	1
Primary care access survey update	2

News in Brief

Record flu jabs for older people	2
The Victoria Climbié Inquiry Report	2
Epilepsy action plan	2
Childcare strategy update	3
5 A DAY fruit and veg	3

Medical Devices Agency

Diary

The Digest

All the latest news for the GP community	4
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TOP NEWS

New GP contract

A landmark new GP contract – now agreed by the British Medical Association and the employers body, the NHS Confederation – will reward GPs for higher quality care, improve their working lives and benefit patients with a wider range of community services.

If accepted by GPs in a ballot in April, guaranteed investment in primary care will rise by up to 33 per cent over the next three years.

The new contract proposes to:

- widen the range of services in primary care
- enable primary care trusts and practices to design services to meet local needs
- create new roles for nurses and other health professionals

- improve the attractiveness of primary care as a career choice for doctors
- improve the quality of services
- allocate funding more fairly
- trigger a major overhaul of GP surgeries

Copies of the contract are available at: www.nhsconfed.org/gmscontract/

A programme of roadshows to explain the new contract, organised by the BMA, will begin in March. The ballot papers will be distributed on 20 March. The ballot will close on 11 April. If accepted parts of the new contract will come on stream soon afterwards with full implementation taking effect in April 2004, subject to legislation.

Expansion plans for patient Choice

Patients will be offered a choice of hospital and a booked appointment at the point they are referred by their GP under an expansion of the patient Choice programme announced by health secretary Alan Milburn in early February.

Patient Choice will mean that by December 2005, all patients requiring elective surgical treatment will be able to choose when and where they are treated. GPs and other professionals working in primary care will help patients make their choice from a menu of providers agreed with individual PCTs. Patients will have four choices in the majority of cases.

The expansion of patient Choice follows successful pilots involving heart patients across England and cataract patients in London who were waiting more than six months for treatment.

From July, patients in West Yorkshire needing eye operations will be offered Choice when they are referred to a hospital specialist by

Continued on page 2

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Continued from page 1

their GP. A scheme in Dorset & Somerset will see Choice provided both at the point of referral and to those already on waiting lists. A similar programme for cataract patients will be available throughout the whole of the south of England this summer.

Other Choice schemes that will be operational this summer are in Greater Manchester, Berkshire, and Surrey & Sussex for patients who have been waiting more than six months for treatment.

The experience of patients who have taken part in the Choice project so far has been positive. For example, 70 per cent of patients offered Choice as part of the London cataract pilot are accepting treatment at an alternative location.

Providing this Choice for patients will have an impact on GPs in several ways:

- There will be a wider range of places to be treated including, for example, rapid access diagnostic and treatment centres (DTCs) and independent sector hospitals.

- There will be a wide range of information available to assist patients in choosing where to have their treatment. This means GPs and other members of the primary care team will be able to discuss the options more fully with the patient so that they make informed decisions.

- Use of an electronic booking system within many GP surgeries will mean that availability can be checked and a confirmed appointment for the outpatient visit can be made quickly at a date and time that suits the patient. In turn this means that there will be far fewer DNAs.

Primary care access survey update

From February the regular access survey is being conducted monthly. This brings monitoring of the NHS Plan target for 24/48 hour access into line with that for other key targets.

The first monthly survey took place on 19 February.

The definition of a primary care professional (PCP) is also being modified to allow a GP to count as a PCP if an appointment with a GP is available within one working day.

The experience of patients who have taken part in the Choice project so far has been positive. For example, 70 per cent of patients offered Choice as part of the London cataract pilot are accepting treatment at an alternative location.

National clinical director for primary care David Colin-Thome said:

“Ensuring services are accessible is a major priority for care providers and a central issue for patients.

“Providing Choice will obviously have an impact on the working environment for GPs and primary care trusts as they are the commissioners of care. However, Choice is an important part of changing the culture of the NHS to ensure that patient interests sit at the heart of the service.”

The Department of Health is planning to issue initial guidance on implementation of the Choice programme in June.

Alan Milburn’s speech is at www.doh.gov.uk/speeches/milburnfeb03choice.htm

The press notice is at www.info.doh.gov.uk/doh/IntPress.nsf/page/2003-0053?OpenDocument

This change has been made in response to feedback pointing out that; in general, patients will be content if offered an early appointment with a GP when one with a PCP is not available quite so quickly.

The change does not, however, mean that there is a 24-hour target for access to a GP. Nor does it affect the conduct of the survey by PCTs or practices.

Record flu jabs for older people

350,000 more older people were immunised against flu this winter than last year as part of the Government’s vaccination drive.

It means a total of 5.5 million people aged 65 and over were given protection by GPs and surgery staff.

Of 304 primary care trusts, 154 – more than half – had an uptake of 70 per cent and over.

The national average flu vaccine uptake has risen for each of the last three years from 65 to 68 and now 69 per cent. A long-term target of 70 per cent was set three years ago.

www.info.doh.gov.uk/doh/IntPress.nsf/page/2003-0076?OpenDocument

The Victoria Climbié Inquiry Report

The Victoria Climbié Inquiry Report was published on 28 January. The report runs to some 400 pages and has 108 recommendations. A copy of the report is available at www.victoria-climbie-inquiry.org.

uk/finreport/finreport.htm Hard copies from book.orders@tso.co.uk

Multiple copies of the summary report will be sent to all area child protection committees for onward distribution to their constituent member agencies.

Free copies of the summaries are available from Monday 10 February at doh@prolog.uk.com

Letters from the Secretary of State for Health about immediate and follow-up actions have been sent to chief executives of local authorities and health bodies.

Epilepsy action plan

A total of £1.5 million is to be spent on improving services and information for people with epilepsy, their families and carers.

The Epilepsy Action Plan

addresses key findings and recommendations of the National Clinical Audit of epilepsy-related deaths, and the Chief Medical Officer's 2001 Annual Report.

It includes developing more GPs with an interest in neurology, and improving care for pregnant women.

Two key initiatives will complement the action plan and help improve standards, treatment and care for sufferers.

The National Institute for Clinical Excellence (NICE) is developing a clinical guideline for the diagnosis, management and treatment of epilepsy, which is due in June 2004.

The National Service Framework for Long-Term Conditions (NSF) will focus on neurological conditions, including epilepsy. It is planned for publication in 2004.

www.doh.gov.uk/cmo/epilepsy

Childcare strategy update

GPs can now find details of their local childcare co-ordinator on a national database.

The Government's £70 million childcare strategy is on track to ensure all NHS staff with children have access to a co-ordinator.

There are now 125 in place, while 120 new nursery schemes have either opened or are in the pipeline.

131 NHS childcare co-ordinators develop local schemes that provide quality, affordable, accessible care to meet staff needs and advice and support. Many co-ordinators are setting up childminding schemes to provide flexible short notice and emergency cover.

More details can be found at:
www.doh.gov.uk/iwl

5 A DAY fruit and veg

Current recommendations are that everyone should eat at least five portions of a variety of fruit and vegetables each day, to reduce the risks of coronary heart disease, some cancers and many other chronic diseases. Yet average fruit and vegetable consumption

among the population in England is less than three portions a day. Consumption tends to be lower among children, and people in deprived communities.

The 5 A DAY programme is a Government programme to raise awareness of the health benefits of eating more fruit and vegetables and to encourage people to eat more. It includes work with the food industry, national and local health, education and consumer organisations, to improve access to fruit and vegetables and to provide clear, consistent information for consumers.

Resources, including a poster, portion indicator cards and leaflet, have been produced by the Department of Health to provide clear advice on 5 A DAY. They are available, free of charge, from the beginning of March.

For more information and details of how to order copies of the resources go to
www.doh.gov.uk/fiveaday

Medical Devices Agency

Medical Device Alert

■ **MDA/2003/001** – guidance. Reporting adverse incidents and disseminating medical device alerts
■ **MDA/2003/002** – Sunrise Breezy SL manual wheelchair with 16-inch (40cm) seat canvas depth

Please note: the Medical Devices Agency has introduced a new format medical device alert. This replaces the previous hazard notices, device alerts, safety notices and pacemaker technical notes issued by the agency. MDA device bulletins will continue to be published as before.

www.medical-devices.gov.uk

Diary

Older people's future

A conference Shaping Our Future? Championing Change for Older People's Services will be held at the Queen Elizabeth II Conference Centre, London, on 27 March.

Speakers will include health minister Jacqui Smith and national director for older people's services Professor Ian Philp.

The aims of the conference are to review progress of the older people's national service framework, share good practice and discuss challenges ahead.

In total, 500 of those who are championing change in older people's services will attend.

TheDigest

Did you see the news about...? If you missed an announcement or new development of interest to you, the chances are it could be listed in The Digest. Each month in The Digest we feature subjects of note including where to obtain more information.

British National Formulary March 2003

Following problems at the Pharmaceutical Press, there will be a slight delay in the central distribution. Copies should go out in the first half of April. If not received by 25 April, you should call the NHS Responseline (Tel: 08701 555 455).

Personal medical services

An action plan is being developed by the Personal Medical Services (PMS) national development team after a series of best practice events held in January.

The success of PMS in tackling health inequalities, chronic disease management, recruitment and drug misuse was highlighted.

PMS has also helped to promote skill mix and the development of new roles for nurses.

Action planning sessions brought together delegates from local areas to plan next steps and highlight to the national team their local needs.

The four finance events, also held during January, attracted excellent attendance and positive feedback from delegates.

www.doh.gov.uk/pmsdevelopment
National PMS helpline 0845 9000008
Head of team – Dr Mo Dewji 07974 072020

National development manager (south) –
Mitzy Gafos 07884 473059

National development manager (north) –
Helen Northall 07966 598765

Tobacco advertising ban

The Tobacco Advertising and Promotion Act 2002 came into force on 14 February. The Act sets out a comprehensive range of measures to reduce smoking prevalence as part of the Government's campaign to reduce smoking-related deaths and disease.

More information can be found at www.info.doh.gov.uk/doh/IntPress.nsf/page/2003-0059?OpenDocument

MSc in allergy

GPs and specialist nurses can now study for a full MSc in Allergy at Southampton University's School of Medicine.

The course consists of six taught modules and a dissertation module and can be studied on a part-time basis.

The course is run by distance learning with set teaching days at Southampton General Hospital.

www.som.soton.ac.uk/about/courses/allergy

Contact: Dr Jill Warner on 02380 796941 or jaw@soton.ac.uk or Brenda Colwell on 02380 796379, b.colwell@soton.ac.uk

Bowel cancer programme

A national screening programme for bowel cancer is to be developed under a new NHS bowel cancer programme.

The programme will also aim to speed up diagnosis of patients with symptoms of the disease, improve treatment and develop and expand the bowel cancer workforce.

The benefits and costs of different approaches to testing for bowel cancer will be investigated as the next stage in establishing a screening programme.

Bowel cancer is the second biggest cancer killer in England claiming more than 14,000 lives a year.

www.info.doh.gov.uk/doh/IntPress.nsf/page/2003-0047?OpenDocument

Smoking cessation figures

Nearly 55,000 people stopped smoking for at least four weeks last year, thanks to NHS smoking cessation services.

Figures for April to September 2002 show that 106,900 smokers set a date to stop smoking with the help of NHS smoking cessation services over the six months.

A total of 54,700 were still not smoking when followed up four weeks later – up from 53,500 over the same period in 2001.

Regional statistics available at: www.info.doh.gov.uk/doh/IntPress.nsf/page/2003-0073?OpenDocument

Launch of NHSmail

NHSmail, the new national email and directory service went live on 19 February 2003 at www.nhs.net. It is available on a 'self-service' basis to all NHS staff, and will be of immediate interest to organisations that have inadequate local email facilities.

A list of 'frequently asked questions' is at: www.nhsia.nhs.uk/nhsnet/pages/emailmessaging/nhsmail/nhsmail_faq.asp

Further information at: www.nhsia.nhs.uk/nhsnet/pages/emailmessaging/nhsmail/routemap/default.asp

Contact: Catherine Coe on 07867 801 284 or catherine.coe@nhsia.nhs.uk

Hib vaccine

A booster dose of Hib vaccine will be offered to all children aged between six months and four years to give them added protection against the disease, the Department of Health has announced.

It follows advice from the Joint Committee on Vaccination and Immunisation (JCVI) after a recent increase in cases of Haemophilus influenzae type b (Hib) disease, which can cause various serious illnesses including meningitis.

The planned four-month booster campaign is expected to start in the spring.

Parents will be invited to take children to practices for immunisation in the same way as for other vaccines.

dorian.kennedy@doh.gsi.gov.uk

Modernising cancer services

The Cancer Services Collaborative conference Modernising Cancer Services – excellence in patient care takes place on 7 March at the International Convention Centre, Birmingham.

More than 1,000 delegates are expected to attend the event, which will showcase over 40 examples of improvements in cancer services.

The event will be chaired by Jonathan Dimbleby. Other speakers include health minister Hazel Blears, national cancer director Professor Mike Richards, NHS Modernisation Agency director David Fillingham and Dr Peter Homa, director of the Commission for Health Improvement.

Supplementary prescribing

Supplementary prescribing, a voluntary partnership between independent prescribers (such as GPs) and a supplementary prescriber (nurses or pharmacists), is set to be introduced from April this year.

It is based on an agreed, patient-specific clinical management plan with the patient's agreement. Nurses have already begun training, while pharmacists will begin to train from spring 2003.

A guide is available at www.doh.gov.uk/supplementaryprescribing