

## About GP Bulletin

Welcome to the April 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](mailto: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](mailto:gpbulletin@doctors.org.uk), giving your name, practice name and GMC number.

**Editor, GP Bulletin, DH,  
Quarry House, Quarry Hill  
Leeds LS2 7UE**

## Contents

### Top News

GP role in NHS reforms .....1

Expanding range of primary care services.....2

Delivering better heart services.....2

### News in Brief

More current topics .....3/4

### The Digest

News at a glance for the GP community .....5/6

## TOP NEWS

### GP role in NHS reforms

**GPs are crucial to the modernisation of the NHS but progress in recruiting family doctors is slow, according to the NHS Modernisation Board.**

In its second annual report, the board found that considerable achievements had been made in cutting waiting times and improving the patient experience but recruiting and retaining more staff, particularly GPs, was still a huge challenge.

The GP 'golden hello' scheme has helped recruit more than 2,200 doctors since its April 2001 launch, but this was offset by the numbers of GPs leaving the NHS, mainly through retirement. Figures show that in March last year, there were 480 more GPs working in the NHS than in September 1999. The NHS Plan promised to appoint 2,000 more GPs by 2004.

The board's report, however, highlighted the contribution GPs are making to the reform agenda:

**"Primary care is one of the great strengths of the NHS carrying out around 90 per cent of its work with very high satisfaction rates."**

– 84 per cent of patients are offered an appointment with a GP within 48 hours

– up to 6,000 lives a year are being saved following an increase in the number of statins prescribed by GPs

– 600,000 procedures previously carried out by hospitals are now undertaken in primary care and by GPs with special interests

David Haslam, chairman of the council of the Royal College of GPs and a board member, said: "Primary care is one of the great strengths of the NHS carrying out around 90 per cent of its work with very high satisfaction rates.

"Although there remain significant problems with both workforce and morale, much is thriving."

Fellow member Ian Bogle, chairman of the council for the British Medical Association, said: "A national shortage of doctors lies at the root of many of the problems experienced by patients. The current GP shortage means, despite the efforts of family doctors, that some patients have to wait too long to see their GP."

The report also highlights the increasingly vital role of GPs and primary care in commissioning services that offer patients choice and fast access to quality health care.

■ The full report is at [www.doh.gov.uk/modernisationboardreport](http://www.doh.gov.uk/modernisationboardreport)

**Subscribe now** to receive GP Bulletin via email – please send your details to [gpbulletin@doctors.org.uk](mailto:gpbulletin@doctors.org.uk) giving your name, practice number and GMC number.

### Expanding range of primary care services

**New guidance to encourage a wider range of services to be developed in primary care will be published soon.**

Establishing primary care practitioners with special interest and expertise in clinical speciality areas can increase primary care capacity to undertake outpatient appointments, reduce waiting times in both primary and secondary care, helping to free up consultant time and provide a more convenient service for patients

The guidance includes a framework for Nurses with Special Interests (NwSIs) and guidelines for GPs with Special Interests (GPwSIs) in a range of clinical specialities, including sexual health, orthopaedics, diabetes and epilepsy. These follow on from the GPwSI framework and five sets of speciality guidelines published last year.

National clinical director for

primary care David Colin-Thome said: "Patient surveys, international health care trends and new technologies all point in one direction, that more services traditionally delivered in hospitals can be delivered nearer to patients' homes. Current policy is to deliver extended services in primary care settings through, for example, the proposed new GMS contract, extended forms of PMS, diagnostic and treatment centres and, initially, one million outpatient appointments in primary care.

"To this can be added developments such as patient self care and, to obviate the need for hospital admission, the development of case management and rapid access teams. Practitioners with

special clinical interests including GPs, will of course be key workers in delivering such new approaches to care."

There are already 650 GPwSIs in post and 600,000 procedures previously carried out by hospitals are now being dealt with in primary care.

The NHS Modernisation Agency's National Primary and Care Trust Development Programme has developed a step-by-step guide to establishing practitioners with special interests which will be available soon at [www.gpws.org/](http://www.gpws.org/)

The NwSI framework and the GPwSI guidelines will be available soon at [www.doh.gov.uk/pricare/gp-specialinterests](http://www.doh.gov.uk/pricare/gp-specialinterests)

### Delivering better heart services

**GPs and primary care teams are playing a major role in tackling coronary heart disease (CHD).**

A report by national heart director Roger Boyle highlights progress being made to deliver the National Service Framework (NSF) for CHD and meet the commitment to cut heart disease deaths by 40 per cent by 2010.

In primary care, the number of statins prescribed is rising by about 30 per cent a year, saving about 6,000 lives, and it is leading the way in reducing smoking, promoting healthy diets, forming local exercise initiatives and preventing and managing obesity.

The CHD Collaborative, part of the NHS Modernisation Agency, is working with clinical teams to redesign prevention, diagnosis, treatment and care systems, and has already implemented more than 2,450 practical improvements.

Easington PCT in County Durham, for example, has cut CHD deaths by a quarter by introducing a service across five practices with shared protocols and partnerships between GPs, nurses and secondary care.

Roger Boyle said: "Thanks to

the experience, expertise and hard work of dedicated people working across the NHS, major progress has been made on all the main building blocks of the CHD NSF and patients are already benefiting.

"The NSF has empowered GPs and their teams to regard CHD as their disease and they have coped remarkably well, particularly around secondary prevention. There are still substantial challenges ahead but progress to date has been very encouraging."

GP Mark Davis from Garforth, Leeds, said: "The NSF has been a major advance in the prevention and treatment of cardiovascular disease in general practice.

"It details interventions that we know are effective and emphasises the need to provide systematic and structured care."

GPs have until March 2006 to set up practice-based registers of patients at high risk of CHD and offer them advice and treatment.

■ The report is at [www.doh.gov.uk/heart/progress2003](http://www.doh.gov.uk/heart/progress2003)

### Department of Health restructuring

**An 18-month programme of change is now underway to remodel the Department of Health in line with the Government's drive to decentralise power from Whitehall to the frontline.**

It will reinforce the role of strategic health authorities as local leaders of the NHS and enable the department to concentrate on "steering not rowing" the new health and social care system.

Some departmental functions – like the Social Services Inspectorate – will transfer to new bodies who will be better placed to discharge them in future.

NHS chief executive Nigel Crisp said: "The aim is to have a department which has a productive set of relationships across the whole health and social care system, with strong links with all its leaders and a shared goal of improving health and services for patients, service users and the public."

■ A briefing pack is available at [www.doh.gov.uk/dh\\_change\\_programme/index.htm](http://www.doh.gov.uk/dh_change_programme/index.htm)

### GP contract update

As *GP Bulletin* went to press at the end of March, the ballot on the new GP contract had been delayed to enable the British Medical Association (BMA) and the NHS Confederation to better explain its financial implications.

The contract represents around £1.9 billion in extra investment in primary care, which is an increase of some 33 per cent. It will reward practices offering a quality service to their patients.

Details of the new contract are available at [www.nhsconfed.org/gms\\_contract](http://www.nhsconfed.org/gms_contract) and at [www.bma.org.uk](http://www.bma.org.uk)

### Health and Social Care Bill

The *Health and Social Care (Community Health and Standards) Bill*, which aims to decentralise the NHS, has been published.

It represents the next stage in the Government's programme of NHS investment and reform and aims to strengthen links between local communities and health services.

It will also create a new form of public ownership with the creation of NHS Foundation Trusts. These new trusts will be run locally rather than centrally, but follow national NHS standards.

The bill is at [www.parliament.uk/index.cfm](http://www.parliament.uk/index.cfm)

### Personal Medical Services (PMS) listening events: the future development of PMS

The PMS National Development Team are keen to hear your ideas about the future of PMS. It will facilitate four listening events across the country aimed at colleagues delivering primary care. The events will be interactive, and participants will have the chance to set the themes and discussion of the day to identify new ways forward and development opportunities within PMS.

This will be a ticket only event with restricted places available so early registration is essential.

They are at London on 4 April,

Bristol on 10 April, Leeds on 14 April, and Manchester on 16 April. For more information contact the PMS National Helpline on 0845 9000008.

### Older people's services – progress

The population is getting older. The number of people aged over 65 has doubled in the last 70 years. Older people are living more active lives, spending more money and demanding more from services.

The National Service Framework for Older People, launched two years ago, is an essential component of The NHS Plan. It set, for the first time, national standards for better, fairer and more integrated health and social care services for older people.

The purpose of the National Service Framework for Older People – A Report Of Progress And Future Challenges 2003 is to highlight the progress made by the NHS and social care – with support from the Department of Health – in these past two years. It signals the challenges and activities for the years ahead. This report will be available from 27 March on [www.doh.gov.uk/nsf/olderpeople.htm](http://www.doh.gov.uk/nsf/olderpeople.htm)

Or contact 08701 555 455 (quote reference 31074)  
Fax: 01623 724 524

Email: [doh@prolog.uk.com](mailto:doh@prolog.uk.com)  
08700 102870 – Textphone (for minicom users) for the hard of hearing (8am to 6pm Monday to Friday).

### Supplementary prescribing

Supplementary prescribing is being introduced this month (April). Ministers have agreed that supplementary prescribing should initially be introduced for nurses and pharmacists.

It is a voluntary prescribing partnership between a doctor and the supplementary prescriber, to implement a patient-specific 'clinical management plan' with the patient's agreement.

It will enable nurses to increase the range of medical conditions for

which they can prescribe and free up doctors' time.

Supplementary prescribing is likely to be most useful in dealing with long-term medical conditions, such as asthma, diabetes, heart disease and high blood pressure.

Nurses have already started training as supplementary prescribers and pharmacists will begin training in spring this year.

Nurses trained to prescribe from the Nurse Prescribers' Extended Formulary can become supplementary prescribers after completing a two-day top up course.

More information is at [www.doh.gov.uk/supplementaryprescribing](http://www.doh.gov.uk/supplementaryprescribing)

### More success for NHS smoking cessation services

More than 50,000 smokers quit in the first six months of last year with the help of NHS smoking cessation services.

Over 106,000 smokers set a quit date between April and September 2002.

Four weeks later 54,700 had successfully stopped.

GPs can refer smokers to a local service for advice, counselling and support. Most will benefit from using a cessation aid such as NRT or bupropion (Zyban), both available on NHS prescription and endorsed by National Institute for Clinical Excellence (NICE) as among the most cost-effective health care interventions.

Details of local cessation services are available from the NHS Smoking Helpline 0800 169 0169 or at

[www.givingupsmoking.co.uk/](http://www.givingupsmoking.co.uk/)

More information about the cessation programme is at [www.doh.gov.uk/tobacco](http://www.doh.gov.uk/tobacco)

Two new publications from the Health Development Agency

Meeting Department of Health smoking cessation targets:

recommendations for service providers and Meeting

Department of Health smoking cessation targets:

recommendations for primary care trusts have been produced.

Both publications are free at

[www.hda-online.org.uk/documents/smoking\\_cessation\\_targets\\_part1.pdf](http://www.hda-online.org.uk/documents/smoking_cessation_targets_part1.pdf) and [www.hda-online.org.uk/documents/smoking\\_cessation\\_targets\\_part2.pdf](http://www.hda-online.org.uk/documents/smoking_cessation_targets_part2.pdf) or call 0870 121 4194.

## Guidance on promoting the health of looked after children

*This guidance sets out a framework for the delivery of services from health agencies and local authorities to promote and improve the health of looked after children and young people.*

*It is written in the context of a holistic model of health, takes account of wider determinants of health and is, therefore, relevant to agencies in the statutory, voluntary and independent sectors, including education and leisure. It sets out the role and responsibilities of different agencies and outlines the principles of good health care.*

*Primary care teams have an important role to play in the identification of the health care needs of children and young people looked after. For example, their prior knowledge of the child or young person looked after, of the birth parents and of carers can help in taking a holistic and child-centred approach to health care decisions.*

*Also, the GP-held clinical record can integrate all known information about health and health events during the life of any child or young person. It enables GPs and others in primary care to gain an overview of health priorities and know if health care decisions have been planned and implemented. This is particularly important for a population of children and young people who move frequently and whose health history and current treatment programmes are frequently lost.*

*The guidance is available at [www.doh.gov.uk/lookedafterchildren/promotinghealth.htm](http://www.doh.gov.uk/lookedafterchildren/promotinghealth.htm) and [www.doh.gov.uk/qualityprotects/index.htm](http://www.doh.gov.uk/qualityprotects/index.htm)*

*To order a hard copy contact Jim Brown at [jim.brown@doh.gsi.gov.uk](mailto:jim.brown@doh.gsi.gov.uk) or call 020 7972 4431.*

## Education quality

*Two contracts have been awarded to the Quality Assurance Agency for Higher Education.*

*The agency will now carry out a three-year review of about 150 NHS-funded education programmes for nurses, midwives and allied health professions.*

*The second contract involves developing an agreed 'overarching health professions framework' and up to six new profession-specific benchmark statements for healthcare education.*

*This work has been commissioned by the Department of Health, alongside the Nursing and Midwifery Council, the Health Professions Council and NHS workforce development confederations.*

*A paper summarising the quality assurance in healthcare education project and its conclusions to date is available at [www.doh.gov.uk/hrbulletin/streamliningqa.htm](http://www.doh.gov.uk/hrbulletin/streamliningqa.htm)*

*More information is at [www.doh.gov.uk/hrinthenhs/learning/section3/quaiyassuringnursinghomepage.htm](http://www.doh.gov.uk/hrinthenhs/learning/section3/quaiyassuringnursinghomepage.htm)*

*For more information e-mail [ruth.howkins@doh.gsi.gov.uk](mailto:ruth.howkins@doh.gsi.gov.uk)*

## Evidence-based commissioning for PCTs: a directory

*PCTs and strategic health authorities have been provided with a directory of evidence to support service redesign at a local level.*

*It lists programmes from across the NHS. Each of these contains analysis and examples of good practice.*

*The directory is a useful tool in planning the shape of the NHS in the medium term. It supports three-year allocations and local development plans. PCTs will be considering how to ensure that the confirmed 'enhanced services floor' for primary care of £315m, £518m and £586m for 2003-2006 is delivered. The directory will help ensure that the funds support redesign and encourage innovative primary care service development.*

*The directory is available at [www.doh.gov.uk/pricare/pcts.htm](http://www.doh.gov.uk/pricare/pcts.htm)*

# 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.

## Prescription charges update

A number of changes to prescription charges are now in force – full details are at [www.doh.gov.uk/nhscharges/hc12.htm](http://www.doh.gov.uk/nhscharges/hc12.htm)

New guidance about hospital travel costs is at [www.doh.gov.uk/hospitaltravelcosts](http://www.doh.gov.uk/hospitaltravelcosts)

For more information on changes to the drug misuse treatment units prescription form GPs can call 0191 203 5050

## New statutory arrangements for maternity leave

Employers should be aware of new statutory arrangements for maternity leave for those giving birth on or after 6 April.

Employers will need to change current procedures and apply the new rules. Full details at [www.dti.gov.uk/er/individual.htm](http://www.dti.gov.uk/er/individual.htm)

Contact Jeremy Orr on 0113 254 5770 or e-mail [jeremy.orr@doh.gsi.gov.uk](mailto:jeremy.orr@doh.gsi.gov.uk)

## Patient Focus: improving the patient experience

Patient Focus is a new monthly newsletter from parliamentary under secretary of state for health David Lammy.

It aims to highlight the impact of patient and public involvement in health as part of the improving the patient experience programme.

It is at [www.doh.gov.uk/involvingpatients](http://www.doh.gov.uk/involvingpatients) To subscribe e-mail [doh\\_ppi\\_subscription@talkingnumbers.com](mailto:doh_ppi_subscription@talkingnumbers.com)

Feedback to [Patient.Focus@doh.gsi.gov.uk](mailto:Patient.Focus@doh.gsi.gov.uk)

## Producing patient information

GPs can now access a new fully revised second edition of Practicalities of Producing Patient Information to support a wide range of health professionals to develop the information they produce for patients.

More information or order at [www.kingsfundbookshop.org.uk/](http://www.kingsfundbookshop.org.uk/)

## Amendment to Schedule 11 to the National Health Service (General Medical Services) Regulations 1992

A new drug treatment for impotence Vardenafil (Levitra) has been placed on Schedule 11 of the NHS General Medical Services Regulations 1992. This

means that the drug has the same prescribing restrictions as other treatments for impotence on the NHS.

Contact Janet Smith on 0113 254 6601 or e-mail [janet.smith@doh.gsi.gov.uk](mailto:janet.smith@doh.gsi.gov.uk)

## Risk of methanol poisoning from counterfeit spirits

There have been a number of incidents where counterfeit spirits (vodka and whisky) were found to contain high levels of methanol, which could result in methanol poisoning. Methanol poisoning produces metabolic acidosis with risk of blindness.

More information on affected spirits is at the Food Standards Agency website at [www.food.gov.uk/](http://www.food.gov.uk/)

Information on diagnosis and treatment of methanol poisoning is at the National Poisons Information Service [www.spib.axl.co.uk](http://www.spib.axl.co.uk) or in more complex cases on 0870 600 6266.

## Postgraduate education

A UK policy statement has been prepared jointly by the four UK health departments and indicates how modernisation of postgraduate medical education will be taken forward in the context of wider workforce reforms.

This follows publication of the consultation paper Unfinished Business last August which generated more than 370 replies.

The statement is at [www.doh.gov.uk/shoconsult/index.htm](http://www.doh.gov.uk/shoconsult/index.htm)

For further information e-mail [modmedc@doh.gsi.gov.uk](mailto:modmedc@doh.gsi.gov.uk)

## Allergy UK

Allergy UK now offers fact sheets on What is Allergy and Allergy Testing, Asthma, Eczema and Rhinitis in Urdu, Punjabi, Bengali, Gujarati and Hindi. Copies of posters advertising this service are available from Allergy UK, 30 Bellegrave Road, Welling, Kent, DA16 3PY on 0208 303 8525 or e-mail [info@allergyuk.org](mailto:info@allergyuk.org)

## New and expectant mothers work guide

*New and expectant mothers at work – A guide for health professionals* has been published by The Health and Safety Executive to offer advice and action guidelines for employers. It is at

[www.hse.gov.uk/pubns/indg373hp.pdf](http://www.hse.gov.uk/pubns/indg373hp.pdf)

A guide for new and expectant mothers who work is available for patients from 01787 881165 or at [www.hse.gov.uk/pubns/indg373.pdf](http://www.hse.gov.uk/pubns/indg373.pdf)

## Teenage conception down

Teenage pregnancy rates have fallen for the third year in a row.

An extra £40 million will support implementation of the Government's Teenage Pregnancy Strategy over the next three years.

New figures from the Office of National Statistics are at [www.statistics.gov.uk/](http://www.statistics.gov.uk/)

## Guidance on labelling

New guidance for the design of medicines labelling and packaging aimed at reducing medication mistakes came into effect on 1 March.

The Best Practice Guidance on the Labelling and Packaging of Medicines is at [www.mca.gov.uk/ourwork/advertpromed/legregprodinfo.htm](http://www.mca.gov.uk/ourwork/advertpromed/legregprodinfo.htm)

## Complaints pilot extended

The Independent Complaints Support and Advocacy pilots have received a £2 million funding boost.

Extra money will ensure continued development of the new service that offers support to patients who make a complaint about their NHS care or treatment.

A list of Independent Complaints Advocacy Service pilots is at [www.doh.gov.uk/complaints](http://www.doh.gov.uk/complaints)

## Diabetes tsar

Dr Sue Roberts has been appointed the first national clinical director for diabetes after her work as part of a team drawing up the National Service Framework (NSF) for Diabetes.

She will be responsible for ensuring local NHS trusts achieve the NSF's eye screening and check up targets as well as providing national leadership.

More information at [www.doh.gov.uk/nsf/diabetes](http://www.doh.gov.uk/nsf/diabetes)

## **Action on NHS Professionals**

NHS Professionals – the NHS in-house staff agency – will be given a stronger national management structure with the establishment of a special health authority to tackle the costs of temporary staffing agencies.

The special health authority will be in place before the end of the year.

For full details of the announcement go to [www.info.doh.gov.uk/doh/IntPress.nsf/page/2003-0088?OpenDocument](http://www.info.doh.gov.uk/doh/IntPress.nsf/page/2003-0088?OpenDocument)

## **Drink helpline**

Drinkline is a Department of Health-funded telephone helpline which provides free and confidential advice to anyone concerned about their own or someone else's drinking.

From 1 April 2003 the service is extending its opening hours and will be open between 9am and 11pm Tuesdays to Thursdays, and from 9am on Friday to 11pm on Monday.

The telephone number is 0800 917 8282.

## **Health and social care awards**

These awards recognise the achievements of those who have shown outstanding commitment, partnership, innovation and leadership in all aspects of health and social care and the scheme covers all areas of our NHS and social services in England, whether statutory, voluntary or independent.

The awards give winners the opportunity to share good practice and the chance to win £15,000 to develop their services and ideas. The winners will

be announced at an awards ceremony in London on 1 July. For more details and to apply visit [www.modern.nhs.uk/healthandsocialcareawards](http://www.modern.nhs.uk/healthandsocialcareawards)

The closing date for entries is 2 May 2003.