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GPC meeting

The GPC met on 21st May 2009 and this newsletter provides a summary of the main items discussed.

Pandemic influenza update

The GPC continues to meet regularly with the NHSE and RCGP to discuss outstanding issues of the joint DH - BMA - RCGP guidance: *Preparing for Pandemic Influenza - Guidance for GP practices, what to do now and in a pandemic*, which can be found on the [BMA website](#).

We will also be writing to GPs, LMCs and PCTs with an update on pandemic flu arrangements and the current progress of some of the issues that were raised in the joint pandemic flu guidance, in particular those relating to sessional GPs.

We would urge doctors regularly to check the latest guidance on the BMA website to keep updated of the latest developments; and this is particularly important for sessional GPs who may not routinely receive communications sent out to practices. The BMA's website also has links to other key websites, including the [Health Protection Agency](#).

GP patient survey

The GP patient survey was established in England in 2006/07 to support PCT assessment of general practices' achievements against national standards set out in DES agreements. These agreements linked results from the administered surveys with the rewards made to GP practices. The arrangements for this year's survey have been different from the past two years as the government decided to replace the previous arrangement with a national postal survey, payment for which is now through the QOF.

SGPC has already been dealing with some serious problems with the Scottish results, of which practices were notified a few weeks ago, in particular because they seemed to be based on small response rates. Practices in England are now receiving their own results, though the national-level data will not be published until late June. The GPC debated this yesterday, and is very concerned that problems similar to those in Scotland may be reported in England and in the other nations. If this does happen, some practices may have their results and therefore some QOF points and a significant amount of funding determined by a very small proportion of their total practice population. It is quite possible that practices will receive a good response rate to the survey as a whole, but low levels of response to one or both of the key access questions. It seems that this may be a particular problem with the PE8 questions on advanced booking.

The GPC is currently pursuing urgent discussions with the Department of Health and NHS Employers to seek to resolve this issue. In the meantime, however, we recognise that practices are being asked to sign off their QOF results by PCOs and will need to know what to do if they believe that their survey results do not reflect the reality of what they are providing. We have therefore produced the attached (appendix 1) guidance for practices. This will be supplemented shortly with more detailed guidance including a template letter. We are also investigating other options and will advise practices further as soon as possible.

The commissioning of out-of-hours care

Following a resolution passed at the 2008 LMCs conference, the GPC was asked to consider whether GPs should resume responsibility for the commissioning of out-of-hours (OOH) services. After much deliberation, it was concluded that practice based commissioning already enabled those GPs that wished to commission out-of-hours services, to do so. However, it was agreed that to recommend any change to the statutory framework of OOH commissioning would be inappropriate while funding remained inadequate in many places and inequitable across the country. There was also a considerable risk that if GPs were to resume the commissioning of OOH services, this would be confused with a responsibility to provide these services. Lastly, it was noted that different political parties have different intentions regarding the involvement of GPs in the commissioning of OOH care, and thus any change in government would require a detailed review of these considerations.

Safeguarding vulnerable adults

In October 2008 the Department of Health (DH) launched the national consultation on the review of the No Secrets guidance. The *Safeguarding Adults: A Consultation on the Review of the 'No Secrets' Guidance* document can be viewed via the [Department of Health website](#).

The Community Care Committee coordinated the BMA's response with significant input from the GPC and the Patient Liaison Group (PLG). The response was sent in January 2009.

In conjunction with the formal consultation, in October 2008 the DH invited a representative from the BMA to attend the NHS 'No Secrets' Advisory Group meetings. The DH set up the steering group to provide a communication channel between the DH and the NHS to ensure full engagement is achieved to develop safeguarding in the NHS during the next phase of the development and implementation of the No Secrets guidance in 2010.

On 6 May 2009 the chairman met with Anna Morgan, National Programme Manager No Secrets, Department of Health, to discuss the safeguarding of vulnerable adults and the DH's draft practical guidance for GPs being developed.

From the consultation and these meetings, the GPC is anticipating that this initiative could have a significant effect on GP as employers in addition to GPs themselves. The GPC will be working closely with relevant stakeholders to produce guidance for GPs in the near future.

Workforce issues

The BMA's Health Policy and Economic Research Unit is working with all branch of practice committees on a coherent BMA-wide medical workforce policy. The GPC proposed that any expansion or extension to GP training must be properly resourced, as well as support for career progression across the range of different contractual arrangements for GPs.

Alongside this work, the GPC has set up a workforce sub-group to examine GP-specific workforce issues. The sub-group is working on an agreed GPC workforce policy in the context of a number of issues, including the current lack of career choices and partnership opportunities for newly qualified and other GPs, the trend towards the recruitment of salaried GPs, the expansion of GP trainee numbers, and the increased demand for primary care services. The GPC supports the need for concrete action in this area, and the workforce sub-group will be meeting again to determine and prioritise its proposals for further action.

Representation of sessional GPs

Representatives of the Sessional GPs subcommittee and the Representation subcommittee will be meeting in the forthcoming session to consider the representation of sessional GPs on GPC

and within the wider BMA. The group will consider the possibility of seeking views from the wider body of sessional GPs.

GPC IT Subcommittee

The GPC currently directly elects five representatives to sit on a Joint GP IT Committee, which comprises representatives from the Royal College of GPs, the Chairmen of the National GP Systems User Groups and one representative of the British Computer Society.

As well as their work on the Joint GP IT Committee, the GPC members also undertake a significant amount of work without reference to the Joint GP IT Committee and have found that the lack of a formal IT subcommittee within GPC has made it more difficult to undertake that work, and has led to confusion and a lack of clarity when dealing with organisations outside of GPC.

Therefore, it was agreed that a GPC IT subcommittee should be piloted during the 2009/10 session. Five GPC members will be elected to this subcommittee, and all five members will also be appointed, ex-officio, as the GPC's representatives on the Joint GP IT Committee.

This decision will be reviewed at the end of the 2009/10 session.

Working in Partnership Programme Workload Analysis Tool

The GPC received an announcement about the Workload Analysis Tool developed by the NHS Working in Partnership Programme to help general practice manage workload demands more effectively. The marketing rights and intellectual property rights to the Tool have been awarded to Informatica Systems Ltd. [Further information is available online.](#)

GPC regional election 2009-2010

Nomination of members

Nominations are sought in the election of a voting member of the General Practitioners Committee of the British Medical Association as regional representative for the constituency detailed below.

Local medical committees covered

- S & W Devon/Cornwall & Isles of Scilly

* Please note that this election is for a one year term of office. A further election will be held in this constituency in 2010.

Candidates must be:

- GPs who contribute to the voluntary levy of an LMC in the constituency and who provide personally or perform NHS primary medical services for a minimum of 52 sessions distributed

evenly over six months in the year immediately before election (7 August 2009); or

- GPs who are on the doctors retainer scheme and who contribute to the voluntary levy of an LMC in the constituency; or
- Medically qualified officers of a local medical committee in the constituency.

Nominations should be made on forms available from the General Practitioners Committee at the British Medical Association BMA House, Tavistock Square, London WC1H 9JP (tel: 020 7383 6610; fax: 020 7383 6406) and on [the BMA website](#).

Each nomination form must be signed by the candidate, five proposers and a representative of the local medical committee who can confirm that the candidate and proposers contribute to the voluntary levy.

Nomination forms and statements in support of candidature should be returned to: Joe Read, General Practitioners Committee, British Medical Association, BMA House, Tavistock Square, London WC1H 9JP by no later than 5pm on Friday 12 June 2009. Please note that it is the candidate's responsibility to ensure that GPC have received their completed nomination forms and statements.

In the event of a contested election, ballot papers will be issued by Electoral Reform Ballot Services on 17 July 2009.

Media coverage report

Please find attached (appendix 2) a GPC media coverage report prepared by the BMA's press office, detailing GPC media activity during the last few weeks.

The GPC next meets on 16 July 2009, and LMCs are invited to submit items for discussion. You may like to review these, beforehand, with the representatives in your area who serve on the GPC. The closing date for items is 7 July 2009. It would be helpful if items could be emailed to Catharina Ohman-Smith at cohman-smith@bma.org.uk. You may also like to use the GPC's listservers to exchange views and ideas.

GPC News

GPC News is available via the Internet, via the BMA's web pages: www.bma.org.uk

LMCs are reminded that their regional representatives can provide more detailed information about the issues covered in GPC News, and other matters. Other members of the GPC would also be pleased to accept invitations to LMC meetings wherever possible. Their names and addresses are in the GPC Yearbook. The secretariat can also provide a written background brief if required, but it would be helpful to have such requests well in advance of your meetings.

Finally, if LMCs require assistance on local issues, they can also contact the BMA's local offices: addresses are on page 3 of the GPC's yearbook.

This newsletter has been sent to:

- Secretaries of LMCs and LMC offices
- Members of the GPC
- Members of the GP trainees subcommittee
- Members of the sessional GPs subcommittee