



Closed Circuit Television

Following recent interest in practices' use of CCTV, the LMC has seen guidance from both a defence organisation and the BMA. An important issue seems to be protecting the right to the anonymity of patients who may be visible on any recording that is passed to a third party, such as the police.

The BMA guidance is as follows: *"The fact that a patient is registered with a practice is confidential information. Disclosure of patient identifiable information to the police should only be done with consent, if there is a statutory obligation (or if the police have obtained a court order for disclosure), or a public interest justification. In the health context, public interest is where disclosure is essential to prevent a serious and imminent threat to the life and health of an individual or the public or to prevent or detect serious crime". The BMA interprets serious crime as including murder, rape, kidnapping, child abuse etc. It may also include serious fraud. In contrast, theft or minor fraud would generally not warrant a breach of confidence. We cannot advise doctors whether or not they should make a disclosure on public interest grounds.* As with any subject in which the views of the GMC, lawyers and the police are relevant, it would be wise to seek guidance from your Defence Society if you are either contemplating using CCTV or already do so, and especially if you are planning to hand over any media to the police. SRL

* See the GMC Guidance at: http://www.gmc-uk.org/guidance/ethical_guidance/confidentiality_36_39_the_public_interest.asp

SOME OLD and not so OLD CHESTNUTS

Issues continue to be raised by (justifiably) disgruntled constituents that should have been sorted out years ago. We put three of them on a recent LMC Agenda to see if anybody had any new answers. The first was a letter from an andrology nurse practitioner requesting serial blood tests to be taken - work that is clearly not core general practice. The LMC thought that PBC might be able to convince the hospital that this was an inappropriate request.

The second was the inconvenience of patients who were unable to get to outpatient appointments in the snow earlier in the year: their appointments could not be rescheduled by the provider units – brand new GP referrals were demanded. It appears that this ridiculous situation is a consequence of the eighteen week target - so let us hope the new government is either more flexible, or more sensible, or both.

The third was a faxed request from hospital outpatients to prescribe when it was clearly the hospital's responsibility. The example brought to the LMC was for a contraindicated drug, so not only were the GP and patient inconvenienced but the GP could have been pressured into prescribing an ill-advised drug.

The LMC will continue to do what it can, as it has for many years, but please try to work through Practice Based Commissioning when this is appropriate. Also, in Norfolk please continue to send in QIR forms. The more evidence we give the PCTs, the more likely it is that things will be put right.

While it is stunningly disappointing how slow progress is, the new Clinical Quality Initiative, (CQuIn) does make some of Provider Units' income dependent on them working better – it may just prove to be the "carrot" which works – unlike "sticks" wielded in the past which have rarely lead to genuine change. First wave fund-holders may beg to differ – of course! SRL

INTRAN interpreting and translation services (with thanks to Anna Clarke, Clinical Services Knowledge Officer, NHSN)

NHS Norfolk and NHS Great Yarmouth & Waveney are members of the INTRAN Partnership for the provision of interpreting and translation services for people whose first language is not English or who are deaf or hard of hearing. INTRAN is available for all staff to use on behalf of patients. The **costs of interpreting and translation are covered by the PCTs** where these relate to patient treatment. There are over 100 languages spoken in our area

How to use INTRAN services: For all services tell the operator: your ID code, name, the name of your organisation, language/dialect you need and what it is about. They will then ask all relevant questions and guide you through the process. **Telephone interpreting - 0800 169 2694 (Language Line)** is for emergency situations, basic consultations, fast access to interpreting services - whether patient is with you or not. **Face to face interpreting - 01223 346 870 (CINTRA)** is for complicated or lengthy consultations. **British Sign Language or Lipspeakers - 01603 660 889 (Deaf Connexions) - 01763 209 001, OOH (Clarion)** is for the deaf/hard of hearing and **Written Translations - 020 7253 7700 (Pearl Linguistics)** is for notes, appointment letters etc.

Examples of inappropriate use of interpreters include using relatives / friends / children to interpret for patients: How do you know the interpreter can understand complicated medical terminology? How do you know the interpreter is giving the patient the correct info? - *All of INTRAN's interpreters go through a rigorous selection process and training so that they can provide the best service to the patient and the health professional.* How do you know the interpreter is not taking money from the patient to provide this service? How do you know there are no cultural issues, such as a community where a child cannot tell an elder relative what they can or cannot do, including lifestyle choices for a specific condition? - *By using INTRAN interpreters you can be assured of impartiality, and if there is an issue, the interpreter will raise it immediately.* How do you know the person translating for the patient will not tell other people in their community about the patient's condition? - *All of INTRAN's interpreters have strict confidentiality rules governing their conduct.*

Using INTRAN: To use INTRAN services you need your individual ID code. If you do not know yours, you can contact: **Anna Clark on 01603 257255 or Jennifer Downie on 01603 257252.** For more information, see the INTRAN on Knowledge Management <http://www.knowledgenorfolk.nhs.uk/intran/>

PRIVATE HEALTH SCREENING

A private health screening company may be contacting practices/ patients. Some years ago a few local practices provided premises and/or endorsed, or could have been seen as endorsing, contacts with patients, possibly even passing on patient contact details or allowing the practice's letter heading to be used for correspondence. This is a very risky area so the LMC has taken up-to-date advice from the BMA. If you are contemplating any sort of involvement with a private health screening company I strongly urge you to contact the LMC office for a copy of the BMA comments before you make a decision. SRL.

The LMC BUYING GROUP FEDERATION

The LMC Buying Group Federation has recently experienced a major expansion with Londonwide LMCs joining, bringing the overall membership to over 3000 practices thereby increasing its purchasing power. Current new deals that will be made available to Norfolk & Waveney practices include: **Fire and Security Equipment, Health & Safety Management Systems, Staff Uniforms and Confidential Waste Disposal and Recycling.** BMA Law is now categorised as an accredited supplier. Note that at least one GP must be a BMA member to access the service as BMA Law is a "not for profit" organisation and therefore can only provide this enhanced service through BMA Membership. BMA Law has also launched a Business Consultancy Service to provide practices with corporate/commercial services. Following several enquiries, The Buying Group is looking into offering deals on sought after pharmaceutical products like Depo Provera and Zoladex but due to the structure of the wholesale drugs market this is taking a while to achieve. For further details on all products available through the Buying Group speak to your Practice Manager or visit www.norfolkwaveneylmc.org.uk/buying.php

Large increase in non-immunity to rubella in Norfolk (and probably in elsewhere too)

Norfolk is experiencing a huge increase in non-immunity to rubella. Norfolk PCT has emailed practices asking them to ensure that non-immune postnatal women are followed up with the offer of immunisation etc. The statement contained in the email about who GPs are supposed to immunise is a correct statement. If GPs wish to contract out then such immunisations are an additional service and their global sum would reduce.

I would not read it as a command or even suggestion that GPs should be doing anything over and above what they are currently doing to track down such patients. I assume practices currently have their systems set up to ensure new patients have their vaccination status computed and patients are asked at every opportunity to get any vaccinations they have not received; I would expect GPs to ask anyone who attends for pre-conception advice about rubella immunisation - and offer it where appropriate. Unfortunately the email does not recognise that these women - presumably those whose parents did not believe what their GP told them about getting their MMR vaccination done - have probably already been told 1,000 times by their GPs and practice nurses to get it done - if anyone is at fault it is not GPs but we will have to spend more time sorting it out - as usual. SRL

EAST NORFOLK - Southern Broads & Coastal Area - Salaried GP

◆ A young, flexible, enthusiastic practice ◆ Superb, spacious, purpose-built, leasehold premises ◆ Four Partners and two part-time salaried doctors ◆ Using EMIS PCS computer system. (Paper light) ◆ High QOF ◆ Training practice for students from UEA and registrars from NNUH ◆ List size approx 9500 & rising ◆ Actively involved with PBC ◆ Part time or full time will be considered with a view to Partnership for the right candidate ◆ No OOH or extended hours required but sessions are available ◆ Semi-rural location South of Great Yarmouth. Informal visits welcome.

For more information or applications with CV to: David Stock, Practice Manager, Millwood Surgery, Mill Lane, Bradwell, Great Yarmouth, Norfolk, NR31 8HS. Tel: 01493 661549 Email: David.stock@nhs.net Website: www.millwoodsurgery.co.uk

NORTH ELMHAM, Salaried GP – 8 Sessions per week, available from August 2010

Progressive rural dispensing practice; excellent remuneration package; no on-call commitment; BMA Model contract; 6 weeks annual leave; friendly, highly motivated team; EMIS paperlight practice; QPA practice; committed to PBC. Elmham Surgery operates a non-discriminatory employment policy. For info pack contact:

Judith Wood, Elmham Surgery, Holt Road, North Elmham, Dereham, Norfolk, NR20 5JS Telephone 01362 668049, email judithwood@nhs.net www.elmhamsurgery.com Closing date 22nd June 2010.

FULL TIME GP PARTNER – October 2010 - Newtown Surgery & Caister Health Centre

Due to retirement, the opportunity exists for a highly motivated, energetic doctor to join our progressive PMS Practice. Operating across two sites in Great Yarmouth and Caister-on-Sea the Practice is committed to providing high quality evidence based patient care and is able to provide the following environment for the successful applicant: ◆ 12,000 patients ◆ Consistent high QOF achievement ◆ Provision of medical support to local community hospital ◆ Educational Practice, teaching years 3 & 4 medical students and up to 2 GP registrars ◆ Active participant in clinical research Closing date 18th June 2010

The post will be salaried for 12 months after which a full partnership would be offered subject to mutual agreement. For further information please contact: Jonathan Knights, Business Manager on 0844 844 0160 or jonathanknights@nhs.net. Applications by way of email, attaching your CV, to the above address.

The following documents have been sent electronically to your Practice Managers.

- The LMC Buying Group Federation Update
- Lockharts Newsletter & Federation Workshops
- GP Patient Survey update
- Norfolk Deaf Association Newsletter

CARLTON COLVILLE LOWESTOFT

Well established friendly family general practice has whole time vacancy with flexible working arrangements to suit the right person. Quality of care and quality of life are more important to us than profits.

Closing date 20th June 2010

Situated on quieter fringes of Suffolk coastal town close to sea, Norfolk Broads and beautiful East Anglian countryside. New purpose built surgery, PMS practice. 5500 patients for 3 FTE GPs. Enquiries and informal visits welcome. Please contact Dr Mark Butt or Mr Frank Rush on 01502 517346 or e-mail Mark Butt on markbutt@nhs.net for further details.

SERCO HEALTH

Serco Health has been awarded the contract for providing a new integrated service across the three prisons in Norfolk and is looking for full time and part time GPs. For further information please email lee.barnes@serco.com

HALESWORTH, SUFFOLK

Additional half-time Partner required for 7 Partner rural dispensing Practice. The Practice provides cover for the nearby Community Hospital and Minor Injuries Unit and trains both undergraduates and postgraduates. It is a cohesive partnership supported by an excellent team of Practice and District Nurses. We are looking for an enthusiastic, energetic Partner to complement our team. Closing date 11th June 2010

Please apply, with a covering letter and CV, to Mrs Jenny Doane, Practice Manager
Cutlers Hill Surgery, Bungay Road, Halesworth, Suffolk IP19 8SG, Tel: 01986 834010.