

Bromley LMC update

October 2016

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1. Introducing your new Local Medical Committee

LMC elections took place in the summer. We are pleased to announce that Dr Mukesh Sahi has been elected to serve as the Chair of Bromley LMC for a two year term (2016-18).

Dr Rishi Chelvan and Dr Ruth Tinson have been elected as joint Vice-Chairs for a two year term.

The full list of Bromley LMC members is set out below. Please contact them if you have any queries

Chair	Dr Mukesh Sahi	m.sahi@nhs.net
Co Vice Chairs	Dr Rishi Chelvan Dr Ruth Tinson	rishi.chelvan@nhs.net ruth.tinson@nhs.net
LMC members	Dr Amrit Bindra	amritbindra@nhs.net
	Dr Colette Boateng	Colette.boateng@nhs.net
	Dr Elizabeth Brander	via Barry.Christie@nhs.net
	Dr Kiran Chandan	drkiranchandan@googlemail.com
	Dr Christopher Fatoyinbo	Chris.fatoyinbo@nhs.net
	Dr Miranda Godfrey	mirandagodfrey@doctors.org.uk
	Dr Fadhil Noori	mnoori1@nhs.net
	Dr Hamendra Patel	hamendra.patel@nhs.net
	Dr Donya Young	Donya.young@nhs.net
Practice Manager	Vanessa Dougals	vdouglas@nhs.net

representative

Londonwide LMCs Team

Each Local Medical Committee is supported by a team at the Londonwide LMCs' office. The following staff are dedicated to working with Bromley LMC and supporting GPs and their practices in the delivery of primary care across Bromley.

Medical Director / LMC Secretary	Dr Julie Sharman	Julie.Sharman@lmc.org.uk Working days: Tuesday, Wednesday & Thursday Covering Bromley, Bromley and Greenwich LMCs
Director of Primary Care Strategy	Julie Freeman	Julie.Freeman@lmc.org.uk
Assistant Director of Primary Care Strategy	Nicola Rice	Nicola.Rice@lmc.org.uk
Committee Liaison Executive	Barry Christie	Barry.Christie@lmc.org.uk

If you have any issues or queries please contact Barry Christie in the first instance by email.

2. IMPORTANT - Do you have any issues, complaints or concerns regarding the services provided by Kings NHS Foundation Trust? If so we need to know and please forward examples to Barry.Christie@lmc.org.uk by 7 November 2016

Bromley LMC aims to set up regular meetings with representatives from Kings NHS FT Hospital to discuss concerns about some of the services and/or processes provided or adopted by the Princess Royal University Hospital. The Committee is particularly interested in areas where request impact on the workload, duplicate processes already in place or where quality of clinical services provided to patients can effectively be improved. There is a meeting in the near future so if you have any concerns about any of the services it would be helpful if you would forward examples to Barry.Christie@lmc.org.uk by **7 November 2016** to help inform the discussion. Please only use patients' NHS numbers when referring to patient identifiable issues.

3. General Practice State of Emergency (GPSoE) Campaign

To help practice staff to manage the increasing workload, Londonwide LMCs has produced some emergency guidance for practices to use to manage requests for unresourced work and to identify and communicate to patients activities that are not covered by the your core contract.

The resources can be accessed [here](#).

4. Accessible Information Standard

Since 31 July 2016 all GP practices have to be fully compliant with all aspects of the Accessible Information Standards

The [Accessible Information Standard](#) aims to ensure that people who have a disability or sensory impairment receive information that can be accessible and understood. Any organisation that provides NHS or adult social care will need to implement these standards and compliance with the accessible information standard SCCI1605 (set out in section 250 the Health and Social Care Act).

Commissioning organisations, whilst not required to implement the standards themselves, must support compliance by organisations from which they commission services. [The guidance sets](#) out that this could be done by, for example, incentivisation and performance management arrangements. Non-compliant organisations are advised that they lay themselves open to risk of complaints and investigation.

The standard requires organisations to:

- Ask people if they have any information or communication needs, and find out how to meet those needs.
- Record those needs clearly.
- Highlight or flag the person's file or notes so that it is clear that they have the information or communications needs.
- Share people's information and communication needs with other providers of NHS and adult social care, when they have consent to do so.
- Take steps to ensure that people receive information which they can access and understand, and receive communication support if they need it.

Practices do not need to trawl retrospectively through the notes to identify patient needs, but do now need to start identifying how the notes should be marked to identify patient need or what the patient should be asked. This should include obtaining consent for sharing this information with other services, when a new patient registers or opportunistically when they contact the practice. Issues around staff training also need to be addressed, as the processes that practices adopt will likely be checked at Care Quality Commission visits.

Further information is available in the BMA document '[Focus on the Accessible Information Standard for GP practices in England](#)' as well as [FAQs](#).

5. Friends and Family Test

Practices are reminded that it is a contractual requirement for Friends and Family Test submissions to be made by the twelfth working day of the month on a **monthly** basis. Even if you have no submissions in a particular month please enter 0 in the relevant sections on CQRS. We need to remind you that if these returns are not made, it may result in the practice receiving a breach notice.

6. Londonwide LMCs patient engagement project

Did you know it is a contractual requirement to have a Patient Participation Group (PPG)? Having difficulties establishing or running an effective PPG? Let us know by contacting Beryl.Cross@lmc.org.uk

7. London Sexual Health Transformation Programme – October 2016 update

Londonwide LMCs has kept practices updated on the progress of the London Sexual Health Transformation Programme by including the programmes regular updates in the Londonwide

LMCs newsletters. The most recent briefing is available [here](#) which includes the specific South East London update as follows:

The GSTT public consultation on a new service model and site reduction was completed at the end of September and results that will inform the new service model to come in November.

KCH are continuing to deliver a pilot of assisted 'e' triage at front door, with a similar scheme at GSTT planned to be piloted by January 2017. In addition, KCH plans to extend the 'e' triage at Beckenham Beacon in Bromley, probably in Q4.