



## May at war with whom?

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The dust has settled a fortnight after Mrs May flooded the press with more GP bashing. One had hoped that with Cameron gone, the 8 until 8, seven days a week mantra would have gone with him. No such luck.

Mrs May was reminded of the pledge following a [National Audit Office publication](#) which was critical of government. It provided a "look over there" diversion from the crisis in A&E.

But one also can see a shift away from extended hours access to access in general ([see Telegraph article](#)). Mindful perhaps of the added expense (£230 vs. £154) and lack of demand outlined in the NAO report she allows GP an opt out if lack of demand in their area is proven.

The shift is towards the almost half of practices not open full time and the one in five practices that regularly close by 3pm. QOF used to reward practices that stayed open 5 mornings and 4 evenings but that went in the contract imposition. As long as the reasonable needs of the registered population are met there is nothing preventing a practice shutting their doors within core hours as long as emergency care is provided. Who are more likely to do this? Branch surgeries, small practices, and those running staff training.

So in answer to the above, that she is at war with GP is obvious, but which sort in particular? Single-handed GP who want to keep their skills fresh and GP who want to run a convenient service to patients in often rural or deprived areas. If you are any of the above beware the Ides of May.

## Firearms

There is still lots of debate surrounding firearms licensing. We are still awaiting definitive guidance from the BMA, however in the interim here is a summary of the current position.

- GPs must engage in the process of firearms licensing when requested to do so. Failure to do so could place themselves at professional risk.
- Don't ignore the letter from the police - either send a letter to say that you will complete the form subject to a fee, or indicate that you are not in a position to provide the report (for whatever reason)
- In terms of their contractual obligations, GPs must cooperate with and facilitate statutory functions relating to the process.. If you do not wish to complete the report but you have reasons to be concerned about your patient's suitability to hold a firearm you should disclose this (with or without a fee)
- The contract also sets out that a reasonable fee may be demanded for the services provided as part of that process. The demand for a fee may form a

condition, which if not fulfilled, means the GP can refuse to engage in the firearms certification process.

- If you have invoiced the police and no payment has been received you do not have to issue a report
- GPs may also refuse to engage in the process where they have a genuine conscientious objection, subject to the GMC guidance Which means you should refer the request to a colleague who does not have any conscientious objection

## **New e-learning programme to support supervisors working with trainees under the new contract**

Health Education England's e-Learning for Healthcare (HEE e-LfH) programme has launched an e-learning resource that helps describes the role of clinical and educational supervisors and how they work with postgraduate medical trainees employed under the new 2016 contract. The e-learning supports educational and clinical supervisors in understanding their role and how they can support their trainees under the new contract.

The e-learning session is designed to support educational and clinical supervisors but is relevant to all those involved in the management of trainees, including trainees themselves. The development of this e-learning session involved both NHS Employers and the British Medical Association. For further information click [here](#)

## **Guidance for practices serving atypical populations**

NHS England recently published guidance for commissioners to provide support for practices serving atypical populations. The GPC has now produced [advice for practices](#) to engage with their commissioner to address the challenges of serving such a population.

## **Inclusive Language in the Workplace**

Following recent media highlights on choice of language by NHS Doctors, the GPC have highlighted the following BMA document, [BMA Guide to Effective Communication— inclusive language in the workplace.](#)

## New LMC Executive Officers

Dr Lorna Clarson has resigned from her LMC Vice Chair position and the committee itself after LMC officer discussions on Thursday 19th January. She has increased her GP work to a total of 8 sessions as an academic at Keele University and 2 sessions at Palmerston Street Surgery, Wolstanton. She continues to be involved in setting up the academic practice within Northern Staffordshire, and the LMC wish her the very best for the future and thank her for her input into the committee and taking on the Vice Chair role when Dr Jack Aw stepped down.

The committee is pleased to announce the appointments of Dr Fizah Shaheen and Dr Suresh Upputuri in their executive role positions on the committee.

This now leaves a vacancy for Vice Chair, which will be elected from within the committee on March and 2 vacancies on the committee, for which we will seek to co-opt interested colleagues. Our next full elections are in April 2018.

If any GP colleagues are interested in becoming co-opted committee members, then please would they contact Miriam, Harald or myself.

An introduction follows from our Executive Officer, Dr Fizah Shaheen. Look out for an introduction by Dr Suresh Upputuri next month.

## Introduction from new LMC Executive Officer, Dr Fizah Shaheen

I qualified in 2009 from Newcastle University. Moving back home to North Staffordshire I completed the VTS locally, undertaking a local academic fellowship within North Staffordshire CCG, and achieving MRCP in 2015.



I am now a Salaried GP at The Village Surgery, Wolstanton, and became a Co-opted LMC member in Autumn 2015, becoming a full LMC member from April 2016.

I joined the LMC executive team in 2017 to represent, engage with and support GP's locally. My interests are medico-legal, public health and IT.

In my spare time I enjoys playing netball (WA), charity work/fundraising and am involved in community health promotion initiatives on a voluntary basis.

## GPC newsletter

Here is the [latest newsletter](#) from the GPC which includes the latest [Sessional GP Newsletter](#)

## LMC Officers and Members

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