Email sent by Wessex LMCs, on Saturday, 28 Oct 2017

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Urgent - are we facing a Flu epidemic in December?

The Daily Telegraph recently reported "the NHS is braced for the worst flu season in its history, amid fears that overcrowded hospitals will be unable to cope. The head of the health service has warned that "pressures are going to be real" as he warned that influenza levels are expected to be high".

It is predicted that this winter may be one of the worse for a decade. Everyone is aware of the "Spanish Flu" which killed more people in 1918 that were killed in the whole of the First World War. We see a significant rise in the number of case with associated deaths about once every 10 years, the last pandemic was in 2009.

Australia have seen over 212,000 cases during their winter, with over 100 flu related deaths. The virus that is causing the problem is the H3N2 stain. A similar strain has been used to create this year's vaccine. Those at greatest risk are the elderly and those in care homes.

In terms of influenza, what occurs in Australia one year will be seen a few months later in the UK.

It is now predicted that the flu "epidemic" is likely to hit the uk in December 2017.

What should you do now in your practice?

1. Ensure you have had your flu vaccination.
2. Ensure all your staff have been vaccinated and warn them of the potential risks of not being vaccinated especially in a year when the expectation is that there will be a significant increase in the number of people with flu.
3. Most practices will have almost completed there normal winter flu clinics. It is worth identifying those who are in the high risk groups who have not been vaccinated and warn them of the predicted epidemic that is expected over the next couple of months. There should be more publicity in the media about what is happening in Australia and is coming to us soon.

I have written a letter to local newspapers and will copy this to the local Radio and Television Stations and hopefully this will increase the uptake in the "at risk" groups. A copy of the letter is detailed below- please feel free to use this as you see fit.
4. Remember that you will be paid for any carer, care home staff or healthcare worker you vaccinate.

5. Have you got a practice plan - what would you do if there was an flu epidemic and you have a surge in demand and you lost half of your staff because of the flu?

**Letter to be sent to the local media**

Dear Reader

**The potential for a flu epidemic this year in the UK**

Influenza (flu) is a common infection that is seen all the year round by peaks during the winter months.

Flu is not the same as the “common cold”. Flu symptoms include a high fever (38c or above), tiredness and weakness, general aches and pains, a headache and a dry chesty cough. Common cold symptoms such as a runny nose, sore throat and sneezing can be caused by flu but tend to be less severe than the flu like symptoms.

Flu is normally a self limiting illness but can be serious and every year there are a number of deaths that are caused by flu. In 1918 there was a flu pandemic, the “Spanish flu” that year killed over 50 million people worldwide and over 220,000 people in the UK. More people died in 1918 of flu than were killed in the whole of World War 1. Pandemic flu occurs every few years and in the last 100 years includes Asia flu (1957/8), Hong Kong flu (1968/9) and the last pandemic occurred in 2009 but fortunately was a mild strain and its impact was less than predicted yet still killed close to 300,000 people worldwide.

**Why is all this important to your readers?**

Australia is just coming out of its winter and has seen a significant increase in the number of patients with flu – over 200,000 cases and more than 100 deaths. The impact of flu on Australia is an accurate indicator of what we might expect during our winter.

It is therefore predicted that the UK will see a significant increase in the number of cases of flu this winter and this will come on top of a health service that is already under considerable strain. The impact in not just felt by hospitals but is seen by the GPs in your practice.

**What can you do to protect yourself?**

The flu vaccination is an important measure to help protect individuals and provide some immunity to the predicted strain of flu that is expected to be prevalent during that winter.

Those most at risk include people:

- Aged 65 or more
- Pregnant women
- People with chronic lung disease including asthma, chronic obstructive lung disease (COPD), emphysema and chronic bronchitis
- Diabetes
- Chronic heart disease
- Chronic kidney disease
- Neurological diseases such as Parkinson’s disease, Multiple Sclerosis
- People who have had their spleen removed
- Carers
- People who are healthcare workers.

It is therefore important that everyone in the at risk group considers having a flu vaccination, and if not vaccinated this winter contact your practice and arrange to have this done as soon as possible. The vaccination is free to all those people who fall into the at risk groups.

For those who fall outside the at risk groups you can still be vaccinated and this is available through your local pharmacist and although you will have to pay for this the small cost balanced against the risk of flu is worth it.
2. SNOWMED CT - replacing READ CODES

In the late 1990's there were national discussions about moving from READ Codes to SNOWMED, at the time I was the Vice-Chair of the GPC's IT Committee and represented the profession in some of these discussions. It is interesting to note that it has taken nearly 20 years to implement the change.

A letter is attached which, I hope, will provide you with all the information that you need.

3. Next generation GP

This is a programme for emerging leaders and the future decision makers. The programme was designed by three trainees all of whom were Clinical Fellows with NHS England's National Medical Director.

The first programme took place in London recently and Wessex LMCs sponsored a couple of GPs to attend the events.

The success of the London events resulted in the ambition to spread the programme to other areas. Wessex is the first region to be offered this programme. The LMC and Wessex Deanery have been developing the programme with Dr Nishma Manek, the national lead within NHS England and one of the three GP Fellows whose idea it was to develop the programme.

The applications to join the programme closed last week and I am please to see that we have nearly 70 excellent young GPs who have been successful.

This is really positive for the future of general practice in our area.

4. Revalidation and appraisals

I know that the profession has concerns about the workload associated with appraisals and the benefits of a process that leads to Revalidation and provides individuals with a "License to Practice". If you put that to one side and accept that there is a process, we need to ensure that the process makes the best use of the time and skills of all those involved in the process.

GP Appraisal was introduced in December 2002 and Revalidation stated in 2012. The LMC has worked closely with the local Appraisal Services in Wessex and also Bath, Swindon and Wiltshire to ensure that GPs are provided with help and support to ensure they get the most out of this and also that there is a fairness and consistency.

The LMC's view is that we have one of the best Appraisal Services in the country and one that is well respected by others. This has been helped by the relationship that we have with both Appraisal Services and also the work that the LMC has undertaken with Fourteen Fish to develop an Appraisal Toolkit and a Multi-source Feedback (MSF) and Patient feedback tool (PSQ).

Dr Susi Caesar, a local GP and Medical Director for Revalidation, on behalf of the RCGP, has also been very involved with the development of GP appraisals nationally and leads the Wessex Appraisal Service.

Susi in her role at the RCGP has launched a survey aimed at establishing how GPs feel about appraisal and revalidation now, and what the College can do to support them in the future.

Since the RCGP's last appraisal and revalidation survey in 2015, they have produced a number of resources and worked closely with stakeholders across the UK to reduce the burden of regulation and increase the value of appraisal and revalidation for GPs.

It would be helpful if you could complete the survey so we can find out how much progress we have made and what we could be doing better.
I have just completed the survey and it will take less than 5 minutes.
The survey can be accessed through this link: click here.
Best wishes
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Attached file: Oct 17 SNOMED letter.docx

Related guidance and emails...

Revalidation for Locums or Sessional GPs
Revalidation has started and Wessex LMCs are keen to offer support to GP locums with their preparation for revalidation. It has been...

Locum / Sessional GP Appraisal and Revalidation
The RCGP and GMC are aware that fulfilling appraisal and revalidation requirements can be more difficult for sessional GP’s and changes...

Trainee GPs
We are always keen to hear from GP registrars so please feel free to get in touch, we are here for you too. We try and get round all the...

Flu 2019/2020
Introduction The LMC recognises the vast amount of advice and information that is available for the seasonal influenza programme each...

Appraisals and Revalidation for GPs, Practice Nurses & Practice Managers
Wessex LMCs has produced a comprehensive guide for the Appraisal and Revalidation of GPs and Nurses. Please click on the image at the...
Swindon whilst also providing services to the Islands of Jersey and Guernsey.
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