

# LEN VALLEY PRACTICE AUTUMN NEWSLETTER

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## **Date for your Diary – Flu Clinics: October**

**Lenham: Saturday 15<sup>th</sup>, 8.30am-12 noon**  
**Harrietsham: Wednesday 19<sup>th</sup>, 3.00-5pm**

### **No appointment necessary.**

You should have the vaccination if you:

- are aged 65 years or over
- live in a residential or nursing home
- are the main carer of an older or disabled person
- are pregnant
- have a heart problem
- have a chest complaint or breathing difficulties, including bronchitis or emphysema
- have kidney disease
- have lowered immunity due to disease or treatment (such as steroid medication or cancer treatment)
- have liver disease
- have had a stroke or a transient ischaemic attack (TIA)
- have diabetes
- have a neurological condition, for example multiple sclerosis (MS) or cerebral palsy
- have a problem with your spleen, eg sickle cell disease, or you have had your spleen removed.

## **Extended Surgeries**

Since 2008 we have been running additional surgeries out of normal hours – 7-8am on Mondays and 6.30-8pm on Fridays. The funding that we receive for extra services has been severely cut and therefore we cannot continue this service beyond 30<sup>th</sup> September. We are able to continue our early morning (8am) phlebotomy (blood test) service. What we have done in recent months is offer more appointments during normal hours - 8.30am to 6pm, and have increased our triage service – this means that when all our appointments have been booked for the day, your details can be put on our triage list and a doctor will call you to discuss your problem and can

offer you an appointment for that day if deemed necessary.

## **Recent New Initiatives for Better Health**

### **Pulmonary Rehabilitation for People with COPD (chronic obstructive pulmonary disease)**

COPD affects more than 9,000 people in West Kent. At its most severe, the condition causes breathlessness, persistent coughing and significantly reduces a person's ability to carry out everyday activities.

Pulmonary rehabilitation can significantly improve patients' health and quality of life, by reducing breathlessness as well as increasing self-esteem and independence. It is an education and exercise programme which helps patients by reducing breathlessness and teaching them how to better manage their condition.

This programme will really benefit people with COPD by empowering them to manage their condition. It involves attending 14 two-hour sessions over seven weeks, which combine gentle physical exercise with education on topics such as breathing control, stress management and nutrition. Eligible patients are referred to the service by their GP.

## **Bowel Cancer Screening**

About one in 20 people in the UK will develop bowel cancer during their lifetime. It is the third most common cancer in the UK, and the second leading cause of cancer deaths, with over 16,000 people dying from it each year.

Regular bowel cancer screening has been shown to reduce the risk of dying from bowel cancer by 16 per cent.

Bowel cancer screening aims to detect bowel cancer at an early stage (in people with no

symptoms), when treatment is more likely to be effective. Screening can also detect polyps. These are not cancers, but may develop into cancers over time. They can easily be removed, reducing the risk of bowel cancer developing.

The NHS Bowel Cancer Screening Programme currently offers screening every two years to all men and women aged 60 to 69 and this will be extended to age 75 in the near future. If you are over 70 you can request a kit by calling the helpline 0800 707 6060.

GPs are not directly involved in the delivery of the programme but they are notified when invitations for screening are being sent out in their area. They also receive a copy of the results letters sent to their patients.

Eligible men and women receive an invitation letter explaining the programme and an information leaflet entitled [Bowel Cancer Screening - The Facts](#). About a week later, a faecal occult blood (FOB) test kit is sent out along with step-by-step instructions for completing the test at home and sending the samples to the hub laboratory. The test is then processed and the results sent within two weeks.

Around 98 in 100 people will receive a normal result and will be returned to routine screening. They will be invited for routine bowel cancer screening every two years if still within the eligible age range.

Around 2 in 100 people will receive an abnormal result. They will be referred for further investigation and usually offered a colonoscopy.

Around 4 in 100 people may initially receive an unclear result which means that there was a slight suggestion of blood in the test sample. This could be caused by conditions other than cancer such as haemorrhoids (piles). An unclear result does not mean that cancer is present, but that the FOB test will need to be repeated. Most people who repeat the test will then go on to receive a normal result.

## Chlamydia Testing

Chlamydia is the most common treatable sexually transmitted disease. 50% of men and 80% of women who have Chlamydia have no symptoms. Although people can get Chlamydia at any age, it is much more likely between 16-19 in women, and 20-24 in men. It can cause infertility. You should be tested if you have had:

- Two or more sexual partners in last year
- Recent change in sexual partner

- Non barrier contraception
- Infection with another STI

There is an on-going national programme which is targeting young adults age 15-24 yrs. There is a simple test which can be carried out by the patient themselves at the surgery - ask for a test kit when you visit your GP or practice nurse. Or you can ask at reception.

## Do you have difficulty getting to and from the surgery?

Then help is at hand. There are two transport schemes run by volunteer drivers – LIFT for Lenham residents, and FISH for the Harrietsham area. Contact the co-ordinators:

LIFT: Bob Breens 01622 858159 / Alf Smith 01622 859802

FISH: Marjorie Darby 01622 850657

## Why Do GPs Sometimes Charge Fees? Q&As

### Isn't the NHS supposed to be free?

The National Health Service provides most health care to most people free of charge, but there are exceptions: prescription charges have existed since 1951 and there are a number of other services for which fees are charged. Sometimes the charge is made to cover some of the cost of treatment, eg dental fees; in other cases, it is because the service is not covered by the NHS, eg providing copies of health records or producing medical reports for insurance companies.

### Surely the doctor is being paid anyway?

It is important to understand that most GPs are not employed by the NHS; they are self-employed and they have to cover their costs - staff, buildings, heating, lighting, etc - in the same way as any small business. The NHS covers these costs for NHS work, but for non-NHS work, the fees charged by GPs contribute towards their costs.

### What is covered by the NHS and what is not?

The Government's contract with GPs covers medical services to NHS patients, including the provision of ongoing medical treatment. In recent years, however, more and more

organisations have been involving doctors in a whole range of non-medical work. Sometimes the only reason that GPs are asked is because they are in a position of trust in the community, or because an insurance company or employer wants to ensure that information provided to them is true and accurate.

Examples of non-NHS services for which GPs can charge their own NHS patients are:

- accident/sickness certificates for insurance purposes
- school fee and holiday insurance certificates
- reports for health clubs to certify that patients are fit to exercise

Examples of non-NHS services for which GPs can charge other institutions are:

- life assurance and income protection reports for insurance companies
- reports for the Department for Work and Pensions (DWP) in connection with disability living allowance and attendance allowance
- medical reports for local authorities in connection with adoption and fostering

### **Do GPs have to do non-NHS work for their patients?**

With certain limited exceptions, for example a GP confirming that one of their patients is not fit for jury service, GPs do not have to carry out non-NHS work on behalf of their patients. Whilst GPs will always attempt to assist their patients with the completion of forms, for example for insurance purposes, they are not required to do such non-NHS work.

### **Is it true that the British Medical Association sets fees for non-NHS work?**

The BMA suggests fees that GPs may charge their patients for non-NHS work (ie work not covered under their contract with the NHS) in order to help GPs set their own professional fees. However, the fees suggested by the BMA are intended for guidance only; they are not recommendations and a doctor is not obliged

to charge the rates they suggest.

### **Can VAT be charged by GPs for some non-NHS services?**

Since 1 May 2007, certain medical services have become subject to Value Added Tax (VAT). This follows a European Court of Justice Ruling in 2003, and subsequent changes to VAT rules introduced by HM Revenue & Customs.

The original Court ruling made it clear that, where the main purpose of a medical service is the 'protection, maintenance or restoration of the health of an individual' then that service **should continue to be exempt from VAT**. All healthcare provided either through the NHS, or the private sector, is therefore not subject to VAT.

However, where the purpose of a medical service is not, primarily, the treatment of a patient (for example, the completion of medical insurance reports by a doctor), the Court ruled that this service should be subject to VAT.

### **Why does it sometimes take my GP a long time to complete my form?**

Time spent completing forms and preparing reports takes the GP away from the medical care of his or her patients. Most GPs have a very heavy workload and paperwork takes up an increasing amount of their time, so many GPs find they have to take some paperwork home at night and weekends.

### **I only need the doctor's signature - what is the problem?**

When a doctor signs a certificate or completes a report, it is a condition of remaining on the Medical Register that they only sign what they know to be true. In order to complete even the simplest of forms, therefore, the doctor might have to check the patient's entire medical record. Carelessness or an inaccurate report can have serious consequences for the doctor with the General Medical Council (the doctors' regulatory body) or even the Police.

### **What will I be charged?**

The BMA recommends that GPs tell patients in advance if they will be charged, and what

the fee will be. It is up to individual doctors to decide how much they will charge, but the BMA produces lists of suggested fees which many doctors use. Surgeries often have lists of fees on the waiting room wall based on these suggested fees.

### **What can I do to help?**

- Not all documents need a signature by a doctor, eg passport applications. You can ask another person in a position of trust to sign such documents free of charge.
- If you have several forms requiring completion, present them all at once and ask your GP if he or she is prepared to complete them at the same time to speed up the process.
- Do not expect your GP to process forms overnight: urgent requests may mean that a doctor has to make special arrangements to process the form quickly, and this will cost more.

### **Travel vaccinations**

#### **Are GPs obliged to give travel vaccinations?**

There are some travel **vaccinations** for which NHS GPs are paid for providing on the NHS. These include smallpox, typhoid, cholera, polio and infectious hepatitis (Hep A). There are public health reasons why the government chooses to pay for these vaccinations.

#### **Can I be charged for travel vaccinations?**

All other travel **vaccinations** can be charged for. The prescribing or providing of malaria chemoprophylaxis can also be charged for.

#### **Will I be charged for Hepatitis B vaccinations?**

Immunisation against Infectious Hepatitis (Hepatitis A) is available free of charge on the NHS in connection with travel abroad. However Hepatitis B is not routinely available free of charge and therefore GPs can charge patients for this vaccination when requested in connection with travel abroad

### **What about charging for Hepatitis B vaccination for occupational health reasons?**

GPs increasingly face patients requesting Hepatitis B for occupational reasons because they are dental nurses or about to enter medical school. GPs cannot charge for Hepatitis B in these circumstances. However, neither does a GP need to provide them under essential or additional services. Such patients can either seek vaccination privately (eg: through a travel clinic) or, as would be most suitable for those about to embark on training/work within the NHS, through an occupational health Hepatitis B Local Enhanced Service where this can be negotiated with the PCT.

A list of our current charges is available from reception. If you do require us to complete forms or provide a letter, we will provide you with an invoice, which is payable prior to the work being done.

### **Future Newsletters**

Tell us what you'd like to know about and we'll aim to include some information in our next newsletter.