

Dear Members and Friends,

We recognise and appreciate the resilience of GPs and practice staff who have met the challenges of the past number of months. We know that the “Back to School” period sees an increase in patients contacting their GPs most years, never mind against the background of an ongoing worldwide pandemic. GPs are playing such an important role in the “COVID-19 battle” and are undoubtedly preparing for a winter like no other and we want you to know that we are here to help you in whatever way we can.

We hope our recent circular on the flu vaccine (**available here**) provided some assistance as practices prepare to administer vaccines to young and old.

We have some “COVID-related” articles in this month's Medzine including an update on remote consultations, face mask exemption letters and what to do when patients refuse to self-isolate. We also include updates on ensuring full consent for third party records requests, address the Regulated Professions Bill, highlight changes to the Slainte agus Tiomant Guidelines and pass on some helpful tips for when you may employ locums. Our clinical corner includes helpful advices on referrals, e-prescribing and ear irrigation. This month, we also include another case study, kindly shared by a member, about a critical incident involving Lithium, which serves as a stark reminder to ensure monitoring of patients on high-risk medication.

Here at Medisec, we have also been busy with virtual Risk Education planning for the coming months:-

- We are pleased to announce an Autumn / Winter session of webinars aimed at practice staff members, covering commonly raised topics. The first webinar will address confidentiality, immunisation and managing complaints. The first session will be held on **20 October 2020 at 1.00 pm – 2.00 pm**. Please email events@medisec.ie if you or your practice staff members would be interested in attending. You might also save the dates for our next sessions: **10 November & 01 December**.
- Medisec is committed to supporting GP training and are happy to partner with Dr Paul Ryan, GP and Pharmacist and ICGP Therapeutics Lead to sponsor a webinar on “**Safely Prescribing Medication in General Practice**” to take place on **22 October 2020** to help GP registrars prepare for the CCT exam in November.

We are particularly aware of issues arising with extremely challenging patients who may have a history of dangerous or threatening behaviour being assigned to a GP's GMS list. In such cases, the GP Practice may not have the appropriate resources and facilities to deal with such patients and may be unaware of the reason the patient has been allocated to them in the first place. We are conscious of the difficult situation this presents for GPs and we are mindful of the safety of our members and their staff. We have raised our concerns with the relevant stakeholders and assisted a number of members in such situations.

We remind you to look after yourself and your loved ones and remember that we are here 24/7 to look after you.

Best Wishes,

Ruth Shipsey & the Medisec team



Requests for letters exempting patients from wearing face coverings

We are aware that doctors are receiving requests from patients to provide letters exempting them from wearing face coverings/masks on public transport, shops and in schools.

We have set out some advice on how to handle such requests.

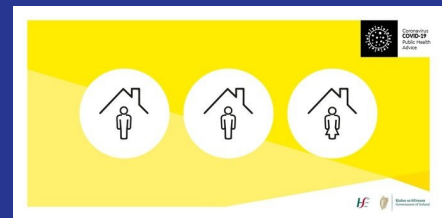
[Read More](#)

Patients refusing to self-isolate

We have recently been informed of situations where patients who are awaiting COVID-19 test results or indeed who have tested positive with COVID-19, are failing to adhere to self-isolation rules. When this information comes to doctors, it puts them in the very difficult situation of having to weigh up their concerns about the potential impact the patient's failure to self-isolate can have on third parties, against their duty of confidentiality towards their patient.

We have received a number of queries from doctors about what steps they can take in these scenarios and whether they are entitled, or obliged, to inform Public Health and/or other third parties.

[Read More](#)



Third party information requests- reminder to ensure patients understand nature and extent of disclosure

We regularly receive queries from members who have received written correspondence from a third party; for example, a solicitor or an insurance company, seeking the release of clinical records relating to a patient. Such requests often include an authority/consent form signed by the patient authorising the release of **“all”** their medical records held by the practice, rather than for a specified time period.

Prior to releasing sensitive patient records/information to a third party, we suggest that you take the following steps to ensure that your patient understands **the nature and extent**



of the records/information to be disclosed and that they provide informed consent to the release of their records/information to that third party.

[Read More](#)



Learning the lithium way

The moment the Psychiatry Liaison Nurse rang me about Ms X stating that she had been acutely admitted to hospital, I knew immediately the cause was lithium toxicity. What I did not know, and cannot answer to this date, is how she attended our practice for over a year and never had her lithium levels monitored. Thankfully she made a full recovery. When I next met her, I apologised immediately for the error and outlined what steps we had taken to ensure this would not happen again in the practice. The patient subsequently left the practice.

Two years after the incident, another doctor in the practice and myself were sued by Ms X. A month later a complaint was made to the Medical Council about me. How had this come to pass?

[Read More](#)

Clinical Corner

An ear to the ground – reducing your risks with ear irrigation

Ear irrigation to remove the build-up of cerumen (wax), is a common procedure performed in general practice.

While generally a safe and effective procedure, occasionally it can cause adverse effects to the patient, such as perforation of the tympanic membrane, otitis externa, vertigo, pain and tinnitus. The procedure should only be considered when other conservative methods of wax removal have failed (e.g. use of wax softening agents).

Patients with build-up of cerumen should receive education and advice in the first instance, which may reduce contributory factors and therefore negate the need for ear irrigation. This article examines the common complications of ear irrigation and provides some practical tips on how to reduce the risk of a claim or a complaint arising from this procedure.

[Read More](#)

E-prescribing and computer drop down menus

Since new COVID 19 legislation allowed for e-prescribing by GPs, in general it has been running flawlessly, significantly reducing administration time for GPs and facilitating patients who are due a routine repeat prescription without having to physically pick it up from the clinic.

It is generally accepted that there are fewer medico-legal risks associated with e-prescribing and it is an efficient and convenient method of ensuring that patients do not run out of their routine medications, while reducing face-to-face contact and complying with infection control measures.

[Read More](#)

[Referrals and e-referrals](#)

[Top tips for employing locums](#)

Due to the recent pandemic crisis we are aware that many outpatient services have been disrupted. They have been moved, deferred, temporarily suspended and; in some cases, cancelled altogether.

Medisec would like to highlight to members that critical referrals may warrant closer follow up than usual.

[Read More](#)

Doctors should ensure locum cover or other arrangements are in place to protect the safety of patients in the case of absence from work.

Read our top tips for arranging locum cover.

[Read More](#)



Remote consultations – useful reminders

Following on from our March circular providing top tips for video and telephone consultations (available [here](#)), we have set out some reminders of matters to be cognisant of when treating patients remotely. It is important to continue to treat remote consultations as formal consultations and not to lose sight of some of the risks that can occur.

[Read More](#)

Updates

Update to the Sláinte agus Tiomáint Medical Fitness to Drive Guidelines

Doctors should be aware that the Sláinte agus Tiomáint Medical Fitness to Drive Guidelines have recently been updated by the Road Safety Authority (RSA) in association with the National Office for Transport Medicine (NOTM).

[Read More](#)

Welcome changes in the Regulated Professions (Health and Social Care) (Amendment) Bill 2019

The Bill, which was enacted this week but is yet to commence, will bring about changes in the regulation of many healthcare professionals including medical practitioners, dentists, pharmacists, nurses and midwives. While many of the amendments relate to the recognition of professional qualifications and registration, there are several significant amendments to the complaint / fitness to practise process.

Read more about the changes to the fitness to practise process that will affect medical practitioners.

[Read More](#)

Get in touch

Due to Covid 19, our offices are currently closed;

please visit our [website](#) for all our contact details and do not hesitate to get in touch if you have any queries.

For general queries please telephone **1800 460 400** or **01 6610504**

General e-mail: info@medisec.ie

Ruth Shipsey, CEO,
ruthshipsey@medisec.ie

Danielle Gannon, PA to CEO,
daniellegannon@medisec.ie



@MedisecIreland
MedisecIreland

RT [@BallySnr](#): I have just published my final podcast on COPD. I will discuss the latest NICE 2019 & GOLD guidelines. I hope you find it use...

[19 hours ago](#) [reply](#)

RT [@ICGPnews](#): [#GPs](#) & [#PracticeNurses](#) don't forget to register for this evening's [#ICGPWednesdayWebinar](#) February 2nd at 8pm. See below for...

[yesterday](#) [reply](#)

