

Dr Steve Brown GP

Full Name:	Steven Leonard Brown	
Date of birth	12th February 1955	
Nationality	British	
		Qualifications
Universities	Cambridge 1974-1977	B.A. M.A.
	Birmingham 1977-1980	M.B. Ch.B.
	Open University 2001-2004	LLB (Hons)
	Nottingham Trent 2004-2006	LLM (Commendation)
Postgraduate posts	House Surgeon, The General Hospital, Birmingham. Mr Alexander-Williams. 1980 House Physician, Dudley Rd, Hospital, Birmingham. Dr A Paton. 1981 SHO Medicine. 1981 SHO Psychiatry. 1982 SHO Paediatrics. 1982 SHO O & G. 1983	
		FP Cert 1983
		DCH 1983
		DRCOG 1983
		MRCGP 1984
Trainee year	Dr N Howarth, Red Roofs Surgery, Nuneaton, 1983-84	
General Practice	Principle with Drs Webster & Miller, Coventry. 1984-1985 Principal, Revel Surgeries, Brinklow. April 1985 to present.	
		(FRCGP 2005)
		(DFSRH 2011)
Particular interests	Asthma Menopause Ophthalmology Practice organisation & Audit Musculoskeletal Medicine and rehabilitation Alternative medicine Psychological medicine Computers in medicine	
Appointments	Chairman Warwickshire MAAG 1991-2000	

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Research Fellow Warwickshire Community Care Development Project.1992-1994

Member Local Organising Team. 1992-1993

Associate Research Fellow University of Warwick 1992-2002

Medical Officer to local Army Camp.1985-2004.

GMC assessor for Poorly performing Doctors 1997 to 2007

EMP for Benefits Agency

GPwSI musculoskeletal medicine NHS Warwickshire

Hobbies

Organic Gardening

Walking & training the dogs.

Reading National Geographic

Cooking.

Learning to speak French

Bee Keeping

Professional Interests

General Practice.

After a short time in Coventry, I have been in my present practice since 1985. I am the Senior Partner. It is a rural practice of over 5000 patients. We offer a wide range of services and I have been able to continue to develop interest in the variety of General Practice & total patient care.

My main special interest is musculoskeletal medicine and I have also maintained extra interest in Ophthalmology, Asthma, the psychological aspects of medicine, audit & computers in medicine. I am keen that the practice should develop in such a way that we continue to provide high quality NHS services whilst allowing all the partners to maintain "special" skills & outside interests.

I was Chairman of the Warwickshire Medical Audit & Advisory Group during its ten years of existence. I enjoyed the challenge of my work with this group, particularly the project work & educational challenge. We were responsible for introducing medical audit into many practices and developed numerous multi professional links as well as developing audit projects which involved patient opinions & perceptions. I am particularly proud of the training courses I designed & ran for practice nurses & staff. Another particular pleasing aspect was the success of our guidelines setting workshops; these united GPS & consultants and proved exceptionally educational for all parties

I was a member of the DMC and I was also a member of the local trust audit committee.

I was a member of the steering group of Warwickshire Feedback Study - Medical Audit Project. This project was run by the department of Postgraduate Medicine, Warwick

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University. This project investigated the inclination & capacity of practices to undertake medical audit.

I was an Associate Research Fellow of the University of Warwick for ten years.

I worked as Research Fellow/Project coordinator on the Warwickshire Community care Project. This project was for 3 years & was intended to integrate the workings of the various professional groups involved in the introduction of Care in the Community. I was involved running workshops for all members of the primary care team & gained tremendous insight into the workings of all the professionals involved.

I have been a GP trainer since 1987. This is an integral part of our practice, coupled with our commitment to undergraduate teaching & the participation of the practice in practice nurse training maintains the educational activities of the practice & keeps us all on our toes.

The practice has an interest in medico-legal work, the need to make as much as possible of our advice and opinions evidenced based, again keeps us academically sharp. Considerable time is spent on medline or the Internet researching information about a wide range of physical & psychological injuries & conditions.

I was also a trained assessor for the General Medical Council underperforming doctors system and worked as an assessor for 10 years. I have also carried considerable amounts of work for the GMC solicitors as an expert witness. I have been an expert witness in many medical negligence claims and some criminal cases.

I was the lead partner for fundholding. I needed to sharpen up my business & negotiating skills.

I was the Civilian Medical Practitioner to the local army camp for almost twenty years. This involved the diagnosis and treatment of a multitude of musculoskeletal conditions. I was in overall charge of the rehabilitation including co-ordinating the onsite team of physiotherapists, army remedial gymnasts and gym staff as well as liaising and organising more intense external rehabilitation at the army centres.

I have worked as a Clinical assistant in Rheumatology & Accident & emergency. I was involved in a Project with the Primary Care Rheumatology Society to teach joint diagnosis & injection techniques to other General Practitioners.

I was the GPSI for musculoskeletal medicine for Rugby PCT (now NHS Warwickshire) for 10 years, running clinics, advising the PCT in the development of orthopaedic and musculoskeletal services as well as a remit for local GP musculoskeletal education

I am a member of the British society of Musculoskeletal Medicine, and regularly attend their various update courses, as a means of maintaining & developing my musculoskeletal skills. I have completed the 3 Year BIMM modular course.

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I have lectured at local colleges of higher education in medical computing on courses for doctors & practice staff. I still maintain an active interest in the further development of the use of computers in practice. We were a beta test site for software.

I completed an LLB with the Open University. My interest in law and medicine was furthered by completing an LLM in Healthcare law. This knowledge is integral to developing my knowledge and skills in terms of my work for the GMC, as an expert witness and as an Independent Advisor in local complaints but also in terms of legal and safety issues within the practice.

Experience in Previous Posts

After declining a lectureship in anatomy during my house posts I have tried to broaden my general skills. I was fortunate that all my hospital posts were busy, varied and involved a relatively high level of responsibility. I made full use of the opportunity to do specialist procedures, attend VTS meetings and specialist clinics.

House surgeon.

Busy general job, with a special interest in gastroenterology. I performed minor lumps and bumps surgery under local anaesthetic for one day per week. Considerable out patient work was included. I was also expected to work fifteen ours as front door casualty officer.

House physician.

A very busy post! Very general and varied.
I became proficient at various procedures, including doing over 100 liver biopsies.

SHO Medicine.

A varied and challenging job. I was responsible for a house officer and relayed directly to the consultant. Hence, I was "in charge" at cardiac arrests and did a considerable out patient work. My interest in asthma and chest medicine developed at this stage. I became proficient at cardiac pacing, flow directional catheterisation of the heart and pleural biopsies.

During this post I was also able to attend half day clinics in ENT and Orthopaedics.

SHO Psychiatry.

A mixture of general inpatient and outpatient psychiatry. I was acquainted with all aspects of psychiatry and developed my interest in hypnotherapy.

I was able to attend half-day clinics in ophthalmology and dermatology for 6 months.

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SHO Paediatrics.

General paediatrics. All aspects covered including neonates. I was responsible for putting neonates on ventilators and exchange transfusions as well as ward work and outpatients.

SHO Obstetrics and Gynaecology.

Varied general experience. Lots of D & C's, forceps and episiotomies, outpatient work. During this 12 months of paediatrics and O & G there was little time for outside clinics on a 1:2 rota. I did, however, complete a project to set up hypnotherapy for labour and taught Midwives how to teach the patients and run clinics.