

Newsletter November 2022

#### In This Issue

- LMC Meeting
- Eating Disorder Service
- Access to Records Programme
- Hospital Issues Log
- OPEL Task and Finish Group
- General Practitioners Defense Fund
- SY ICB Vacancy for Clinical Lead
- Cameron Fund Christmas Appeal

#### **GPC** Advice

- Appointment Data at Practice Level
- Health Education England Training Contract
- NHS Property Services Settlement Letters
- Letter from GP for travel with medication
- Your wellbeing

# LMC Meeting 14<sup>th</sup> November 2022

At our last meeting, the LMC discussed a range of issues in addition to those reported in this newsletter, including: Virtual Wards, Rotherham Primary Care Collaborative Board, Echo follow-up requests and Development & Innovation Monies.

# **Eating Disorder Service**

Since our last new article, there has been good progress on this issue. Dr Hendry - Consultant Adult Liaison Psychiatrist at Rotherham Mental Health Liaison Team - is now overseeing this process and meeting ICB Officers to discuss possible funding for full-time MEEDs nurses to support physical checks.

### Access to Records Programme

We previously advised GP Constituents of their options, including asking your system supplier to delay the roll out by using a template letter provided.

The implementation has once again been delayed, this time until the end of November. From discussions amongst LMCs on the national List server, there does not appear to be a firm legal basis upon which all patients could simply be switched to online access.

The situation in Rotherham was discussed at our last LMC Meeting, including support for redaction software to assist with the implementation. We are still awaiting further national guidance from the BMA and meanwhile the issue will be discussed at the National LMC Conference on 25th November.

We will update practices as and when we hear of any developments on the matter. Meanwhile, here's the link to the BMA advice:

https://www.bma.org.uk/advice-and-support/ethics/confidentiality-and-health-records/accelerated-access-to-gp-held-patient-records-guidance

# Hospital Issues Log

At the last Primary Care Collaborative Board Meeting, this was flagged as the best way to add issues to the TRFT incident log:

Any emails of concern should be sent to roccg.rotherhamccg@nhs.net

They will then be distributed to the allocated contract manager to raise, investigate, and report on.

## OPEL Task & Finish Group

The SY ICS feel that the best way for Primary Care to monitor and resolve resourcing issues is to establish a RAG-type system via OPEL, similar to the one currently in place in Doncaster. This is simpler than the offering from GPAS and involves completing a simple weekly report at practice-level which takes only six minutes. Doncaster currently have a LES in place to facilitate the process, which includes a menu of support for practices identified as struggling.

The LMC View ae supportive of this development. It looks simpler than GPAS with the advantage of being endorsed nationally by NHSE.

#### **LMC Meetings**

GP constituents are always welcome to attend meetings of the LMC as observers. Meetings are currently held online via Microsoft Teams until further notice. Please contact the LMC office if you wish to attend

**NEXT LMC MEETING:** 

14th November 2022

From 7.30 PM

#### **LMC Officers**

Chairman, Dr Andrew Davies ajldavies@hotmail.com

Vice Chairman, Dr Julie Eversden julie.eversden@nhs.net

**Medical Secretary Dr Neil Thorman** Neil.thorman@gmail.com

#### General Practitioners Defense Fund

This is a national body which collects and administers the 'Voluntary Levy' from GPs via LMCs nationally. At our last LMC Meeting, it was reported that there have been rapid developments in challenging the role and operation of the GPDF. It was acknowledged there was a loss of confidence, which would likely lead to a shake-up of the current Board.

An Emergency General Meeting of the GPDF was held on 18th November, and a local meeting via the SYLMC is scheduled for 21st November 2022.

# SY ICB Vacancy for Clinical Lead

skills necessary to take on this type of role.

The SY ICB vacancy for a Clinical Lead for Diabetes Prevention & Treatment & Care is now live on NHS Jobs

at https://beta.jobs.nhs.uk/candidate/jobadvert/D9133-801R

It a part time post (7.5 hours per week) that will provide strategic clinical leadership and expert advice, to influence the delivery of diabetes prevention, treatment and care across South Yorkshire Integrated Care System (SY ICB). Current or recent experience at working a senior level within general practice or in a Trust/Community with responsibilities in relevant disciplines is required. So it can be a AHP, GP, Nurse etc as long as they have the experience and the

LMC Office

Greg Pacey rotherhamlmc@hotmail.com www.rotherhamlmc.org

Disclaimer

The content of this newsletter is confidential and intended solely for GPs and Practice Managers in Rotherham.

# Cameron Fund Christmas Appeal

Every December, the Cameron Fund sends a small grant to beneficiaries to help them over the Christmas period. In 2022, there was a substantial increase in GPs and GP trainees needing help. It is anticipated that grant awards will soon reach their highest ever level. There are many reasons why colleagues need help including ill health, relationship breakdown and professional difficulties. This year the Cameron Fund have also assisted colleagues who have been affected by Covid, including those no longer able to work. The Fund is dependent on Local Medical Committees, other medical organisations and individual GPs for about half of their income. **This year the LMC have donated £1000 on behalf of Rotherham GPs.** 

#### **GPC ADVICE**

# Appointment Data at Practice Level

GPC England has met with NHS Digital to discuss their plans to publish GP appointments data (GPAD), which will be published at practice level on 24 November 2022, in the form of an annex to the current publication. NHS Digital also informed the BMA that this publication will be further updated for April 2023, integrating practice level data into the report, and a dashboard of appointment data at a practice level which will be available for Integrated Care Boards (ICBs) to access. We raised concerns about the accuracy of the data, and its potential use, and NHS Digital greed that further work is required.

# Health Education England Training Contract

It has been brought to our attention that training practices are being asked to sign a Health Education England training contract. As GPC England did not have input into the development of this contract, we are currently in the process of reviewing the contents. Practices who have not already signed and are unsure about doing so should either seek their own advice or hold off until you hear more from us.

# NHS Property Services Settlement Letters

We know that many NHS Property Services (NHSPS) practices across England have recently received 'invitation to settle' letters, ostensibly from credit controllers, seeking to encourage NHSPS practices to settle disputed historical debt with respect to non-reimbursable service charges. Understandably, some partners may read these letters with alarm, especially as they involve a common pressure tactic of requiring a response within a tight timeframe. Practices that engage with NHSPS on this issue should do their own due diligence. We wanted to take this opportunity to reiterate our guidance for NHSPS practices in dispute with NHSPS

#### Letter from GP for travel with medication

It has been brought to our attention that some airlines are advising travellers bringing medication in their hand luggage, should bring a letter from their medical practitioner confirming the type of medication and what it is for.

We have raised this issue with the airline, who advised that if a passenger packs their medication in their hold luggage, they do not require any of their medical information. However, if a passenger seeks to carry their essential medication in their cabin luggage, and the form of the medication contravenes aviation regulations e.g., the use of sharps, liquids more than 100ml or oxygen cylinders, they require the passenger to produce confirmation from their healthcare practitioner that the medication is necessary to be carried as it may be required on board.

However, as the advice on their website is not clear on this point as it advises passengers to take their medication in their hand luggage, and it does not specify which sort of medication requires a letter, we have written to the airline again asking for their webpage to be updated on this point.

Practices may choose to do this private work but are not obliged to do so. Practices should advise patients that they can print off their medical record from the NHS app, or alternatively, practices are able to charge for travel-related requests for information.

### Your wellbeing

A range of wellbeing and support services are available to doctors, and we encourage anybody who is feeling under strain to seek support. Please take a moment to check in on your colleagues' wellbeing and look out for each other.

Support comes in various forms, from our 24/7 confidential <u>counselling and</u> <u>peer support services</u> to networking groups and wellbeing hubs with peers, as well as the <u>NHS practitioner health service</u> and non-medical support services such as <u>Samaritans</u>.

See our <u>poster with 10 tips to help maintain and support the wellbeing</u> of you and your colleagues.

Please visit the BMA's <u>wellbeing support services page</u> for further information and resources.

For all other support, speak to a BMA adviser on **0300 123 1233** or email\_support@bma.org.uk