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LMC Meeting 17th July 2023

At its' last meeting the LMC discussed a range of issues, including: Medicines Safety Dashboard, Case Management, Delivery Plan for Recovering Access to Primary Care, Discharge Medications and Dopplers.

Bariatric Surgery - Proforma Letter

It is extremely frustrating that despite raising this as a significant issue within the ICS, there has been no further progress on this issue.

We are aware of the growing number of cases presented to practices, many of whom would not have qualified for NHS bariatric surgery. Once again, the lack of appetite within the SY ICS to properly support GP practices leaves practices with a very difficult dilemma, with each practice being left to decide individually how to manage their response to patient requests for follow-up.

It is not the responsibility of Practices to provide the routine necessary follow up of these patients and so patients should be encouraged to find a UK private provider to take over care for the first 2 years post operatively. Practices would however still be expected to provide general medical services for patients, should they develop complications from their surgery.

The LMC has provided a draft proforma letter with which practices may wish to use to try and help explain the situation to patients.

Inclisiran Prescribing

The LMC is currently having discussions with Medicines Management as to the LES required for the administration of Inclisiran as currently there is no mechanism for training or payment of practice nurses to administer it, and also that this is not a medication that GP's are familiar with and it would not be safe or appropriate for us to agree to take this on without a formal shared care arrangement.

Also, on a wider footprint there is an IMOC committee looking at traffic light drugs across South Yorkshire, and trying to bring them in line and there are also discussions about Inclisiran at a national level.

In these circumstances the LMC advice is not to prescribe until a funded/workable solution is found to the administration.

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:

17th July 2023

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*

LMC Office

*Greg Pacey
rotherhamlmc@hotmail.com
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Centralised Spirometry Proposal

Whilst this proposal is not what the LMC had hoped for (i.e. Spirometry based at each PCN), it did represent a workable temporary cost-effective solution, pending a more permanent South-Yorkshire-wide solution in due course.

RDASH Proposed Assessment and Formulation Changes

LMC Members met Julie Thornton, Care Group Director & Gemma Graham, Associate Director of Psychological Professionals at RDaSH to discuss the Primary Care Mental Health Pathway.

The LMC have numerous concerns regarding the capacity of the model, and there was a feeling this was PCN-centric. There were issues with band 7 non-prescribers and a sense that the ARRS roles have been appropriated away from providing support to primary care. The LMC felt that any new pathway should still allow direct GP access to RDaSH or at the very least a mechanism for discussion to enable patients to be referred directly where possible.

MGUS Project

Presentation slides with were shared with the LMC regarding monoclonal testing. The proposal was for automatic risk stratification for new monoclonal proteins. The service was seeking GP input to add background information and clinical data for semi-automatic referrals for risk 2 patients, for which there where were approx. 10 new cases per month across Rotherham and Barnsley.

Historically, GPs have already been dealing with this work, so the LMC felt that this wasn't a significant shift of work from secondary care to primary care. The formal risk stratification model was welcome, subject to a pilot exercise to assess its impact on GP workload.

Co-Option of Dr Kathryn Horridge

At the last LMC Meeting, Dr Kathryn Horridge was co-opted as a Sessional Member of the LMC, following the recent resignation of Dr Anne Mellor.

The LMC Membership now comprises: Dr V Campbell, Dr B Chandran, Dr J Colquitt, Dr A Davies (LMC Chairperson), Dr J Eversden (LMC Vice-Chairperson), Dr R Fulbrook, Dr K Horridge, Dr N Ravi, Dr S Sukumar and Dr N Thorman (LMC Medical Secretary)

Disclaimer

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

Integrated Sexual Health Drop-In Services

The LMC have received an update regarding the walk-in services, and been advised they can get quite busy and there is a set number who are seen on a first come, first served basis.

Walk-in services for sexual health STI screens

What age? 16 years and over

What we do – people with NO symptoms who want STI screens only

Where? 11 Mansfield Road Rotherham S60 2DR

When? Tuesdays 10-2pm & Wednesdays 3 – 7pm

Walk-in services for sexual health and/or contraception (under 25's only)

What age? Under 25's only

What we do – contraception and STI screens

Where? Rotherham sexual health service, Rotherham hospital

When Tuesdays 2pm – 6pm & Thursdays 2pm-6pm

Outreach Clinics for sexual health and contraception (under 25's only)

What age? Under 25's only

What we do – contraception and STI screens

Where? Maltby Leisure Centre

When? Mondays 3pm -6pm

CMDU Provision in South Yorkshire

Alex Molyneux, Chief Pharmacy Officer, writes:

Mechanisms have been utilised to progress a quick procurement and the ICB has now commissioned a Community Provider to take over the triage, diagnosis and prescribing of oral Covid-19 medication. However, it is unlikely to be able to deploy fully until the 23rd August. The ICB therefore hopes that Acute Hospital services will be able to maintain provision until this date to allow for continuous service during this period. After which they will step down the services of initial triage and most of the prescribing of oral Paxlovid.

The new provider will be working with GP practices on referral mechanisms and data sharing during this time. The ICB website will be updated with the new pathway and contact details as it goes live.

Around 20 community pharmacies have been identified across SY to be hold stock of oral Paxlovid and initially receive prescriptions from the community service. Agreements are being sent out for signature this week to the pharmacies. These details will also be available on our website.

GPC ADVICE

General practice responsibility in responding to private healthcare

The GPC has published guidance on general practice responsibility in responding to private healthcare, to help practices reduce this extra workload. Due to nearly 7.5 million people on NHS waiting lists in May 2023, patients are increasingly resorting to seeking private healthcare to deal with their health problems, which is adding extra workload for general practices. Our guidance covers what the responsibilities are for general practices in response to private providers making requests, such as making private referrals, providing medical information about patients, organising further tests, issuing prescriptions, and onward NHS referrals.

<https://www.bma.org.uk/advice-and-support/gp-practices/managing-workload/responding-to-private-healthcare>

Practice / PCN Income Ready Reckoner 2023-24

NHS England has updated the ready reckoner originally agreed at the start of the 2019-24 contract framework. It is intended to provide an indication of the changes in income streams that may affect a General Medical Services (GMS) practice and PCN from 1 April 2023. Figures are indicative, however, and do not provide a guarantee of income. Any questions or queries about the ready reckoner should be directed to info.gpc@bma.org.uk

<https://www.england.nhs.uk/publication/general-medical-services-ready-reckoner/>

Wellbeing Resources

Self-care is more important than ever for the demoralised and over worked GP profession. If you are feeling under strain the BMA can help, [read an account](#) on how the BMA supported an overworked doctor and find out how the BMA can support you during *#StressAwarenessMonth*.

A range of wellbeing and support services are available to doctors, from our 24/7 confidential [counselling and peer support services](#) to networking groups and wellbeing hubs with peers, as well as the [NHS practitioner health service](#) and non-medical support services such as [Samaritans](#).

The organisation [Doctors in Distress](#) also provides mental health support for health workers in the UK, providing confidential peer support group sessions. See our [poster with 10 tips to help maintain and support the wellbeing](#) of you and your colleagues. Please visit the BMA's [wellbeing support services page](#) for further information and resources.
