

Newsletter September 2025

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Upcoming contractual Changes from 1st October 2025

The GPC are acutely aware of the deep concern and growing frustration centered around the upcoming contractual changes on online consultations. This, against the backdrop of increasing workload, will be felt to be an additional monumental task for already heavily burdened practices and their staff.

At the GPC England meeting on 18th September, the committee voted to enter dispute with the Government, DHSC and NHS England from 1 October 2025 on the grounds of patient safety, workforce wellbeing, and GP risk.

Rotherham LMC have put together a summary of the advice regarding Online Access to General Practice, GP Connect, OpenSAFELY and inSYghts. Yorkshire & Humber Care Record and prospective online access. We will also publish this on our website and keep it updated when new information becomes available.



Read our advice here:

There is a more detailed analysis of all the issues from our colleagues at Berkshire, Buckinghamshire and Oxfordshire LMC (BBOLMC) which has been widely shared.



Available here:

LMC Meetings

GP constituents are always welcome to attend meetings of the LMC as observers.
Meetings are held alternatively online via Microsoft Teams or in The Boardroom of Rotherham Hospital. Please contact the LMC office if you wish to attend

NEXT LMC MEETING:

13th October 2025

From 7.30 PM

LMC Office

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

Chair, Dr Julie Eversden julie.eversden@nhs.net

Disclaimer

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

Locally, the SYICB position statement is here:

South Yorkshire Integrated Care Board (SY ICB) is aware of the impending changes to the GP contract due to take effect from 1 October. We recognise the importance of these changes and would like to take this opportunity to remind practices of the need to ensure they are meeting the requirements of the contract as soon as is physically possible.

The ICB will continue to work closely with NHS England to fully understand what these changes may mean for local arrangements currently in place, particularly where these may be superseded by new national policies. As further clarity emerges, we will provide timely updates and guidance to ensure practices are supported in adapting to the new requirements. In the meantime, we strongly encourage all practices to familiarise themselves with the proposed changes within the contract to ensure readiness and compliance from 1 October.

In summary Rotherham LMC recommends currently that you DON'T switch on GP Connect, and that you prepare your practices for online consulting from 1.10.25. We advocate taking action to ensure 'safe working' to protect patients and staff, which might include switching online access off when safe capacity is reached and filling in another PCCAD form to highlight any pressures to the ICB and/or emailing syicb-rotherham.primarcycare@nhs.net to ask for your practice to be changed to RED on the DOS.

The GPC has prepared guidance to assist preparations for the changes to the GP practice contract from 1 October 2025:

Guidance explaining the regulatory changes for 2025/26

GPC England has published guidance to explain the regulatory changes for 2025/26 and considers what these mean for your practice. We also set out advice for exactly how to remain compliant in relation to the three modes of access, i.e. walk-in attendance at the practice, contact via telephone, and contact via online consultation.

<u>Guidance providing practical advice on how to manage patient care safely post-1 October</u>

The following guidance provides practical advice on how to manage patient care safely from 1 October. It contains advice on reviewing your practice's workflow and triaging arrangements; considerations regarding the introduction of waiting lists for routine care; and reminders of how to revisit and use our BMA safe working guidance handbook.

South Yorkshire ICB Medicines Optimisation Website

Please bookmark this https://mot.southyorkshire.icb.nhs.uk and use this new website exclusively for all MOT documents from this date.

The new website has been developed to improve accuracy – a single location for all documents means less risk of using outdated materials, for easier access, consistency across South Yorkshire, and it will be more cost effective.

A short video demo walking you through the new site and its features is available here

A briefing has been developed 'Launch of NEW SYICB Medicines Optimisation Website' which has further information and can be accessed by clicking here

MSDEC - Medical Same Day Emergency Care

Please find attached documents summarizing the referral process for Medical Same Day Emergency Care (MSDEC). In short, primary care clinicians can refer suitable patients direct to MSDEC. Suitable patients would include potential DVT or need for urgent blood tests or imaging for ambulant clinically stable patients who can hopefully be discharged later that day.

For queries ring MSDEC on 01709 428266.







MSDEC Email.pdf MSDEC%20Referral% Medical%20Same%2 20Process%20-%20Fir0Day%20Emergency%

National Neighbourhood Health Implementation **Programme**

The <u>43 Places joining wave one of the National Neighbourhood Health</u> Implementation Programme (NNHIP), covering at least one Place in every new ICB footprint, have been announced by the Secretary of State and it has been confirmed that Rotherham has been accepted to join wave one.

Congratulations from the LMC to the team behind Rotherham's bid!

Mid-stream Urine Samples

Please note that following on from last month's bulletin, Labs will start rejecting MSUs in white topped bottles from 1st January 2025 as the results in red topped bottles containing boric acid are more accurate especially when there is any time delay between collecting and processing the sample in the Labs.

If a dipstick is indicated, dipstick from another sterile container and then decant into a red topped bottle to send off an MSU or provide the patient with both a white top for dipping and a red topping for sending to the labs.

(Red topped bottles cannot be used for a dipstick test as the boric acid inhibits leukocyte esterase dipstick reading)

Also, a reminder from Microbiology regarding **over 65-year-olds** and asymptomatic bacteriuria:

A dipstick will not help you: More than 10% have asymptomatic bacteriuria – this does not need treating as treatment does not prevent UTIs or hospital admissions but does drive resistance. Dark, cloudy or smelly urine is not suggestive of a UTI in an older person.

More info at:

https://www.gov.uk/government/publications/urinary-tract-infection-diagnosis/diagnosis-of-urinary-tract-infections-quick-reference-tools-for-primary-care#adults-over-65

Rotherham Vague Symptoms Pathway

Microbiology colleagues have noted that on a few occasions primary care clinicians have mistakenly asked for a cryptococcal antigen blood test instead of a corrected calcium blood test as part of the bloods screen for the vague system pathway (VSP), as the flowchart (see link below) references a 'cCA' test in the green box on the left.

The easiest way to ensure all the correct VSP bloods are done is to click on the vague symptoms button on ICE - it's under the radiology tab, which then automatically selects all of them. A reminder to those new to the Rotherham VSP that bloods, a FIT test and a CXR results must be in the record for radiology to allow GPs to order the CT chest/abdo/pelvis.

https://yourhealthrotherham.co.uk/wp-content/uploads/2022/06/Vague-Symptoms-Pathway-updated.pdf

LMC Buying Group Update

LMC Buying Group update - 26-27 Flu Vaccine information now available

In April, the Buying Group launched a new members' portal to replace its old website. The portal allows members to view details about suppliers, request quotes and see which suppliers they've used over the last four years.

The 2026-27 flu vaccine offers have recently been released and this information which includes pricing and how to order have been added to the members portal. If you haven't yet registered for access for the members' portal you won't have been sent this important information.

To set up login details go to: https://buying.plexusportal.co.uk/Register. Please note that the email to set up your password is automated so may end up in your junk/spam folder so check there and mark the email as not junk/safe sender so any future notifications go direct to your inbox.

Over the next few months, the Buying Group will be offering free cost analyses to members so if you'd be interested in taking part look out for an email from the Buying Group's Jenni Brooks.

The Buying Group is managed by Plexus Support Services Ltd and their contact details are below if you have any questions:

Tel: 0115 979 6910 / Email: info@plexussupport.co.uk

Website: https://www.plexussupport.co.uk

GPC ADVICE

DDRB pay award 2025-26

The Government has accepted the DDRB recommendations for 2025/26, which include a 4% uplift for NHS contractor/partner GPs as well as NHS practice-employed salaried GPs.

This means a supplemental uplift to global sum, additional funding within the PCN ARRS allocation and uplifts to the ceilings on reimbursable claims for SFE (Statement of Financial Entitlements) allowances including parental and sickness leave, applicable to both partners and employed colleagues.

There have also been changes in SFE entitlements for ARRS-funded GPs who are not employed directly by PCN member practices, giving their other employers parity in terms of claiming, for example, parental and sickness leave. These changes are all backdated to 1 April 2025; LMCs should ensure commissioners and practices are aware of the need to review and if appropriate uplift any claims already made from 1 April 2025.

Read our comprehensive FAQs document to help you understand the implications of the pay uplift and how it applies to your practice >

GPCE is aware this midyear change causes difficulties for practices and the BMA and Government have asked the DDRB to report earlier in terms of it's 2026/27 recommendations.

Training staff to support patients with LD & autism & Oliver McGovern Mandatory Training

The CQC revised position confirms that it's for practices to determine and ensure that learning disability and autism training is 'appropriate to the person's role' and that it 'will take a risk-based approach to this'. It also notes that 'We do not tell you specifically how to meet your legal requirements in relation to training. You are responsible for ensuring your staff are appropriately trained to meet the requirements of the regulations.' And that 'If we see that staff have not yet received training appropriate to their role, we will check what action you have taken to mitigate any potential risks for people using services and seek to understand your plans to address this. We asked CQC to ensure its team of inspectors are aware that they are expected to take this proportionate, risk-based approach. We understand that since publishing its updated guidance, CQC continues to have internal discussions about the OMMT Code of Practice.

https://www.cqc.org.uk/guidance-providers/training-staff-support-autistic-people-and-people-learning-disability