

## Newsletter – November 2020

### LMC Meeting 9<sup>th</sup> October 2020

At our last LMC meeting, we discussed a range of issues in addition to the newsletter articles here, including: Covid vaccination process and virtual wards and the Firearms Licensing process with GP practices.

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### Covid Vaccination Programme

The LMC shared the GPCE guidance on the COVID Vaccination Programme this week. (available here:)

<https://www.bma.org.uk/advice-and-support/covid-19/gp-practices/covid-19-vaccination-programme>

Dr Richard Vautrey, GPC Chairman, writes: - It was encouraging to hear [the news](#) of the successful Pfizer Covid-19 vaccine trial which brings widespread protection of the population against COVID-19 a step closer. This is the first of a number of potential vaccines that could become available in the coming months. There is though much that needs to be done to ensure any vaccine is safe and effective.

This only serves to increase the importance of successfully administering the vaccine when it potentially could be available for some patients from December

onwards. Once we have a safe and effective vaccine, we need to ensure it is given as soon as practically possible to our most vulnerable patients. We have therefore negotiated [arrangements](#) for general practice to be given the opportunity to lead delivery of the vaccination programme.

Practices are now in discussion with colleagues in their area and considering whether their practice can take part and if so how this will be implemented, as well as considering the impact on non-COVID patient demand as we prioritise services. Our [guidance](#) aims to answer as many questions as we can and directs you to further resources and links. It will be regularly updated.

We realise that this will be a huge undertaking for practices already struggling to cope with the impact of the pandemic and supporting the large number of patients with other healthcare concerns, but by combining new funding for additional capacity and deploying the workforce to align with appropriate clinical prioritisation, including use of locums to provide the additional capacity, practices and community teams can work together to successfully deliver the service.

### Covid Virtual Ward

A suggested pathway was discussed where patients with confirmed or suspected Covid who are seen at the hot hub or by the visiting service, are sent home with a pulse oximeter. The patients would regularly monitor their oxygen saturations and be given clear instructions about what actions to take with regards to accessing health care should their levels drop, in an attempt to reduce mortality and morbidity in these patients, as well as reduce unnecessary admissions.

Discussions are ongoing about monitoring of these patients, but it is hoped that this will be done via breathing space without the need for general practice involvement.

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### Deprescribing Initiative

The CCG have funded a small pilot scheme looking at deprescribing of SSRIs through the use of pharmacists due to the fact that anti-depressant prescribing costs have ballooned this year.

This is to see how effective interventions are and to check the size of the issue. The LMC expressed concerns that GP practices have been asked to validate patient lists and that this work is better suited to be done by GP's in a future

prescribing incentive scheme, which remains a possibility in the future depending on the outcome of the pilot.

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### **Prescribing Incentive Scheme**

The LMC recognised the work and effort that had gone into creating the targets for this year's prescribing incentive scheme and were very much in favour of continuation of the scheme, which has successfully helped drive down prescribing costs in the past. Concerns related to the short timescales and antibiotic prescribing targets were raised with the CCG, but had received some reassurances around support from the medicines management team and that surprisingly antibiotics prescribing had significantly reduced during the Covid pandemic and agreed to support it in its current form.

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### **Rotherham Safeguarding Children Partnership**

The issue about the amount of notice given to GP's to attend child protection conferences or provision of a report is a recurring one which GPs raise with the LMC from time to time.

The LMC discussed this with Dr Oughton, who advised that the Rotherham Safeguarding Partnership are to audit the involvement of GPs in safeguarding procedures and how recent reviews have identified GPs lack of involvement. The audit plans to review the reasons for this; sometimes GPs are not being invited and sometimes the

invite is too late for them to be able to provide a response. It's clear that the reasons are multi-faceted and are not any one agency's responsibility. Timeliness of requests for case conferences will also form part of the audit.

For review child protection case conferences, the date for these is generally set at the initial case conference. Practices can plan for these by diarising tasks / notifications to alert them in advance of the review to prepare and submit a report.

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### **Dermatology referrals from Sheffield Teaching Hospitals**

LMC Members considered a redacted patient letter received from Sheffield Children's Hospital requesting that "ALL future dermatology referrals (lesions and rashes) please be sent via eRS with relevant digital images attached" and referred to a Consultant Connect App.

**The LMC advise practices that, although changes might have been agreed in Sheffield between Sheffield Teaching Hospitals and Sheffield GPs, in the absence of any explicit agreement in Rotherham, GPs should carry on doing what they're currently doing.**

### **Blue badge (disabled persons) parking scheme forms**

<https://www.rotherham.gov.uk/benefits/blue-badge/3?documentId=89&categoryId=20053>

The RMBC website clearly states "We will not be able to accept a questionnaire that has been completed by your GP". Instead, patients may be asked by RMBC to consult a professional. "A professional is a person who is involved in the on-going treatment and support of your disability. It should be someone who is familiar with your experience of the condition and the way this affects your day to day life"

Examples provided were Clinical Psychologist, Educational Psychologist, Gastroenterologist, Neurologist, Occupational Therapist, Physiotherapist, Psychiatrist and Rheumatologist.

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### **Pathway for management of breast lumps in men**

LMC Members thought this reasonable, clear, and not representing any transfer of unfunded work to primary care. If GPs are in any doubt regarding their ability to assess within the pathway, or they have a clinical suspicion, they will still be able to refer.

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### **Nurses Pension**

Constituents are reminded that 'Final Pay Control' rules exist in relation to Section 1995 pension benefits. Practices should have due regard of these when

awarding pay rises to staff potentially approaching retirement. Further Information can be found here. There is an embedded fact sheet that is also helpful.

<https://www.nhsbsa.nhs.uk/final-pay-controls>

## GPC ADVICE

### **BMA COVID-19 guidance**

Read the GPC's **COVID-19 toolkit for GPs and practices**, to help answer questions on a large range of topics relating to COVID-19. There is also guidance on the following topics:

- [Model terms of engagement for a GP providing temporary COVID-19 services](#)
- [Terms and conditions for sessional GPs](#)
- [Risk assessments](#)

### **Medicines home delivery service**

The Community Pharmacy Home Delivery Service and the Dispensing Doctor Home Delivery Service have been commissioned for those identified as clinically extremely vulnerable on the shielded patient list for the national lockdown period in England, which means that all pharmacies and dispensing doctors will again be required to ensure patients on the Shielded Patient List receive their medicines at home.

Read more in this [letter to pharmacies and dispensing doctors](#) and in the [service specifications](#)

### **BMA GP Maternity Guide Launch**

A new guide has been launched:

<https://www.bma.org.uk/pay-and-contracts/maternity-paternity-and-adoption/your-rights/a-guide-for-gps-maternity-and-other-types-of-parental-leave>

<https://www.bma.org.uk/news-and-opinion/overcoming-obstacles-to-starting-a-family>

### **General practice workforce initiatives**

The GPC have published a guide to inform GPs & PCNs about the range of [workforce initiatives and schemes](#) in England. The guide includes helpful information about what is on offer in each of the scheme and how to apply for them.

### **Mental health and wellbeing**

The BMA continues to offer [wellbeing services](#) and confidential 24/7 counselling and peer support for all doctors and medical students, as well as their partners and dependents, on 0330 123 1245. Access the [BMA's COVID-19 wellbeing pages here](#).

### **Flu vaccine offers 2021-22**

The LMC Buying Group's recommendations can be found here.

<https://us11.campaign-archive.com/?e=%5bUNIQID%5d&u=ae8a08663d8d6e1465569f620&i d=6cb592c1a9>

### **LMC Meeting**

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

## NEXT LMC MEETING

14<sup>th</sup> December 2020

COMMENCING  
At 7.30 PM

LMC Officers:-

Chairman,  
Dr Andrew Davies  
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Vice Chairman,  
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If you have any questions or agenda items, or wish to submit appropriate articles for this newsletter

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