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LMC Meeting 13th December 2021

At our last meeting, the LMC discussed a range of issues including: Proposal for balancing capacity for the delivery of the Covid 19 vaccination programme and LES Specifications 2022-23. The current LES specifications have been revised and the LMC have reviewed and provided feedback.

New equipment from CCG for GP Practices

The LMC discussed the recent offer from the CCG on 8th December 2022 for in-Practice equipment, including 24hr ECG, BP, ABPI and FENO Machines for PCNs.

Our issues are:

- It is LMC opinion that this is a clear transfer of work
- Maintenance and service costs, and workload issues for practice regarding nurses and room for kit remain unidentified
- The need to allow practices to continue to use medical physics if they need to /want to in future
- The machines have training requirements and it remains unclear how long that would take, how often and how this is funded

The LMC position is that that this proposal requires a LES to undertake this work. Also, that practices may be reluctant to take on any new work at the moment and may not have capacity for it. Any granting of equipment should include maintenance and on-going consumables as well as training.

We are seeking clarity on whether acceptance of these machines is not considered by the CCG as agreement by the practices that they provide inhouse ABPI in perpetuity, without funding and footing the bills for future servicing, repairs and replacement, as well as ongoing funding being unaffected for the current service to be maintained by medical physics.

Temporary GP contract changes to support the COVID-19 vaccination programme

The changes to QoF are for all practices apart from the IIF. The new binary IIF indicator will be paid on the basis of all practices within a PCN being signed up to phase 3 of the COVID-19 Vaccination Enhanced Service as at 31 December 2021. As the IIF is PCN based, if there are practices who feel unable to participate, the LMC would be happy to support them in conversations with the CCG in regard to the PCN being able to cover for them.

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:

10th January 2022

From 7.30 PM

LMC Officers

Chairman,
Dr Andrew Davies
ajldavies@hotmail.com

Vice Chairman,
Dr Chris Myers
christopher.myers4@nhs.net

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

Executive Officer
Dr Julie Eversden
julie.eversden@nhs.net

LMC Office

Greg Pacey
rotherhamlm@hotmail.com
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Disclaimer

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

Quality Contract

A CCG paper is due out for consideration by the LMC in January 2022. It is anticipated that the Quality Contract will finally be shrunk down to focus on the areas which are currently being paid on-block, namely Access, Cancer and Demand Management.

LMC Elections

The LMC are mindful that Member elections are due in March 2022 and this represents an opportunity to re-align representation on the LMC with the PCN footprint. Currently, only the Health Village are not represented – but this may change with the retirement of Dr Myers and Dr Muthoo in March.

General Practice continues to be challenged from all directions, not least are the expectations on us to provide more and more services with a significantly reduced budget and a dwindling workforce. There are also local issues which are directly affecting practices in our area. Rotherham LMC has prided itself on being a small but highly representative body with good relationships with commissioners of our services over the years.

The LMC belongs to you, our constituents, and for it to remain local and representative we need local GPs, whether principal, salaried, locum, part-time, male or female to become involved. We will be writing to all GP Constituents in January 2022 with further details.

Shared Care Drugs Specification 2022-23

The specification has been updated to reflect current practice.

The CCG have advised that the process is that the consultant will do a clinic letter with the full plan and advise the GP on locating the most up to date shared care protocols on the CCG internet page (to prevent old versions being used and save on paperwork). The specialist nurses will then do updates at each blood test review and send the information to the GPs, and it is only if there is a problem and the patient isn't stable then there is communication to ensure the patient stays under monitoring at secondary care.

The LMC aren't happy with just being advised patients are being transferred out without confirmation practices are willing to take on the monitoring. These are high risk drugs and any transfer need to be more watertight. The LMC can't see the rationale for dropping this safety measure of confirmation and believe an absence of a response regarding Shared Care should never be regarded as acceptance. The principle that shared care arrangements should be signed-off by the GP is within the hospital contract.

GPs are reminded the BMA page in particular has lots of supportive information to prevent inappropriate or unsafe transfer of work into primary care.

<https://www.england.nhs.uk/wp-content/uploads/2017/07/interface-between-primary-secondary-care.pdf>

Dementia LES 2022-23

Work on the dementia LES remains frustratingly slow. Priorities and concerns are being gathered from all parties before a workshop planned for end of January. An offer of some funding from Dementia UK is very positive, but significant work still to do to identify funding streams with an aim for something more concrete in place by April 2022. The LMC remain involved.

ADHD Autism Referrals

The LMC were recently made aware of changes to the neurodevelopmental pathways which are now needed to accompany any referral for an Autism or ADHD assessment. This was only brought to our attention after being forwarded a letter from CAMHS which seems to retrospectively ask for these changes to be applied. Ignoring the fact that retrospectively applying new rules to historical referrals is unfair, it is disappointing that GP's and the LMC weren't informed or consulted about these changes prior to the changes being applied.

Concerns were also raised that the pathway seems to suggest that the referring clinician will be expected to co-ordinate the completion of the forms, which we don't feel falls within the remit of core General Practice work. We have contacted RDASH to feedback on the pathways and are hoping to have a constructive dialogue with them to gain reassurance and/or amend the pathways.

Feeding at Risk Policy

Concerns were raised about where the ultimate responsibility lies for these patients and we have received reassurance from SALT that responsibility will fall to the medic when the decision is not straightforward/requires alternative feeding and is medically complex. In this scenario the decision would be made through an MDT approach and therefore the burden of responsibility for any decision would be shared in our view. We have also gained reassurance that the referral system is an open one whereby anyone can refer including the patients themselves, carers and all health professionals.

Get Healthy Rotherham - GP Referrals

The LMC reviewed a letter regarding requests received via Get Healthy Rotherham to take clinical responsibility for whether patients are fit and safe to do an exercise programme. This is not something GPs should take on the risk or responsibility for. This is not part of the GMS contract.

We advise that GPs should just offer a SystemOne summary to Get Healthy Rotherham with the advice to give this to the trainer to let them make a decision as to what sort of exercise is suitable for the patient.

Support for GP Constituents

Primary Care Coaching - Toolkit

Dr Stones Steven Caine writes:

We are pleased to include our new communications toolkit, supporting promotion of the NHS England and NHS Improvement Looking After You national coaching service: <https://drive.google.com/drive/folders/1aS8-sTH1W9gv49d9Tq3hhwg9jJZZ5MFs>

Within the toolkit you will find social media images, banners, bulletin copy, website copy and quotes from those who have used our free services.

www.england.nhs.uk/lookingafteryou

ILM5 Primary Care Cohort - open to applications

All workshops will be delivered online via Zoom, and access to this platform will be crucial to be able to be part of this cohort.

*All applications must be returned to cdda-tr.NELAcademy@nhs.net, by **7 January 2022**.*

Website: nelacademy.nhs.uk

Return with Resilience Courses

Jane Torn writes:

These are FREE courses from the HEE SuppoRTT scheme aimed at those GPs currently out of post to prepare for returning to work and also GPs who have just returned.

January 7th, 14th & 21st -

<https://www.maxcourse.co.uk/HEEYHME/userCourseMatchListCourseDetails.asp?cKey=19130>

February 2nd, 9th & 16th -

<https://www.maxcourse.co.uk/HEEYHME/userCourseMatchListCourseDetails.asp?cKey=19131>

March 4th, 11th & 18th -

<https://www.maxcourse.co.uk/HEEYHME/userCourseMatchListCourseDetails.asp?cKey=19132>

New to Practice GP Program

Melanie Robinson writes:

This has been updated to allow the attendance of GP Locums. This opens the door for locums to access our educational and coaching sessions as well as PCN projects. Unfortunately, there is no additional funding for GP locums, however they can access the teaching and mentorship programme free of charge.

After a very successful first year, the "New to Practice" GP Fellowship programme is now registering its next cohort of new GPs from South Yorkshire to continue its offer of support and mentorship.

The funding for this programme has also been increased by NHS England (NHSE) to cover the actual sessional pay of the GP, for salaried GPs and partners. The NHSE scheme is a funded 2-year programme, suggested by the GP Partnership review, with evidence showing that it may help to increase the number of GP Registrars taking up posts in primary care in the local region.

The aim of the fellowship is to support early years GPs, as they start their careers in Primary Care as well as provide some peer support as they transition to independent practice. The aim of the fund is to provide help to GPs and their families tailored to their individual circumstances. This year and subsequent years will be difficult for the Cameron Fund, which is the only medical benevolent fund that solely supports GPs and their dependents, as the Fund faces increased pressure from those affected by the COVID crisis and a reduced income from investments. As such, they have launched a Christmas appeal to try and raise more money for the Fund to be able to help more GPs in need.

Registration

If you are a practice employing a newly qualified GP and you or they would be interested in more information please do not hesitate to contact us on the details below. We look forward to hearing from you.

Funding and registration queries: melanie.robinson7@nhs.net

Educational session queries: robert.eastman2@nhs.net

If you are a newly qualified GP (qualified within last 12 months) and wish to register for the Fellowship then please fill in the google form below, and we will be in touch. <https://forms.gle/nSwPRDG1NmHnDttLA>

NHS Covid-19 Vaccination Programme

We've passed the one year anniversary for the NHS COVID-19 Vaccination program. Since its inception, GPs and their teams all over the country have played a pivotal role in rolling out at pace the most successful vaccination campaign to date. The NHS has delivered now over 100m doses in just 12 months, including 18m booster jabs. The lion's share of this vaccination program has been delivered by General Practice. It's been a massive undertaking at significant personal costs for many of you and a huge team effort delivered in partnership with your communities. In the coming days and weeks many of you will continue to step up to the national priority of boosting this country through a surge of Omicron. Thank you for all that you have achieved and all that you will continue to do for your communities and for this nation.

New Chair of GPC England - Dr Farah Jameel

I am delighted and honoured to have been elected to represent GPs as the new GPC England chair at a time of enormous challenge to the profession and I would like to thank the former chair, Dr Richard Vautrey for his dedication and commitment to this committee and all that he has achieved over the years for the profession. I would also like to take the opportunity to thank the rest of the Executive Team, who I have had the pleasure of working with over the past 4 years. Working through the pandemic as a team presented enormous challenges and I want to acknowledge their tireless efforts on behalf of the profession.

Indicative Ballot

Report from new GPC Chairman

The main item of discussion following my election was the outcome of the indicative ballot. The ballot asked what actions practices might be willing to take in response to the lack of support from Government and NHS England for general practice in the face of unprecedented pressures, which risk the quality and safety of care GPs are able to offer patients. These included withdrawing from the PCN DES, disrupting appointment data, refusing to provide COVID vaccination certification and refusing to declare earnings.

Following a thorough and engaging debate amongst committee members, GPC is now considering the results in detail before deciding on the next steps, which will be communicated to members in due course. There have been some questions on social media about why we have not released these results. I have explained our position above, in addition, I am early in post, and commit to being completely open and transparent with you in as timely a way as possible. I promise to keep you updated, as I know that this is important to you.

New to Partnership Payment Scheme

This will be extended into the 2022/23 financial year and NHSE have now removed the requirement to apply within six months of commencing a partnership role. Following a review of the timeframe to apply for the scheme, and in acknowledgement of the challenges the deadline presented to busy new partners as well as the additional pressures created by the COVID-19 pandemic, NHSE has removed the six-month deadline, including for submitted applications that meet all other eligibility criteria. When the scheme comes to an end, there will be a cut-off deadline after the scheme closure date by which applications from eligible individuals must be submitted, and NHSE will give advance notice.

NHSE continues to encourage all individuals who have commenced in an equity share partnership on or after 1 April 2020 to submit their application as soon as they can after they become eligible. They are now reviewing all applicants this affects and updating their guidance to reflect the changes. Read [NHSE/I's primary care bulletin](#)

[New to Partnership Payment Scheme](#)

Temporary GP Contract Changes to Support Winter Pressures & Covid-19 Vaccinations

Following discussion with GPC, NHSE published a [letter](#) announcing changes to QOF and IIF and changes to the COVID vaccination DES. It has now provided [further guidance](#) on these changes.

Given the announcement on QOF and IIF, we hope practices will be able to consider how they could support the national vaccination effort while continuing to clinically prioritise patients who need them. We recognise the significant unprecedented challenges you are all facing at present and know that you will do your best in the days and weeks to come, as you have been doing these past 20 months. Thank you for all that you are doing for your patients, for your communities. [Read our press statement >](#)

Your wellbeing

The BMA is here for you and offers supportive wellbeing services which include face-to-face counselling. You can access one-off support or, after triage, a structured course of up to six face-to-face counselling sessions. Call **0330 123 1245** today or [visit the website](#) for more information.

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

[Read more about doctors' wellbeing during the pandemic](#) and on [Twitter @TheBMA](#)