

Newsletter May 2023

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#### **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:**

12th June 2023

From 7.30 PM

## LMC Meeting 15th May 2023

At our last meeting, the LMC discussed a range of issues, including: RESPECT (recommended summary plan for emerging care & treatment, which will eventually replace the DNACPR forms), LTC/Spirometry, Adult ADHD, PCCAD Menu of Support, IBS/IBD pathway and the Atopic Eczema in Children Clinical Pathway.

# Medical Emergencies in Eating Disorders (MEED)

It was noted that funding had been pulled for the proposed MEED Matron and one session of the Community Psychiatrist, resulting in a situation of nochange from when the LMC first raised this issue many months ago.

There were discussions around how to take LMC concerns forward in the face of organizational intransigence.

LMC View: There is a real risk that a child or adult might die without an appropriately commissioned solution in place to prevent it.

### Moving Rotherham

At the last LMC Meeting Gilly Brenner, Consultant in Public Health at RMBC, gave a presentation of the benefits of physical activity and the re-launch of the Moving Rotherham initiative, which comes under the Physical Activity and Health Subgroup of the Health and Wellbeing Board. This initiative would work collaboratively with partners across Rotherham. So what does this mean for GPs? The following issues were discussed:

- Encouraging employers to support their workforce to be active.
- Front-line practice staff to discuss and signpost physical activity with patients.
- Practices making every contact count.
- Strengthening social prescribing, including embedding physical activity.
- Physical activity training for clinicians, by clinicians.
- Active travel home visits.

To find out more, contact Gilly at:

gilly.brenner@rotherham.gov.uk

#### **LMC Officers**

Chairman, Dr Andrew Davies aildavies@hotmail.com

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#### Disclaimer

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

### Virtual Wards

At the last LMC Meeting, Dr Rod Kersh, Consultant Community Physician, gave a talk about Virtual Wards.

This started in December 2022 and so far over 300 patients have been treated, and currently averaging 15-20 patients per week. The offer includes elementary monitoring and consultant-level input for patients with unclear situations / diagnosis. Treatments are offered for a variety of situations including falls, cellulitis, IV antibiotics, delirium and chest infections. The underlying philosophy is to keep patients out of hospital where appropriate.

Should they be deemed appropriate they are admitted to a Virtual Ward. This provides care from the place that they call home. e.g. care homes. A treatment plan is put in place and patients are monitored 24/7 with continuous data sent back to the Community Hub for review. Following completion of treatment, the patient is discharged back to the GP.

Referrals come in from the Rotherham Urgent Community Hub on 01709 426600

### **Quality Contract**

The LMC considered a paper from the ICB regarding Standard 7 of the Quality Contract (QC) with the proposal to withdraw £150K that currently focuses on LTC KPIs and to reinvest these monies by putting the Medicines Safety Dashboard (MSD) into the QC.

LMC View: The LMC would like an open discussion about what is in the MSD. In principle as part of acknowledging that the MSD becomes part of the QC, there will need to be a clear plan for down-sizing and addressing the fundamental problems within the dashboard.

### **GPC ADVICE**

### Preparing for balloting on industrial action

Last month, the BMA's GPs Committee for England voted in favour of preparing to ballot GPs in England on industrial action if the Government does not agree to improve the contract drastically in forthcoming negotiations with us.

The Government is pushing General Practice to breaking point, and we are taking a stand. Yet again, ministers have dealt GPs a massive blow by imposing disastrous contract changes on us that we rejected. Current working conditions are already running GPs and practice staff into the ground, and these contract changes threaten the safety of our patients. We are simply asking for a contract that preserves general practice in the long-term and keeps patients safe. If Government are unwilling to change the situation, balloting will be our only remaining option to save general practice from

collapse. We are therefore asking you to join us as we prepare for potential industrial action.

By law, only BMA members can participate in a ballot on industrial action. If you are a member, it is essential that you make sure the details we hold for you are up to date to ensure your vote counts. Update your member details on the BMA website or join us as a member today.

### **New GP Access Regulations**

On 15 May, the new access regulations come into force for GMS and PMS contract-holders. These changes were imposed after GPC England roundly rejected NHSE's proposals for the 2023/24 year.

The access regulations are fundamentally misconceived. It is not possible to meaningfully increase patient access without dealing with the issue throttling the access in the first place – workload and capacity in general practice. During contract negotiations we made clear our concern with this superficial approach to dealing with systemic problems, and forcefully bargained for real solutions. Unfortunately, our proposals were rejected, and the Government has elected to push forward with these changes.

We have developed guidance for practices to help them navigate this. The key change practices need to be aware of is that patients cannot be asked to call back another day; instead, patients must be offered an appointment, offered "appropriate advice or care", signposted to a service or resource, asked to provide further information, or informed as to when they will receive further information about the services that may be provided (having regard to urgency of clinical needs and other relevant circumstances).

https://www.bma.org.uk/advice-and-support/gp-practices/gp-service-provision/gp-access-meeting-the-reasonable-needs-of-patients

### **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.