

Newsletter

In This Issue

- GPC South Yorkshire Roadshow
- LMC Meeting 13th May 2024
- Shared Care Prescribing for GPs in Rotherham
- GP Locums

GPC Advice

- GP Ballot for Collective Action
- Covid Therapeutic Guidance
- Agenda For Change DHSC Payment – Practice Nurses
- National Visa Support Service for GPs
- Updated GMC Good Medical Practice

GPC South Yorkshire Roadshow Protect Your Practices, Protect Your Patients

Wednesday, June 12 · 1:30pm - 4:30pm Mercure Sheffield Parkway Hotel

Britannia Way Catcliffe S60 5BD

Free event and open to all GPs in the area. Practice Managers are very welcome.

Please arrive for **registration at 1.30pm for a 2pm start.** Tea/Coffee/Water and Biscuits will be provided.

Join us to hear face to face from the National GPC England Team:

Dr Samira Anane - Deputy Chair of GPC England Dr David Wrigley - Deputy Chair of GPC England

Hear about Phase One of GP action starting with a ballot of GP Contractors and Partners from 17 June - 29 July. Listen to expert KC opinion on the risks associated with any action, and why what we are proposing will be safe for you, your staff, your business and your patients.

See the vision, strategy and aims for the months ahead leading up to and after the general election.

Hear how the wider team of Salaried GPs, GP Nurses and Practice Managers will be essential for success.

A chance to discuss and debate with other peers, understand the ballot and what is safe action for you as a contract holder. Meet local BMA officers and collect your campaign materials to take back to the practice.

Places are limited so please click on the eventbrite link below to book your place and get more information.

https://www.eventbrite.co.uk/e/take-action-protect-your-practices-protect-your-patients-tickets-907516404997?utm-campaign=social&utm-content=attendeeshare&utm-medium=discovery&utmterm=listing&utm-source=cp&aff=ebdsshcopyurl

May 2024

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 June 2024

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 rotherhamImc@hotmail.com www.rotherhamImc.org

Disclaimer

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

LMC Meeting - 13th May 2024

The LMC discussed a range of issues including: Lipid Management Pathway, Rheumatology Referral Pathway, Adult ADHD Shared Care Pathway, We Are With You Shared Care Agreement, LTC plans for Autumn 2024 and the Connecting GP Data project.

Shared Care Prescribing for GPs in Rotherham

The LMC are concerned about the current arrangements for agreeing, continuing, and resourcing medication shared care within our ICB area, particularly in Rotherham Place. We have written to the Chairman of IMOC to clarify their position on sustaining shared care prescribing in Rotherham.

A recent document which highlighted the ICB's ambition to unify shared care procedures across the area suggested, as an interim measure, that Places adopt shared care protocols from neighbouring areas. This has drawn attention to the inequity in shared care resourcing across different places.

Rotherham is unique among ICB Places in lacking a mechanism to fund shared care procedures. For example, Barnsley has its Enhanced Service, Sheffield has its SCP basket, and Doncaster reserves the implementation of IMOC-agreed shared care protocols until local commissioning arrangements are in place.

We believe the urgent implementation of a procedure similar to Barnsley's Enhanced Service is essential. Initially, an Item of Service process will be necessary to identify a realistic level of resourcing. It must be clear that shared care cannot be funded as part of core GMS/PMS contracts; it represents a transfer of work from secondary to primary care and should be resourced accordingly, with at least a proportion of its funding provided from outside of ring-fenced primary care budgets.

GP Locums

At the last LMC Meeting, Dr Amy Small, locum GP and representative to the BMA Sessional Sub-committee for Yorkshire & The Humber, met Members to discuss current issues for locums.

It was noted that, locally, there has been a drop-off in work for locums, and vacancy management for locums is somewhat ad-hoc, with a mix of word-of-mouth and software apps such as Locum Deck and Nightingale. For GP Practices who are not already using these Apps, details are as follows:

Locum Deck https://www.nasgp.org.uk/locumdeck/

Nightingale https://www.nightingaleapp.co.uk/

GPC ADVICE

GP Ballot for Collective Action

GP leaders have voted to ballot on potential collective action in England. The ballot will be open to GP contractors/partners and, if there is a majority vote, then doctors will be able to take action immediately; the BMA will not direct GPs to breach their contracts in this initial phase.

Collective action can include limiting the number of patient appointments per GP per day to the recognised safe working maximum level of 25 – something the BMA has been highlighting since 2016.

It can also mean GPs will stop or reduce work that they're not formally contracted to do, but, because of pressures elsewhere in the NHS, has been passed onto them, without any additional resource. This is on top of not having enough funding to carry out their own essential care services.

This could include the completion of fit notes, prescriptions or investigations which should have taken place in the hospital setting or asking Trusts to communicate with patients about re-booking hospital appointments.

The ballot will be open to all GP contractors and partners. We need you to vote YES, to send a message to Government that we are ready to stand up for a better service for our patients, and to protect our practices.

To vote in the non-statutory ballot, please login to bma.org.uk and check your details are correct. We must have the right information for your vote to count, so please double check. If you have any issues updating your details, please email gpcontract@bma.org.uk for further assistance.

The ballot will open on 17 June and close on 29 July 2024. Please look out for an email from Civica which will allow you to vote.

Covid Therapeutic Guidance

Further to the <u>guidance</u> sent out last week about COVID therapeutics, we have had multiple reports of ICBs trying to push this prescribing to General Practice, with minimal funding and support. It is very important to be clear that prescribing of the first and second line agents Paxlovid (Nirmatrelvir plus ritonavir) and Sotrovimab (an IV medication) are not suitable for prescribing routinely through General Practice.

Clinicians running Covid Medicines Delivery Units (CMDUs) are clear the assessment of these patients is time consuming due to the large number of interactions and contraindications, and often requires input from specialist colleagues before prescribing. The first line drug (Paxlovid) is very difficult to prescribe, as it has interactions with many common and specialist medications that many in these patient groups will be taking (e.g. Amlodipine). Even with increased eligibility, GPs would not see sufficient numbers to prescribe this drug safely, and doing so would be contrary to the GMC's good medical practice guidance.

We therefore recommend that GPs do not agree to prescribe Paxlovid unless as part of an appropriately commissioned specialised service. We would recommend you contact your LMC if you feel pressured to prescribe or feel unhappy at how this is being dealt with by your local system.

Where traffic light systems are in place maintaining as a 'red' classification supports the need for a separately commissioned service. We are clear that governance of ICB Medicines committees must allow GPs to refuse such prescribing in line with GMC guidance. Read our guidance.

Agenda For Change DHSC Payment - Practice Nurses

There have been articles published in the past month in some Nursing journals regarding a 'pay boost' for practice nurses being funded by the Department of Health and Social Care. This relates to an initiative last year, where the Government offered staff on Agenda for Change pay scales a cash boost - information can be found <u>here</u>.

We appreciate that the vast majority of practice nurses working in general practices are not working on Agenda for Change contracts which align with AfC pay scales, terms and conditions - those practices will *not* be eligible to receive the payment.

National Visa Support Service for GPs

As part of the closure of NHSE's Primary Care Workforce Team, the national Visa Support Service for GPs and GP practices currently provided by the team will also be closing. National support for practices, ICBs, regional teams and GPs with visa queries will end on 31 May 2024 and other responsibilities such as funding visas and providing practice matching are moving to ICBs under the new NHS England operating model. Individual GPs with immigration concerns can get free advice from our <u>Immigration Advice Service</u>, and the following contacts will apply after the 31 May 2024:

- Visa related queries and issues should be raised directly with the dedicated NHS Visa Team at the Home Office via UKVINHSTeam@homeoffice.gov.uk.
- Queries relating to the 4-month visa extension for newly qualified GPs should be raised with NHS England's Overseas Sponsorship Team via england.sponsorship@nhs.net.

Please note that existing NHS England visa support for sponsored GP trainees, and GP and practices participating in the International Induction Programme will continue to be provided. BMA members with concerns about this can contact the BMA's International Team info.international@bma.org.uk

Updated GMC Good Medical Practice

All colleagues should note the recent update to the GMC's Good Medical Practice (GMP), which sets out expected standards for all doctors in the UK; this came into effect on 30 January 2024 and replaces the 2013 version.

Please see: Key changes to Good medical practice 2024