

Newsletter – September 2020

LMC Meeting 14th September 2020

At our last LMC meeting, we discussed a range of issues in addition to the newsletter including: articles here. Mental Health Primary Care Prescribing Review Initiative, Medicines and Falls, NPSA Emergency Steroid Card, Eating Disorder Pathways CCG Capital Programme for GP Practises and Digitalisation Monies.

Rotherham Practice Flu Plan.

At its last meeting, the LMC Debated the Rotherham Practice Flu Plan. The CCG has offered support in the three areas of infrastructure, staffing and PPE. The LMC encourage practises to make reasonable applications for funding related to extra infrastructure.

CGL Shared Care Transfers

With regards to shared care transfers, CGL have requested that practices could start to take new presentations into shared care as there are large numbers who need to be seen and potentially staff may have to be moved back.

CGL need shared care transfers as new

presentations to the service are increasing and as no-one is moving into primary care CGL are looking to move staff back to base prescribing. The patients at CGL are stable and ready for transfer.

Medical Appraisals Support for GPs

There are several organisations offering help and support to doctors experiencing difficulties; information and links to useful resources are provided in the attached document and will be added to our website.

If you identify a doctor with a wellbeing need and none of the resources seems appropriate, please remember the option to speak to your appraisal lead for further suggestions and advice. This can be done anonymously if need be.

An advice sheet is attached.

Face to Face Consultations

There has recently been media coverage about a letter being circulated to practices regarding face-to-face appointments.

The LMC note that It has never been the case that face-to-face appointments were not required when necessary.

The regulations, which require patients to be managed in the manner determined by the practice in consultation with the patient, remain unaltered as the measure of the service we must provide.

Wound Care Proposal

The LMC were willing to accept the compromise for the continuation of a temporary service to aide a smooth transition into the permanent service, but with two significant caveats:

The first and most important is written confirmation from the CCG that the two-week threshold is not to be carried forward into the permanent service. It is the LMC view that practices should be allowed to immediately refer these patients into the permanent service when this set up, without any is timeframe for care within the practices being stipulated. Without this commitment the LMC would not be able to endorse the current plans for the temporary service.

The second is that in accepting the compromise to provide this first two weeks of work then this should be funded with an item of service payment, as there is for post op suture removal.

DVLA Licences s88 of the Road Traffic Act 1988

During COVID many drivers' licences have expired and the DVLA gave extensions so that they could continue to drive and work. For many drivers though this extension is coming to an end. Drivers are now being told by DVLA to ask their GP if they are "fit to drive" so that they can continue to drive under Section 88 of the Road Traffic Act 1988 (RTA 1988). DVLA has produced a leaflet which explains RTA 1988.

Most GPs are not confident to advise patients whether they are fit to drive, and in normal we circumstances would provide a factual report for DVLA so that their expert medical advisers can decide upon fitness. If we provide an opinion that someone is fit, and then an accident occurs, are we liable? If we say a patient is not fit, then this can adversely affect our long term relationship with that patient. For these reasons, if you have any doubt about whether a person is fit to drive, you should decline to provide this assurance. and write to DVLA should explaining that you cannot give an opinion, but offering to provide factual information about a person's health.

Practices could have an explanatory note on their websites or noticeboards, so that patients are forewarned that this is what your policy is.

GPC ADVICE

QOF at-a glance

NHSE have now published revised QOF quidance which details the requirements for 2020/21. This guidance is effective immediately and the Statement of Financial Entitlement will be amended shortly to reflect this.

The GPC have drafted a QOF at-a-glance document, which summarises the changes for QOF for the remainder of 2021/22. In light of COVID-19, QOF has been refocussed to:

support practices to reprioritise aspects of care not related to COVID-19
serve those patients most in need of long-term condition management support
guarantee significant income protection and the relaxing of some requirements for practices.

Delivering the flu vaccination programme

Practices working in their PCNs where appropriate are encouraged to work together with pharmacies to support a successful 2020/21 flu campaign. This is even more important in light of COVID-19, and the challenges that we face in delivering this year's flu programme.

As in previous years, this is a national service with both practices and community pharmacies providing NHS flu vaccinations, and we all have a role to play in identifying and engaging patients and vaccinating to protect as many as possible at a very vulnerable time.

This year the new Investment and Impact Fund includes a shared goal across the PCN to provide immunisations to patients 65 years and over and this includes those given both by practices and pharmacies in the area. Read more in the <u>GP contract</u> <u>agreement document</u>

Indemnity for flu vaccinations

All three Medical Defence Organisations (MDOs) have confirmed that they will provide indemnity cover, at no extra charge, for practices who vaccinate their own staff against flu this year. The GPC are in discussions with NHSE the indemnity about arrangements for staff for vaccinations any coronavirus vaccine that may become available.

Remote fit notes - please remember to sign them

DWP has asked the GPC to remind GPs that as per previously agreed guidance, they will accept fit notes that are printed, signed, scanned and e-mailed to patients. This advice has also been given to employers, who should also be accepting signed, scanned and emailed fit notes.

However, the DWP is receiving a significant number of unsigned fit notes which they cannot accept, and this results in inconvenience for both patients and GPs. We would therefore remind GPs that fit notes must be signed.

Mental health and wellbeing

BMA continues The 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. For hard copies of our Wellbeing poster, please email wellbeingsupport@bm a.org.uk. Access the BMA's COVID-19 wellbeing pages here

Supporting Mentors Scheme and GP Fellowship programme

Following the 2020/21 GP contract agreement, NHSE has now launched the <u>Supporting Mentors</u> <u>Scheme and GP Fellowship</u> <u>programme</u>, as part of a group of GP recruitment and retention initiatives.

The supporting mentors scheme aims to support the training of at least 450 GPs as mentors, who will then form a cohort of locally based and highly experienced doctors each support who can between 4-6 mentees. GPs on the scheme will be provided with funded training, to a recognised leading mentoring qualification. Once trained, GP mentors will be reimbursed to conduct one session of mentoring every week.

GP mentors will be able to connect with newly qualified doctors on the <u>GP Fellowship</u> <u>programme</u> and to support them into become part of the local primary care team.

RCGP. Practice and PCN support and development services

Victoria Gaffney, Relationship Manager at RCGP writes:

Our services include support for practices with adverse CQC ratings, CQC Inspection preparation, strengthening leadership, enhancing practice communication, PCN support, workforce analysis and embedding new roles.

Do take a look at our website <u>https://www.rcqp.org</u> <u>.uk/primary-care-</u> <u>development.aspx</u>

Let me know if you'd like an informal chat about how the RCGP could best support practices at this time.

Tel: 07818 372764 <u>Victoria.Gaffney@rcgp.org.uk</u>

LMC Meeting

GP constituents are reminded that they are always welcome to attend meetings of the LMC as observers. The Committee usually meets on the second Monday of every month in the Board Room at Rotherham General Hospital. However, meetings are currently held online via Zoom until further notice. Please contact the LMC office if you wish to attend.

> NEXT LMC MEETING

12th October 2020

COMMENCING At 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

If you have any questions or agenda items, or wish to submit appropriate articles for this newsletter

CONTACT US AT THE LMC OFFICE c/o: -Greg Pacey Rotherham LMC

rotherhamImc@hotmail.com www.rotherham.Imc.org