

LMC Committee meeting July21- Update for practices

Topic	Update Update
We Are With You	Catherine Wooley from 'We Are With You', (www.wearewithyou.org.uk)
	attended the committee as a guest speaker.
	We Are With You is a supportive organisation for people who are addicted to
	substances and was formally known as Addaction. Patients can access the
	service by self-referral or with a referral from a healthcare professional. They
	also have a telephone line and chat function on their website:
	www.wearewithyou.org.uk/services/lincolnshire-lincoln
	We Are With You aim to respond within forty-eight hours, the patient will then
	be triaged and their needs assessed before being assigned a key worker.
1	 Lincolnshire LMC will be working with We Are With You to open
	communication between the organisation and GP practices in order to inform
	the GP of relevant details when a patient has been advised to visit their GP.
Donulation Health	
Population Health	Derek Ward (DW- Director of Public Health) and Vic Townshend spoke to the
Management DSA	committee about the PHM programme. They explained that the work is to
	improve the pathways and fundamentally change the system to ease the
	pressure on services.
	The main points raised by the Committee were about whether there would be any additional waylend why there is a payment involved and why is there are
	any additional workload, why there is a payment involved, and why is there a
	clause about other people/ organisations being able to access the data in the
	future. DW explained that the payment is to officially form a legally binding
	contract. DW clarified that the clause about access is to make sure all
	necessary organisations can access the data if anything were to change in
	future. For example; if the NHS IT provider was changed, the new company
	would need to access it so they can fix the computers. The Committee was
	assured that due diligence has been done regarding IG.
	The Committee agreed for the LMC to promote information events but cannot
100 5	advise practices what to do as the LMC is not an IG or data protection expert.
ICS Development	Committee was informed that the LMC has been invited to join the clinical
	directorate meetings. We have also asked to be involved in the appointment
	process for a GP representative at the ICS board, which has been agreed
PCN Alliance	 An invitation has been extended to the PCNA to have a representative attend
	LMC committee meetings, this has been accepted by Dr Sadie Aubrey. A
	representative from the LMC secretariat will also be attending future PCN
	manager meetings and PCN clinical director meetings.
Palpable Neck Lump	A new Palpable Neck Lump pathway is being piloted in West Lincs. Committee
	members discussed the service and provided feedback about how well the
	pathway works. Feedback was largely positive however one area for
	improvement, lack of follow up, was identified. This will be fed back to the
	pathway developers.
GP Dissatisfaction	• Recently there have been discussions with the CCG about GPs wanting to leave
	general practice or move to work in other countries. The CCG have produced a
	list of the things they think are impacting on GP job satisfaction and they have
	asked the LMC to have input. The committee discussed this and the LMC
	secretariat will feed comments back to the CCG.
GPC Update	 In June GPC voted to disengage with NHSE/I negotiations due to their
	behaviour, (sending information with the press and other channels before
	informing GPs and the negative public perception that followed). There is a lot
	of work taking place to re-engage and re-start negotiations.
	 Other work taking place has been around covid-19 regarding face coverings



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. Jp. .	and PPE.
	Transition to ICS is also a very hot topic.
COVID-19	GP Covid Capacity Expansion Fund (GPCCEF)
COVID-13	Practices should have signed up
	FAQ
	Lots of questions regarding end of lockdown such as use of PPE and mask
	wearing, awaiting revised SOP
	Regular updates on-going available at <u>LMC website</u>
	CoViD Vaccine
	COVID-19 Vaccination Autumn / Winter (Phase 3) Planning Guidelines
	discussed
	Palliative Care/End of Life
	Emergency care plans on terminal bleeding, diabetes management, and spinal
	cord compression in production.
	Educational podcasts planned with palliative care focus.
	Temporary shortage of oxycodone has been escalated to MMO but should not
	affect general practice. Plans to look at improving communication around
	future drug shortages.
STP/CCG	Planned care
,	LMC working with Planned Care and Cancer Recovery Group.
	Clinical Pathways
	Palpable Neck Lumps pathway being piloted in West locality
	DVT pathway being developed to include point of care D-dimer testing, to be
	commissioned from practices/networks
	Estates
	Premises Cost Directions still not published
	Practice Resilience
	Multiple LMCs now working together to develop an OPEL reporting system for
	workload pressures
	Enhanced Services/ DCAs
	Committee discussed ES/DCA team's commissioning proposal/ plan.
	Committee view that most ES/DCA should be done on a block contract model
	with tapering to allow for high or low activity. To be fed back to CCG.
	Transitional Care
	LMC committee members discussed the transitional care beds proposal which
	outlines a possible payment structure.
CQC	Move from to Direct Monitoring Approach from Transitional Monitoring
	Approach. This will review information on a monthly basis & update the CQC
	provider page accordingly.
	LMC/CQC event took place on 6 July 2021for practices; a recording will be
	made available on the LMC website.
Dispensing	Pharmacy Needs Assessment (PNA) practices were encouraged to complete the
	survey.
Pharmacy	GP Community Pharmacy Consultation Scheme
	Now been being used county-wide though slow uptake from practices
Primary/Secondary	Mortality Collaborative
care interface	Mortality collaborative asking for practices to death audit on all deaths within
	30 days of hospital discharge. Representatives from LMC have advised that we



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	 ULH Contract Compliance Week held 21-25th June, results will be shared at the next committee meeting
	 LCHS Working with LCHS to have a S1 and EMIS template for Authorisation to Administer so no paper documents will be required Post-COVID referral process discussed with LCHS as some referrals rejected inappropriately Still issues with community teams and practices having poor communication. LMC advice is to build relationships by having regular informal meetings to discuss issues.
	 LPFT Working to get improved communications and standard letters Eating disorders service working group being set up to create a properly structured service- LMC involved Private providers Still issues regarding onward referral from private to NHS. LMC working with
Axe the fax	CCG to iron this out. Still no list of emails for ULHT
Councils	 Coroner Community Medical Examiner role will be rolled out in all areas, what this means we are not sure, LMC attending meetings to shape the model for Lincolnshire.
	 Health checks New software currently being rolled out to practices Positive feedback from pilot practices
Police	Firearms • Still awaiting GP portal
	 Older drivers Leaflet for older drivers now complete and will be circulated to practices.
Healthwatch	LMC infographics now available on <u>LMC website</u>
GP Fellowships	GP fellows now starting. GP fellows will be working with LMC to do research into impact of Total Triage, and perceptions of PCNs
Trainees	 Remote/virtual central training to continue until end of 2021. No training rooms or PGME for trainees or trainers currently due to building work. One Lincoln TPD has now left post, the second TPD to retire end of July. Three new TPDs have been appointed for Lincoln. One further TPD has been appointed for Boston and another Boston TPD post is advertised.
LMC Practice Calls	LMC has been making calls to practices to check in, offer support and gather



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Торіс	feedback. • Several themes: • Workload pressures • Practice teams struggling to maintain work/ life balance and avoid burnout • FAQs & weekly updates continue to be well received and feedback about the LMC is generally very positive.
Impact Lincs Service	 <u>Take-30</u> is a service available to all practice staff providing support to work through daily challenges. <u>Impact Lincs</u> is the LMCs Mentoring & Coaching service also available to all practice staff. <u>Wellbeing pages</u> available on LMC website.
LMC Development Centre	Information about LMC training & events is available via the LMC website. • New LMC Podcasts can be accessed here • NEW LMC Educational Webinars are available via the LMC website
Training Hub	 Lincolnshire Training Hub is setting up a GP to GP mentoring programme for junior GPs working in Lincolnshire. The programme aims to help GPs embed into the local primary care team, build networks and support them to reach their goals. If you are a GP interested in being mentored by an experienced GP then please complete this short 3 question survey to help us tailor the service to your needs: https://forms.gle/J1Tmy3gnE2YvejEKA Lincolnshire Training Hub is also looking for experienced GPs to support junior GPs through mentoring. For more information, please contact pollybegum@nhs.net
Next LMC committee meeting	Thursday 9 th September If you would like further information about LMC committee meetings, or you would like to attend as an observer, please contact rosa.wyldeman@nhs.net