

LMC Committee Nov 21- Update for practices

Торіс	Update
GP earnings declaration	 Declarations of earning requirement was discussed and agreed that LMC would support any GPs who did not submit their earnings due to concerns regarding victimisation or identity fraud. Post meeting note- this requirement has now been delayed until earliest Spring 2022
Discharge to assess	 Discharge to assess is the process by which patients are discharged from hospital prior to care plans being in place with an expectation that a social care assessment will happen after discharge. There is no responsibility for GPs to be involved in this process. If practices identify that patients are discharged and come to harm due to there not being a care package in place, this should be highlighted by completing Datix report.
DSQS 2020/21	 NHSE have circulated an audit for practices to complete as part of the DSQS. This audit of anticoagulation is only a suggested audit. Practices can complete this audit for DSQS but can choose to do other audits if they prefer.
Industrial action	 LMC discussed the indicative ballot which practices have responded to about actions which they would take to protest government not providing adequate support for General Practice. Committee agreed that some form of action needs to be taken and that this should not just be practice-based but should be action that all GPs could undertake Post-meeting note- The indicative ballot has suggested that 80% of practices would be prepared to not share appointment data 60% of practices would be willing to withdraw from the PCN DES in April
Pilgrim hospital service	• LMC is concerned regarding services moving from Pilgrim to Lincoln County and is drafting a letter for practices to send to MPs to request that the MP investigate this.
Winter Access Fund	 LMC is working with the CCG to identify how the WAF can be utilised One proposal is to commission an external remote provider of consultations. LMC has concerns that this will not help as remote providers do not know local systems and pathways and may just push work back to practices. Better would be to use this funding to support recruitment and to stop workload transfer from secondary and community care.
QOF	 Some practices have received underpayment of QOF and this has now been reimbursed. Practices should check their QOF payments historically and approach the CCG if there are discrepancies. LMC is happy to support practices if the CCG does not recognise the underpayment.
Covid-19	 FAQ Regular updates on-going available at <u>LMC website</u>
Flu 2021	 LMC has written to CCG to request confirmation that flu clinics can be used as extended hours and improved access appointments.



	practices to provide g
STP/CCG	ICS developmentJohn Turner has been appointed as Chair of the new ICS
	ICS structures include a medical directorate which will include GP and LMC
	representation
	 Planned care Agreed that as a system Lincolnshire will no longer do "expedite" letters as
	this does not actually benefit patients. Comms will go to practices, hospital clinicians and administrators, and be shared with the wider community
	IT/Digital
	 WebV for X-ray and pathology requests still awaiting technical fix, more information will go to practices when technical issues sorted.
	Finance
	 LMC working with CCG to develop new funding structure for enhanced services and other services which move from secondary to community settings
	Practice resilience
	Task Force-
	 LMC working with CCG and PCNA to develop a "Task Force" to
	provide support to struggling practices and share best practice.OPEL/GPAS
	• GPAS will be starting in Lincolnshire in Jan 2022. This will require
	practices to provide LMC with activity data once a week so that we
	can report to the Lincolnshire system what the "GP Alert Status" is across the county
	Recruitment
	 LMC working with CCG and PCNA to develop a recruitment plan to fill workforce shortfall
	Enhanced services/DCAs
	 Ongoing work especially in relation to wound management and leg ulcer services. Final draft of new specifications coming to LMC in January 2022.
CQC	• CQC are not doing routine inspections but will target inspections to practices which are flagged by CCG, complaints, or through monthly data searches.
Dispensing	Dispensing fee cut
	 Due to increased dispensing volume during the pandemic there has been
	triggering of the lower rate of dispensing fees which has cost practices
	c£0.34 per item
	BMA GPC have lobbied to have this reversed
Dhawaaay	DDA suggest practices write to their GP using a <u>template letter</u>
Pharmacy	GP Community Pharmacy Consultation Scheme
	 Issue raised that some pharmacies are not providing GPCPCS despite being signed up to provide the service
Primary/secondary	signed up to provide the service. Contact Compliance Week
care interface	 Good engagement from providers regarding contract compliance week
Care interface	 Good engagement from providers regarding contract compliance week Flow charts developed to support colleagues
	Med3 flow Investigations flow C2C referrals Prescribing chart.pptx chart.pptx v3.pptx guideline.pptx
	LPFT
	 Issues regarding Crisis Team not engaging with patients raised with LPFT, this is being investigated
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	• Standard, abridged, clinical letter being developed which should include comments about patients' fitness to work
	Private providers
	 Private providers including BMI and Fitzwilliam approached regarding flow charts above to ensure they also follow these
Councils	Coroner/Medical examiner
	• Community MEs have been appointed and we are awaiting to see what their role will be
Police	Firearms
	• New national firearms policy published. This now brings the rest of the country in line with Lincolnshire
Child protection	Safeguarding funding proposal .
	 VAT should not be charged on safeguarding reports
	 New funding proposal made by CCG for reports has come to a halt and LMC are awaiting an update
People board	General practice representation at peoples board
	• LMC and LTH concerned regarding people board engagement with general practice, this is being raised by PCNA representative who attends people board on behalf of general practice
DACEE	
PACEF	 Meeting report Work ongoing regarding updated Oral Nutritional Supplementation guidelines
	 LMC have raised issue of practices being asked to titrate medication. PACEF asked to consider a countywide policy that specialists titrate medication prior to transfer of prescribing to general practice.
	 Inclisiran has been given "green" traffic light status. Practices can administer Inclisiran and claim for the Personally Administered Item via the monthly FP34D submission. This will fund the practice the cost of the drug and approximately £10 for recall and administration.
Medical school	BMedSci projects
	 Two sets of students doing research with the LMC for their BMedSci projects The impact of Total Triage
	 The impact of PCNs Students will be seeking views from clinicians and non-clinicians
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.
Lincolnshire GP Society	 LMC has started Lincolnshire GP Society. Meetings will be held in three locations across the county and will involve social gathering and education. Next meeting is due to be held in February, date to be confirmed pending
	Covid-19 guidance.