

Practice In Touch

A newsletter from

lincolnshire *lmc*

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IMPROVING 2-WEEK-WAIT REFERRALS

by Dr Kieran Sharrock | LMC Medical Director

During the pandemic the way in which 2-week-wait (2WW) referrals have been managed by secondary care providers has had to change, as many diagnostic procedures could not be carried out due to infection risk. 2WW referrals which previously may have gone direct to investigation are now being triaged by senior clinicians who can best decide what next steps should be taken.

The move to senior clinician triage has identified that many 2WW referrals do not have enough information for the clinician to make a balanced decision. A recent audit of upper GI 2WW referrals identified that 20% of referrals did not have all of the requested information.

To improve the 2WW process some of the 2WW referral forms will be changing over the coming months. The LMC is working with secondary care providers to develop and adapt the forms, and these will be integrated into clinical systems when they are rolled out.

It is essential that all requested information is completed in the 2WW forms so that the patient's journey is not delayed whilst this information is gathered.

Things you can do to ensure that patients can be dealt with appropriately when referred on a 2WW pathway

- Use the 2WW form which is integrated in the clinical systems so that they auto-populate
- Complete the "functional status" tick boxes as this allows triaging clinicians to understand whether or not the patient is able to be sent straight to diagnostic testing
- Enter detailed information in the "reason for referral" section to paint a picture for the triaging clinician
- If you cannot complete the entire form as some information is missing, use the "reason for referral" section to explain what your concerns are and why you are referring

GENDER IDENTITY AND GENERAL PRACTICE

By Dr Kieran Sharrock | LMC Medical Director

Gender identity issues and how they should be managed in general practice is one of the most frequent areas of practice which the LMC receives queries about.

Lincolnshire LMC has created a short guide to gender identity issues which is available on our website.

This guide will not answer all of the questions but should answer most, and hopefully will signpost you to where to find more information.

[CLICK HERE](#) to view the full guide.

CONSIDERATIONS FOR SINGLE-HANDED GPs

by Kate Pilton | LMC Chief Operations Officer

When we think of business continuity planning for our practice, we don't often consider practice continuity after death, but this is a real consideration for single-handed GPs.

It can be a grim reality for families that should the death of a single-handed GP suddenly occur; the practice's GMS contract will fall after 7 days.

We would encourage all single-handed GPs to consider adding another partner to their contract to help negate this situation. The second partner does not necessarily have to be a GP.

The benefit of having a second non-GP partner is that if the GP were to die, that up to a 6 month period can be granted in which to find a new GP to join the contract, before it would fall.

Obviously partnership should not be entered into lightly & due consideration should be given to all the responsibilities of being a partner & partnership.

Further guidance on this matter may be found [here](#), or if you require further information regarding this subject please do not hesitate to contact the LMC office.

RCGP ARMED FORCES VETERAN FRIENDLY PRACTICE ACCREDITATION FOR GPs

Asking the question “*Have you ever served in the in military?*” is critical to improving healthcare for our veteran population. There are an estimated 2.4 million veterans in the UK, many have complex needs.

There are Veteran-specific services tailored towards this potentially vulnerable patient group and veterans may be entitled to priority treatment for conditions related to military service. Many GPs do not know which of their patients are veterans or how many are registered at their practice.

From this Veterans' Health Awareness webinar you will gain insight into the veteran community including some of the common physical, mental and psychosocial problems affecting veterans. You will understand the Armed Forces Covenant and what this means in Primary Care.

Improve your awareness of where and how to sign-post to veterans' services and how to join over 877 practices in England already signed-up to the RCGP veteran accreditation programme.

Your speaker, Dr Veronica Grant FRCGP is RCGP Clinical Champion for Veterans' Health. Dr Grant has over 12 years experience as a GP which has included working a Civilian Medical Practitioner for Defence Medical Services. Dr Grant has extensive NHS Primary Care experience combined with educator roles as a GP trainer and Training Programme Director. Dr Grant also has personal experience as a military spouse during her husband's career serving in the Armed Forces, and thereafter with insight into the challenges faced whilst transitioning into civilian life as a veteran.

Wednesday 19th May | 18:30-20:00

[CLICK HERE](#) to register

ADMIRAL NURSE DEMENTIA SUPPORT IN LINCOLNSHIRE

By Dr Kieran Sharrock | LMC Medical Director

Admiral Nurses are all qualified nurses with a professional specialism in dementia. Admiral Nurses work together with families to provide the one-to-one support, expert guidance and practical solutions they need to live more positively with dementia each and every day.

Their clinical knowledge and skills help prevent crisis and build carers resilience which in turn supports families to maintain quality of life and a sense of control. They also work alongside other professionals in the dementia care pathway, sharing best practice.

What type of support does an Admiral Nurse provide?

Conduct a specialist assessment with families who have complex needs and devise a plan to address these.

Provide psychological support to help people with dementia and their families understand and deal with their feelings, thoughts and emotions.

Give practical advice and strategies aimed at preventing and managing situations that can arise after a dementia diagnosis.

Equip carers with stress management techniques and coping strategies, provide specialist carer education and training.

Manage and coordinate care, when required

Work together with families using therapeutic and educational interventions

Work in liaison with other professionals and organisations to make sure that families obtain co-ordinated support

Advocate for families who might not know the best questions to ask, or who to ask them of, and can help families prepare for complicated processes such as continuing healthcare assessments. or finding suitable long-term care

Who can access the service?

The service will be available to people with dementia and their family carers with complex needs who are registered with a GP practice in Lincolnshire. Family carers of people with dementia will be able to access support if they live outside of Lincolnshire if the person with dementia that they care for has ordinary residence in Lincolnshire.

When is the service available?

The service is available Monday to Friday 9-5pm. However, it may be possible to arrange visits outside of these core hours to meet the needs of family carers.

How can people access the service?

Patients can be referred to the Admiral Nursing Service using a form which is available in SystmOne and EMIS. A copy of the referral form is also available on the LMC website.

Referrals will be triaged by an Admiral Nurse to identify if they are appropriate for casework. Patients previously known to the service can self-refer for further episode(s) of support.

What are complex care needs?

- A person with dementia has a diagnosis or suspected diagnosis of dementia
- Where there is a high risk of carer breakdown/stress; lack of support services involved
- The person with dementia has been admitted to hospital twice within in the last 6 months or at high risk of needing to go into hospital because of their dementia.
- When there is a clash between the needs and wishes of the carer and person with dementia.
- When the carer finds it difficult to understand- or coming to terms with the diagnosis and how this affects the person with dementia and themselves. Or the carer is finding it hard to understand the needs of the person with dementia
- When the family affected by dementia do not have family or friends close by who can help to support, or when the family need help to express what support they need and how to access support services.
- When the carer needs specialist practical skills training, information and advice, emotional support for e.g. carer fatigue, loss, transition and changing relationships, managing behaviour that challenges (that cannot be met by existing support services)
- To help the family make decisions about end of life care/advanced care planning at the earliest opportunity.

[CLICK HERE](#) to access the referral form.

IMPROVING GP APPOINTMENT DATA

By Kate Pilton | LMC Chief Operating Officer

NHSE/I has published information aimed at improving the quality of GP appointment data. This is to ensure that published general practice appointment data fairly represents the appointment activity carried out across practices and general practice providers in England.

This year's PCN Investment and Impact Fund provides additional funding to support this through an indicator covering the mapping of appointment slot types to the new set of national appointment categories by all practices within the PCN.

This should only require a short one-off exercise, mapping each slot type that the practice uses to one of the national categories. Practices should note that this only relates to appointments from 1 April 2021 onwards and shouldn't require changes to wider processes or appointment books.

Details of the appointment mapping process can be found at [NHS England » Network Contract Directed Enhanced Service – Standardised GP Appointment Categories – 2021/22](#)

This topic will also be discussed further at the GP Contract Changes event on 6th May 2021. Book a place for the event here, [Lincolnshire LMC: Event details: GP Contract Changes 2021/22 Update for Practice Managers \(lincslmc.co.uk\)](#)

NHS Digital are hosting several [webinars](#) to supplement this guidance and the categorisation. There are also some short demonstrations that cover how best to carry out the national mapping exercise:

- EMIS WEB users: [GP Appointments Data \(GPAD\) - HowbeckHow2](#)
- TPP SystemOne users: [GPAD Mapping - TPP Demo - Google Drive](#)

PROSTATE SPECIFIC ANTIGEN (PSA) CHANGES TO NICE GUIDANCE

By Dr Kieran Sharrock | LMC Medical Director

NICE have recently amended their guidance with regard to referral thresholds for abnormal PSA.

Old NICE guidance said to refer asymptomatic patients depending upon their age-related PSA (50-59 ≥ 3 , 60-69 ≥ 4). The new guidance says to refer asymptomatic patients of any age if PSA ≥ 3 .

This is a small change, but would increase the number of referrals to urology, and also the number of investigations which would subsequently be carried out. East Midlands Cancer Alliance (EMCA) have debated this change and have decided to keep local guidance the same as the old NICE guidance, and labs will continue to report normal ranges depending upon age-related PSA.

If you see an asymptomatic patient and PSA ≥ 3 you can refer at any age, but it would be best practice to discuss the risks and benefits of further investigation before making the referral. A more pragmatic approach may be to repeat PSA after three to six months to identify trend in PSA.

Symptomatic patients, with haematuria or suspicious feeling prostate on DRE, should be offered referral irrespective of PSA result.



take-30

AND LET'S TALK

Not quite 100% but can't quite put your finger on what is wrong? In need of a break but not able to switch off?

You don't need to wait until you feel overwhelmed; talking things through can help to let off steam and release that build-up of pressure.

It may feel small and insignificant at first but locking your feelings away can lead to feelings of being overwhelmed and out of control.

DON'T JUST STRUGGLE ON

CONTACT US: 01522 576659

EMAIL: info@lincslmc.co.uk

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HEALTH VISITOR & 0-19 SERVICE ATTENDANCE AT SAFEGUARDING MEETINGS

by: Dr Kieran Sharrock | LMC Medical Director

Practices hold regular safeguarding meetings to discuss vulnerable children and adults, and to share best practice.

It is essential that this is a multi-disciplinary meeting so that all practice teams are involved in safeguarding patients. Practices should also invite Health Visitors and 0-19 Service colleagues to contribute to these meetings.

Practices should have the contact details of their key contact with the 0-19 Service, and the LMC also holds a list of these contacts.

To make it as easy as possible for colleagues from the 0-19 Service to contribute, they ask that you

invite them with as much notice as possible and also provide the option for them to “dial-in” if they cannot physically attend.

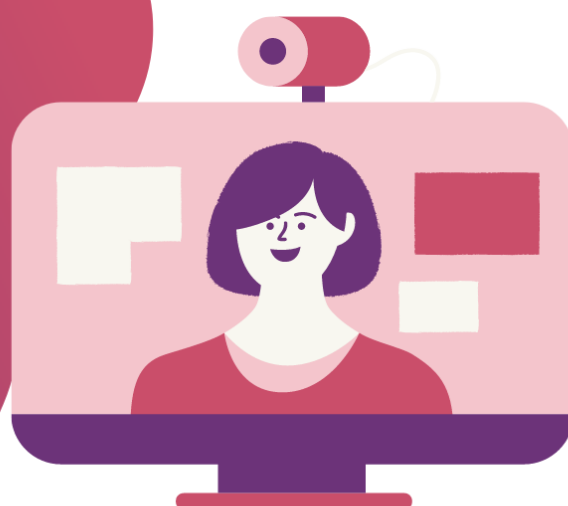
If, for whatever reason, no one from the 0-19 Service can attend, then you should request that they email the practice in advance of the meeting with information which they feel needs to be shared with the meeting.

If you are not getting this information for your meetings, you should contact the lead nurse for your locality, the LMC holds the contact details for these if you require them.



Educational Webinars

www.linclsmc.co.uk/educationalwebinars



Our recorded webinars are short, high impact, educational sessions. They are a great opportunity to complete CPD at your convenience without needing to take a lot of time out of your day.

Lincolnshire LMC have been building a library of recorded sessions for GPs, Practice Managers and

other Practice Staff covering topics such as Cardiology, Dermatology, Dementia, Safeguarding and much more.

New videos are being added on a regular basis and if you would like to see a particular topic being covered please let us know, email: info@linclsmc.co.uk

COMPLETING FIT NOTES/ MED3

by: Dr Kieran Sharrock | LMC Medical Director

The LMC has recently received several enquiries regarding when Fit Notes can be completed, especially whether a Fit note can or should be completed before another Fit Note has expired.

[Government guidance on completing Fit Notes](#)

explains that the fit note is used to advise employers, employees, and DWP about a person's fitness to work on the date that you have assessed them. Thus, if this assessment occurs before the date a previous note expires then you can and should complete the note on the day of the assessment.

Your options when assessing a patient for fitness to work

- Do not give Med 3 as patient fit for work
- Do not give Med3 as patient not fit for work but will be within 7 days
- Give Med 3 stating not fit for work until a specified date
- Give Med 3 stating may be fit for work considering further advice about: phased return to work, amended duties, amended hours, or workplace amendments.

The final option gives you the flexibility to make comment about why a Fit Note may be issued prior to previous note expiring.

For instance a previous note may expire on 30th May, you assess the patient on 23rd May and feel the patient can return to work so you can issue a Med 3 stating "You may be fit for work taking into account the following advice" tick the "phased return to work" box, and add a comment "can return to work from 24th May".

The comments section is also helpful, as you can use this to request DWP assess a person's long term need for Fit Notes.

If you believe a person will not be able to work long-term, tick the "you are not fit for work" box, and put in the comments section "unlikely to be able to work long-term, please assess".

PRACTICE CALL-BACK POLICY

by Dr Kieran Sharrock | LMC Medical Director

Healthwatch Lincolnshire have recently surveyed patients about their experiences when contacting GP surgeries. One of the issues raised by patients in this survey was the uncertainty about when a clinician will call the patient back when a telephone appointment has been made. It seems obvious to practice clinicians and staff that virtual appointments cannot be made for specific times, but this is not how patients perceive the service. It is thus important that we communicate to patients what your practice policy is regarding virtual appointments.

The LMC advises that practices should develop a "Call-Back Policy" so that all practice staff understand what they should be telling patients when arranging virtual appointments. This policy should include a script for administrators to use when booking virtual appointments and should also have messaging for websites and social media so that the policy can be advertised to patients. The LMC has created a generic policy which practices can adapt and use.

REQUESTS FOR BENEFITS OR HOUSING LETTERS

by Dr Kieran Sharrock | LMC Medical Director

Patients regularly ask practices to provide evidence to support their benefits claims or letters to help with housing needs. Practices may feel that providing these letters is helping the patient, but time taken to prepare these documents may detract from the capacity of the practice to provide direct patient care.

There is no contractual requirement to provide these types of letters. There are agreed mechanisms for Department of Works and Pensions, and for housing departments in councils to gain medical information, and there are agreed mechanisms for practices to have the time to prepare this information funded.

If DWP or housing departments want medical information they should apply and fund through the agreed formal routes.

Patients can, of course, gain access to their medical records and print a summary which they can provide to DWP or housing departments.

The LMC supports practices who decline informal requests for this medical information. We have created a letter which practices can put on their websites and provide to patients which explains our position.

[CLICK HERE](#) to download the patient letter.

ECGS ON BEHALF OF SPECIALISTS

by Dr Kieran Sharrock | LMC Medical Director

Practices are frequently asked to perform ECGs by specialists, especially from the mental health trust. Psychiatrists request ECGs because psychotropic medications cause prolonged QTc and can result in arrhythmias.

LMC are frequently asked whether it is practice's responsibility to perform these ECGs. This is not an easy question to give a yes or no answer to.

Are you commissioned to perform ECGs? Some parts of Lincolnshire have a "bundle of services" commissioned which includes provision of ECGs. If you are signed up to do ECGs through the "bundle" then yes you should perform the ECG, as you are funded to do this.

If you are not commissioned to perform the ECG then you do not have to perform the ECG, the specialist should arrange this through the outpatient ECG service.

If you do perform the ECG you do not have to provide interpretation. If a specialist gave a patient a blood form and you performed phlebotomy, the result of the test would go to the specialist, and you would not be expected to interpret the result. T

he same stands for the ECG. Your practice should perform the ECG and forward this to the requesting specialist, and they should take action on this result.

"You're the expert at what you do, be the best you can be, this service enables you to do exactly that. I would not be where I am today nor able to deal with the challenges I have faced had it not been for this service."

An excellent and timely service which helped me to keep working at a point when I felt I could cope any longer. A year later I am still a fully functional partner in my practice."

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This service is available free of charge for Lincolnshire GPs, Nurses & Practice Managers

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Email: info@lincslmc.co.uk

Visit: www.lincslmc.co.uk/impactlincs

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- Help to make improvements to your work life balance
- Allow you to manage transitions positively
- Create a positive focus on achieving your aspirations
- Improve your motivation
- Develop & enhance your leadership skills
- Improve your resilience
- Build your confidence



MARIE STOPES INTERNATIONAL OFFERING TERMINATION OF PREGNANCY ADVICE AND SUPPORT

by Dr Kieran Sharrock | LMC Medical Director

"Patients do not need a GP referral to access our treatment: Patients can **call us directly on 0345 300 8090**. Our telephone line is open 24/7 and is free to use. Patients can call our telephone line for clinical advice, support, and information about the choices available to them, we also have interpreters available.

We are currently offering a telemedicine service for early medical abortions: the Government recently issued temporary approval of home use for both stages of early medical abortion. Our patients will now be screened via telephone and, if they are eligible (i.e. no risks are identified), we will prescribe medication for home use. The patient will have 24/7 access to our free telephone line, where they can request specialist nurse advice

where needed. Any at-risk patient with safeguarding needs will continue to be seen face-to-face in clinic with a nurse or midwife. If you would like some more information on our telemedicine service you can take a look at our webpage. <https://www.mariestopes.org.uk/abortion-services/online-medical-abortion/>

We are CCG funded, so patients registered at your practice can access our treatment for free at any of our clinics across the UK.

A full list of our clinic locations can be found here: <https://www.mariestopes.org.uk/find-us/> "

Further information can also be found on the [LMC website](#)

REQUESTS TO PERFORM TESTS OR PROCEDURES FOR “PUBLIC HEALTH” PURPOSES

by Dr Kieran Sharrock | LMC Medical Director

The GMS contract for practices requires us to provide services to

“patients who are, or believe themselves to be
(a)ill, with conditions from which recovery is generally expected;
(b)terminally ill; or
(c)suffering from chronic disease,
which are delivered in the manner determined by the contractor’s practice in discussion with the patient.”

The contract does not place the responsibility on General Practices to provide preventative measures, unless this is separately commissioned such as vaccination or screening.

Thus, if practices are asked to perform preventative measures for which they are not separately contracted, they should decline, or agree an extra fee for carrying out these measures.

Examples of this which frequently arise are

- Post-exposure blood tests for patients possibly exposed to blood borne viruses
- Immunisation for people who are contacts of infectious diseases
- Immunisation for people at risk of infectious diseases e.g. patients with renal disease or cancers
- Provision of anti-microbial medications for contacts of patients with an infectious disease

It is the responsibility of public health and health protection to provide these services. So if your practice is asked to perform any of these actions you can ask the CCG health protection team to either carry out the activity, or fund your time to carry out the activity on their behalf.

CHANGES COMING TO CORONER E-REFERRALS

By Kieran Sharrock | LMC Medical Director

Lincolnshire Coroner Service will soon be making changes to the way we refer cases to them.

The current online portal will be retired and a more up to date version will be introduced.

The new portal will require referrers to log in to the portal, so each practice will be given a unique

set of log in details. The portal itself will look similar to the current referral forms, and will require similar information.

The main advantage of the new portal is that practices will be able to see the progress of the referrals within the portal.

This will mean that practices will not need to telephone the coroner service for updates. The outcomes of referrals, including post mortem results, will also be available within the portal.

You will receive more information about the log in process nearer the time that the portal will go live, probably in July 2021.

Upcoming LMC Events Available :

- **Appraisal Skills Workshop: BOKINGS OPEN!** [How to make appraisals more productive for your organisation. A virtual workshop for practice managers and team leaders. Wednesday 19th and Thursday 20th May 13:30-16:30hrs.](#)
- **An evening with consultant psychiatrist, Dr Parveen Kumar: BOOKINGS OPEN:** [Managing depression in primary care. An interactive session via Microsoft Teams. 27th May 2021, 19:00-20:30hrs](#)
- **SystmOne Training: BOOKINGS OPEN!**
[Part 1: Reporting - Thursday 10th June](#)
[Part 2: Clinical Templates - Thursday 17th June](#)
- **GP Contract Changes 2021/22 Update for Practice Mangers: BOOKINGS OPEN!**
[An opportunity to ask questions about the recent GP Contract Changes on Thursday 6th May at 11:00hrs](#)
- **SAVE THE DATE: [Lincolnshire LMC GP Conference](#): 25th November 2021**

Lincolnshire LMC also have a range of courses now taking bookings. Most courses remain virtual however some face to face training has been introduced due to clinical needs.

We also have a number of courses in the pipeline which will be added to the LMC website in due course.
Go to the [Lincolnshire LMC Website](#) to view the details of all LMC Training & Events and to book.

Immunisation Updates 2021

By Rosa Wyldeman | LMC Operations Officer

The Lincolnshire LMC is keen to ensure that funding for training is put towards training that is most needed rather than duplicating training that is already available. We are also very aware of the value of getting different groups together to discuss best practice and raise questions.

With the introduction of e-learning and having listened to feedback from practices, it has become apparent that there are alternative immunisation training solutions available for free.

With this in mind, this year, Lincolnshire LMC recommends that all immunisers complete all the relevant e-Learning For Health modules for the [Immunisation Programme](#) and [Flu Immunisation Programme](#) once they have been updated for the 2021/22 season.

The [e-Learning For Health website](#) is updated every year for the new flu season and provides update training programmes that have been developed in line with the [PHE National Minimum Standards](#).

To ensure that Lincolnshire General Practices continue to maintain high training standards, in addition to the e-LfH training; Lincolnshire LMC will be offering one place per practice for a lead immuniser to attend virtual face to face Immunisation Update Training.

We also recommend immuniser teams hold those all-important group discussions regarding best practice.

Please feel free to [get in touch](#) if you have any questions about this year's immunisation update training. We also welcome feedback.



Vacancies in Lincolnshire General Practice

All practice vacancies can be viewed on the [LMC website](http://www.lincslmc.co.uk)

Branston Surgery

Salaried GP (6 sessions pw)

T: 01522 793081/793260 | E: ian.green2@nhs.net

Cliff House Medical Practice

Salaried GP

Tel: 01522 516576 | Email: nataly.birbeck@nhs.net

Brant Road & Springcliffe Surgeries

Salaried GP

T: 01522 724411 | E: kirstie.fox@nhs.net

Vine House Surgery

Medical Secretary

T: 01476 576851

The Deepings Practice

Salaried GP (fixed Term)

T: 01778 579000 | Email: kellie.spriggs@nhs.net

Horncastle Medical Group

Nursing Associate

Tel: 01507 522998 | Email: hazel.fuller@nhs.net

The Glebe Practice

Salaried GP or Partnership

Tel: 01522 706901 | Email: smaddison@nhs.net

The Glebe Practice

Chronic Disease Practice Nurse

Tel: 01522 706901 | Email: smaddison@nhs.net

The Welby Group

Salaried GP | Nurse Practitioner/ANP/ECP

Email: Jodie.knight@nhs.net

Market Cross Surgery

GP Partner

Tel: 01476 550056 | Email: louise.allen@nhs.net

Beacon Medical Practice

Salaried GP | Clinical Practitioner

Email: nick.hutchinson1@nhs.net

Beacon Medical Practice

Emergency Care Practitioner | Practice Nurse

Email: nick.hutchinson1@nhs.net

Harrowby Lane Surgery

Practice Care Coordinator

Tel: 01476 579494 | Email: karen.brewster@nhs.net

Swineshead Medical Group

Phlebotomist | Medical Secretarial Manager

Tel: 01205 820204

If your practice has a vacancy that you would like the LMC to advertise, please email info@lincslmc.co.uk. Please include all the details of the vacancy, a closing date where possible, and relevant contacts. You can also include a picture or practice logo to make your advert stand out.

Vacancies will be advertised on the [LMC Website](http://www.lincslmc.co.uk) and in future LMC Newsletters.

NHS SERVICE FINDER

By Dr Kieran Sharrock | LMC Medical Director

Have you ever wanted to find the telephone number for a hospital or community service and cannot find it? This should no longer be a problem, as the NHS Service Finder is available to use.

NHS Service finder is an online tool which lists all available services to which patients can get access and clinicians can refer. You need to register by clicking the link to [NHS Service Finder](#), and then follow the links to "create an

NHS Service Finder account".

This tool should be constantly up to date with details of everything from your local community nursing team, to the contact details for Same Day Emergency Care.

It is advisable to check your own surgery's contact details, so that you know that other agencies can get in touch with you by the most appropriate methods.

LINCS INDIAN SOCIETY- COVID SUPPORT FOR INDIA

By Dr Runa Saha | Member of Executive Committee of the Lincs Indian Society

We are hearing heart breaking stories from India whose health system is overwhelmed by Covid.

Lincs Indian Society have direct links with hospitals in India where we can be sure monies raised can go directly to where it is needed: buying ventilators, oxygen supplies, upgrading ICU facilities.

If you can help Lincs Indian Society raise funds to help with the Covid19 crisis in India please donate to our JustGiving Crowdfunding Page:

<https://bit.ly/3nmsuV7>



Covid Support for India

LIS have launched a crowdfunding campaign to support the worsening CoVid crisis in India.

We have identified reliable recipients of funds who will use the monies for:

- Purchasing ventilators & monitoring equipment
- Upgrading ICU facilities
- Oxygen Supplies



Please donate generously by using the following link:

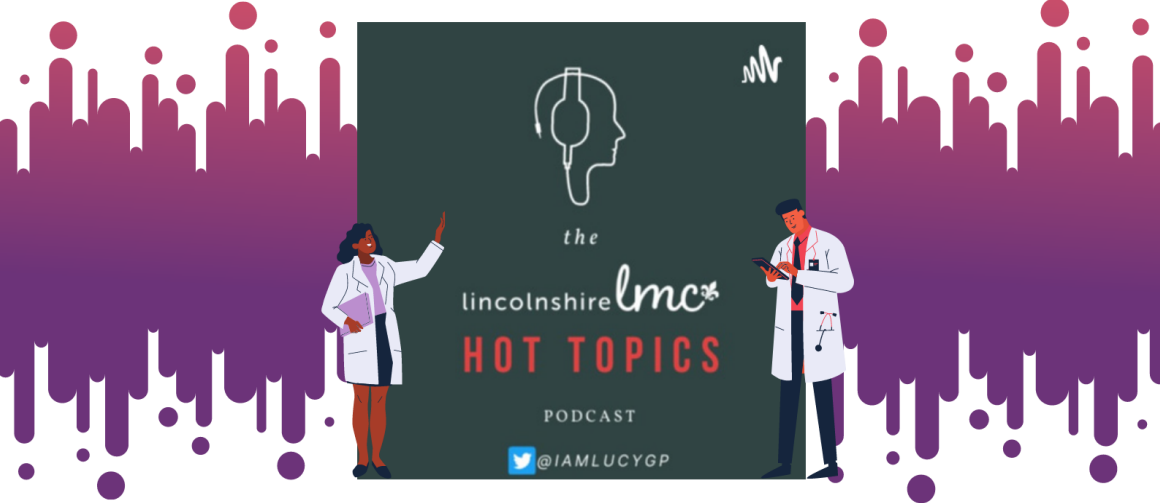
https://www.justgiving.com/crowdfunding/lincsindiansociety-covidindiocrisis?utm_term=dV82bBPND

We will also be organising some group activities to raise funds, including:

- Sponsored walk/run
 - Diwali-mela-style online event
 - Online Auction
- (details to be confirmed soon)



@LincsIndianSociety



Listen to our LMC Podcast
With
Dr Lucy Dodington-Boyes

External CPD Opportunities:

- **Novartis:**

HFrEF treatment sequencing: Recent Developments in the UK and US

Thursday 6th May 2021 19:00-20:30 MS Teams

For more information, please contact janine.king@novartis.com 07584 441460 or Claire_m.smith@novartis.com

- **GP Forum Training Events:** www.gpforum.com

For questions please contact info@gpforum.com

- **Wesleyan NHS Pension Scheme Events**

[A bitesize guide to understanding the NHS Pension Scheme: 11th May 21](#)

[What does the McCloud judgement \(age discrimination\) mean for you? 20th May 21](#)

[Financial Fitness: Hot Topics for a successful financial future 10th June 21](#)

[Estate Planning Webinar: 29th June 21](#)

- **Abbott:**

Access to free self study courses. Visit anhi.org/uk

Useful Links:

- ♦ [Latest LMC Buying Group Update](#)
- ♦ [Lincoln Medical Society](#)
- ♦ [Sessional GPs e-newsletter](#)
- ♦ [Lincolnshire Training Hub](#)
- ♦ [E-Learning for Health \(e-LfH\) Programmes](#)
- ♦ [NB Medical Education](#)
- ♦ [GP Weekly Bulletin \(England\)](#)
- ♦ [GP Trainee Newsletter](#)
- ♦ [Practice Manager Association News](#)
- ♦ [Primary Care CPD Training Ltd](#)
- ♦ [GP Forum CPD Opportunities](#)



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