

LMC Committee June 2022- Update for practices

Lincolnshire LMC representative members meet with the secretariate monthly to obtain updates on progress from the previous month, hear from invited guest speakers, discuss relevant events, issues, and hot topics, and make decisions regarding future actions.

The table below is intended to inform you about the main points provided to the LMC Committee during the last meeting.

Торіс	Update
Speaker 1:	Population Health Management (PHM)
Victoria	Committee listened to a presentation about the Population Health Management work
Townshend (VT)	so far, it's successes and the next steps for Lincolnshire. Highlights are as follows:
and Katie	• Optum will be working with the PHM project team for a further three years in order
Thomas (KT):	to enable PHM to run itself.
	 Data is extracted then anonymised, and each patient is given a unique key which enables data to be linked to other data sets from other organisations providing a full picture of the population's health needs. They will continue to grow the linked data set to make the intelligence even more useful. Practices and PCNs will continue to receive on-going support to view the data and interpret it effectively. Committee asked about how the intelligence will help practices in hard to recruit areas. VT explained that it will help to identify other possible routes that will take pressure off the practice, such as working in partnership with local fitness centres in areas of high obesity. Committee asked for assurances regarding the security of the data and whether Optum's umbrella company, (United Health) is able to access data in order to increase likeliness of obtaining contracts in other areas. KT confirmed that United Health do not have access to data. KT clarified that the contract specifically prescribes what Optum can do with the data and it states that the use of data must directly relate to patient care.
Speaker 2: Gerry	Lincolnshire ICS
Mc Sorley (GMS)	• GMS and SJM came to speak to the Committee about their roles and how the ICS is
and Sarah-Jane	likely to be shaped.
Mills (SJM), CCG	• Discussions took place about how much of a voice general practice is going to be given within the ICS and at what level those voices will be.
	• Concerns were raised by Committee about how the ICB will use clinical expertise. SJM informed the Committee from 1st July 2022 primary care arrangements will include Pharmacy, Optometry and Dentistry, (PODs) and debates are currently taking place around how they are brought on board.
ICS Development	Nominations for partner member for Primary Care Role on NHS Lincolnshire ICB have been sent to practices.
STP/ CCG	Protected Learning Time
	Being reviewed by Sarah Button, Lincolnshire CCG
	Planned care
	• Expedite process – signed off last week. Aim to also include untriaged referrals.
	 How could CCG comms to GPs be better?
	 Med3 from virtual consultations to be reviewed.



	practices to provide g
	 A&G: ULHT are currently looking at a unified policy to make it clearer however there are two hurdles – 1) clinical risk and 2) funding. Committee members raised the great potential within A&G and agreed that general practices should be working with them. A need for additional GP training was also identified by the Committee. Enhanced services/DCAs Rolling programme of ES specs over the next two quarters
Practice Resilience	 Practice Management Support Network: First meeting taking place on 22nd June focussing on enhanced services and claims. Requests for future topics to be submitted to <u>n.turner14@nhs.net</u> On-site support also available for Lincolnshire practices on request. Recruitment: LMC recruitment event taking place on the evening of Wednesday 29th June in Sleaford. Open to GPs & GP trainees looking for employment in Lincolnshire. The event will include information about GP fellowship opportunities, visa sponsorship and funding as well as time for practices to network with candidates. GPAS The county wide assessment this week is AMBER / OPEL 3 with 55% of reporting practices assessed as AMBER, 3% as RED, covering a total patient population of 290,826. GREEN assessments account for 42%. GPAS data is anonymously shared with stakeholders such as the CCG over time this information will grow to provide detailed evidence about the state of general practice in Lincolnshire. This can then be used to identify additional resourcing and workforce
PCNs	 PCN DES and IIF Discussions regarding EA ongoing. Ongoing work from GPC regarding second opt-out window. Concerns raised regarding funding for all workstreams
IT & Digital	 Possibility of increased admin rights for practices if MoU is signed. MoU for digital platforms to be resent to individual practices rather than PCNs – AccuRx, Ask My GP, eConsult Arden & GEM Starting tech refresh rollout
CQC	 Practices with new types of registration are now being inspected. A percentage of randomly selected non-at-risk practices are also being inspected with 2 weeks' notice.
Pharmacy	 Practices in the south of Lincolnshire are concerned about pharmacies no longer offering dosette boxes. Pharmaceutical needs assessment - no current and future gaps have been identified in the provision
Primary/ Secondary Care interface	 ULHT Awaiting Datix paper from Paul Jibson regarding improvements to Datix reporting. RB awaiting meeting with ULH regarding EDD processes. LCHS Meeting booked regarding communications process and pathology.
Councils	 Coroner: Covid death certification regulations end on 31st March 2022. However new regulations come into force which allow death certification if deceased seen by a medical practitioner in the 28 days preceding death. LMC unsure whether



	practices to provide a
	 cremation regulations also amended but will update practices when this is understood. CME roll our hampered by IT/Governance issues. Advert released for further regruitment.
	Advert released for further recruitment.
Healthwatch	Patient Messaging LMC submitted response to negative feedback on GP services
Child protection	 Safeguarding funding New ES for safeguarding reports and attending safeguarding conferences draft. AMGP incidents
	 Liberty safeguards Transition from DOLS to Liberty Protection Safeguards postponed, no date for introduction published
GP Nursing	New LMC GPN representative – Rebecca Ireland
LMC Practice Calls/ Visits	 Courtesy calls to practices, LMC offers support and gathers useful feedback. On-site visits and CQC walk-throughs available on request, contact info@lincslmc.co.uk Practices asked to provide a contact number that bypasses the switchboard.
Wellbeing	 <u>Wellbeing pages</u> available on LMC website, including many self-help resources as well as directories to wellbeing organisations and charities. <u>Live Life to the Full</u>: Free online courses covering low mood, stress and resilience. Work out why you feel as you do, how to tackle problems, build confidence, get going again, feel happier, stay calm, tackle upsetting thinking and more. Courses are free for all Lincolnshire General Practice Staff.
LMC Development Centre	 Current Courses are available via the <u>LMC website</u> Upcoming Friday 15th July: Covid-19 recognition and reflection event at the Lincolnshire Showground. (Evening) Please submit attendee details to <u>Rosa.wyldeman@nhs.net</u> Save the date: Thursday 13th and Friday 14th October: Lincolnshire Practice Manager Conference at the Belton Woods Hotel. (2 Days) Wednesday 30th November: LMC GP Conference at the Belton Woods Hotel. (Full day)
Rebuild General Practice Campaign	 Campaign information and resources have been shared with practices – for more information go to <u>www.lincslmc.co.uk/rebuildgeneralpractice</u> If your practice would like to get more involved in the campaign, please contact <u>rosa.wyldeman@nhs.net</u>.



GPC Update	Fuller Stocktake
Dr K.Sharrock	The stocktake highlights:
	 Need for investment in community and general practice services.
	 Need to reduce bureaucracy and unify funding streams.
	 Focus on workforce and the importance of this and other enablers to allow
	better integration.
	GPC Concerns:
	• GPCE and LMC conference have stated that they believe PCNs to undermine the
	independent contractor status of general practices. We agree that working at
	scale and collaboratively with other providers is good for patients and systems,
	but this must not be at the expense of locally provided general practice by
	independent contractors.
	• Discussion regarding splitting community services into acute and chronic miss the
	importance of continuity of care and relationship building. Doctors do not want to
	provide just acute or just chronic care, the balance of both has to be right.
	• Patients want and benefit from continuity of care from clinicians they know. ARRS
	clinicians need to be embedded in local teams and not neighbourhoods.
	Nuffield Trust have produced a series of Blogs regarding GP and working at scale
	which is of more value than the Fuller review- <u>General practice on the brink: how</u>
	did it get there? The Nuffield Trust
	Contract 2024:
	GPCE met on 19th May to workshop ideas and principles regarding GMS
	contract for 2024 onwards to shape the direction of negotiation. We looked at
	models which are currently used across the world for delivering at scale general
	practice, and examples of where integration is working well in the UK.
	• GPCE will be engaging with LMC, practices, individual GPs, stakeholder groups,
	and patients to develop a model which can be the basis of our "ideal" when
	entering negotiations.
	Inflation:
	 Inflation and other factors will have significant impact the cost of running a
	practice. GPCE are meeting gathering evidence from practices of this impact
	which can be used when seeking financial support for practices
	Pensions:
	Pensions o BMA pensions committee have developed a CPI modeller which
	highlights the impact of inflation on pensions. The rise in CPI will potentially
	create annual allowance charges for GPs. Individuals should use the CPI
	modeller to identify whether they will be effected, and speak to a financial
	advisor about what mitigations will be required.
	Fit notes:
	 Legislation soon to be passed will extend professions who can complete fit
	notes to nurses, OTs, physios, and pharmacists. Only individuals with
	appropriate knowledge and skills will be able to complete fit notes, but this
	should reduce GP workload.



LMC Committee Meetings	 Lincolnshire LMC Committee welcomes observers. If you would like to observe a future meeting please contact <u>info@lincsLMC.co.uk</u> Information about the LMC Committee meetings can be found <u>HERE</u>. You can find out who your area representatives are via our <u>Meet The Team</u> page All previous LMC Committee Meeting Reports can be viewed <u>HERE</u>.
Impact Lincs	 Impact Lincs is the LMCs Mentoring & Coaching service available to all practice staff. Email: info@lincslmc.co.uk to request the service.
Take-30	 <u>Take-30</u> is a service available to all practice staff providing support to work through daily challenges. This is a useful resource that practice managers can signpost practice staff to. Call 01522 576659 to arrange your call.