

MORGANNWG LMC NEWSLETTER : JUNE 2017

It's a real honour to be elected to represent you as Chair of Morgannwg LMC in what are challenging circumstances for General Practice. My sincere thanks on behalf of you all go to my predecessor Nimish Shah who has chaired the LMC so effectively over the last 3 years.

Elections for LMC members are held every three years and took place in March 2017. A list of all elected members can be found on the LMC website - <http://www.morgannwglmc.org.uk/our-team.html>



Elected members are now remunerated for attendance at LMC meetings. There are vacancies and if you are interested in becoming involved please contact the LMC office for further details.

In recent months, we have seen practices handing back GMS contracts, merging and needing significant support to stay afloat as the open ended workload and lack of resource bite hard. Despite this, I regularly meet constituent GPs who are fully committed to providing high quality GP care, often at great cost to their own health and family lives. GPs continue to care, often when it seems the 'powers that be' care little about them. The LMC is here to support all GPs through troubled times and remains committed to ensuring the Health Board and Welsh Government not only appreciate their GP workforce, but also resource and support them properly. At times, this may mean hard choices are needed; this includes GPs:

- refusing specialist/inappropriate prescribing,
- declining to take over management of certain specialist patient groups or
- handing back workload to secondary care in order to survive.

These are moves we all have to consider if our workload pressures don't ease. The Health Board needs to ensure that workforce and resource follow the patient. General Practice is not a bottomless well which can be emptied at will by secondary care in order to relieve their pressures.

There are areas within ABMU hit hard by lack of GP workforce at present and the current crisis has the propensity to spread across the whole region. Please think hard about your sustainability, both as a practice and as a cluster. Get in touch with us at an early stage if you have concerns so that we can help. It is the service you pay for with your levy after all!

Feel free to get in touch via the office or personally – we are there to represent you.

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INAPPROPRIATE TRANSFER OF WORK FROM SECONDARY CARE

The list of requests from secondary care to undertake non-contractual work is definitely increasing as the LMC learns of requests for testing/prescribing for scans/angiograms/day surgery. The LMC advice is that practices should write to consultants / department heads when such requests are received advising the inappropriateness without a LES or any other agreement being in place. The ABMU Medical Director and LMC should be copied in to all correspondence in order that a dossier of the 'problems' can be drawn up. This is the only way that we will be able to ensure that the work is undertaken in secondary care or resources are negotiated with the Health Board to undertake the work in primary care. "Go and see your GP" should not be the default for such issues.

DISCHARGE SUMMARIES /e-REFERRAL

A year ago we wrote to inform HIW of the risk to patients posed by poor discharge information quality and quantity. The LMC continues to work with ABMU to try and improve the situation but progress has been painfully and dangerously slow. We continue to submit any examples you send to HIW. WCCG usage is increasing to the point where soon no referrals need be sent any other way. WCCG has also been successfully used to transfer eTOCs and clinic letters electronically to practices. However, we are aware of examples where consultants who electronically prioritise referrals are using 'advice requests' to refuse or put referrals on hold. This is inappropriate in many cases and we would welcome your examples where this is happening so we can rectify this behavior.

GMS CONTRACT ISSUES

The majority of national contract discussions for 2017-18 have been completed. GPC Wales has been successful in ensuring new and improved Parental/Adoption/Maternity/Sickness reimbursement for GPs. Solutions on indemnity costs and reimbursement for secondary care phlebotomy provision in practices are being finalised too so watch this space. Please acquaint yourselves with the new contractual arrangements. <https://www.bma.org.uk/collective-voice/committees/general-practitioners-committee/gp-contract-negotiations/contract-agreement-wales>

ENHANCED SERVICES

The specifications for the INR and CARE HOME DESs have been circulated. We would encourage as many practices as possible to take them up as they are well remunerated and in our view they represent 'good medicine'. They are also part of the core GMS contract offer and we wouldn't want to see these monies disappear to other providers.

As for Local Enhanced Services..... The recent Wound care LES debacle still looms large in the memory! We are expecting data from the current wound care service imminently to see if another LES is to be negotiated. We are also looking urgently at negotiating a NOAC LES as we recognise prescribing and monitoring of NOACs is now clearly enhanced work. Practices should carefully consider whether they take on new prescribing/hand back existing unresourced prescribing to secondary care in such circumstances. We will also be reviewing the existing range of LESs. The financial position in ABMU means we may have to stop doing other LESs to fund the ones that we need. If we do, then the work will have to follow the money back to hospitals. Watch this space!

LABORATORY ISSUES

The LMC has become concerned about the accuracy of renal function assays across ABMU and have raised the issue with Biochemistry colleagues who are investigating. We hope to issue reassurance

shortly but if we can't then we will advise practices of how to ensure safety when requesting renal function tests, which may involve directing all patients to hospital pathology labs for phlebotomy.

We were deeply disappointed that a new form for **Vitamin D testing** was introduced recently without agreement or consent. This is unnecessary and additional workload for GPs and represents the 'thin end of the wedge'. We would urge GPs to continue to request Vitamin D assays on the usual green forms completing the clinical details appropriately. Where an assay is declined, not because it is unnecessary/inappropriate, but because the GP has requested it on the 'wrong' form, please speak to the duty biochemist to insist the assay is done as a correctly completed form should be all that is necessary. This may be more hassle in the short term, but we feel it is the right course of action to take. We continue to hope and expect that biochemistry will reverse their decision and that a degree of 'civil disobedience' from GPs will convince them of this!

PREMISES IMPROVEMENTS

£40m has been secured over the next 4 years to contribute to a range of investments in primary care estate including refurbishments, redevelopments and new build. The Health Board already has a list of prioritized schemes as part of its Estates strategy but if you have any new schemes or proposals for refurbishments or redevelopments, these should be forwarded to ABMU as a matter of urgency. Please contact the LMC if you need any help or guidance.

PREPARING FOR THE GDPR (General data protection regulations)/INFORMATION GOVERNANCE

Practices need to be aware of the General Data Protection Regulation (GDPR) which will apply from 25 May 2018 and there is already a large amount of helpful information circulating from Information Commissioners Office which can be easily accessed here: <https://ico.org.uk/for-organisations/data-protection-reform/>

Whilst awaiting updated information governance guidance from NWIS around sharing Patient Information within clusters, we have already circulated interim guidance from GPC Wales in respect of gaining patient consent to enable records to be shared across cluster practices. Leaflets and posters to support the guidance will be sent out shortly from GPC Wales.

ANTI-DEMENTIA DRUGS

ABMU mental health services have attempted to repatriate anti-dementia drug prescribing to Primary Care. We have made clear that General Practice is workload saturated and that prescribing and monitoring of these drugs should remain with secondary care.

ACCESS TO MENTAL HEALTH CRISIS TEAMS

We've been assured by the Mental Health Delivery Unit that there should be no impediments to referring patients to Crisis Services without conducting a face to face consultation first if it is not appropriate or necessary to do so. Please let us know if you continue to have any problems.

BROWSER UPDATES FOR NHS LAPTOPS

All NHS managed laptops should automatically have the latest software updates/patches which includes the browser IEv11. However, in order to receive the software updates laptops must be physically

connected to the Practice network on a regular basis. NWIS provides information on this when a Practice receives a new laptop, but recognises that more information and reminders are needed and will raise awareness via various NWIS flyers and newsletters.

Raman-CRC trial for early detection of colorectal cancer

ABMU has received Welsh Government funding to trial a novel blood test that can detect colorectal cancer with high levels of accuracy. The spectroscopy-based test, developed by Swansea University and the Department of Colorectal Surgery, has the potential to allow early identification of cancer patients in primary care and streamline the USC referral pathway.

The research team is currently conducting activating practices that have already expressed interest. If you would like to participate in this funded study please contact the Rachel Harford (Primary Care Research Nurse) at Rachel.Harford@wales.nhs.uk or the Trial Manager Kym Thorne (K.Thorne@swansea.ac.uk)

SUPPORT FOR GPs and staff – contact details

WELLBEING THROUGH WORK / IN-WORK SUPPORT: (GPs Patients and staff)

0845 601 7556

ABMU OCCUPATIONAL HEALTH SERVICES (GPs only)

01639 684569

DEDICATED SUPPORT SERVICES FOR GPs:

GP dedicated counselling service: 0800 058 2738 (Health for Health Professionals)

Doctors struggling with addiction: www.livingroom-cardiff.com

02920 302 101

**If you require further information about any of the above please contact
Dr Ashok Rayani, Medical Secretary, Morgannwg Local Medical Committee**

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