

# LMC ViewPoint

*The newsletter of Leeds Local Medical Committee Limited*

*November 2016*

## **SHAPING THE FUTURE FOR YOU AND YOUR PATIENTS**

### **Delivering a sustainable health and social care service for Leeds**

On 15<sup>th</sup> November over 100 Leeds GPs, consultants and health care managers attended an event organised by the LMC to learn about the current proposals for the Leeds Plan and the West Yorkshire and Harrogate sustainability and transformation plan (STP). We were pleased that senior leaders from across the health and social care settings took part in the meeting, which also gave the clinicians present an opportunity to feedback their views and concerns about the draft plans.

STPs have been developed by NHS and local government organisations in all areas of the country and are supposed to set out how these regions will deliver NHS England's Five Year Forward View. The West Yorkshire and Harrogate STP is built on six local area plans, including the Leeds plan. There is a lot of detail contained in the proposals and if you would like to see copies of the various presentations given at the LMC event, please contact the office at: [mail@leedslmc.org](mailto:mail@leedslmc.org).

As well as an overview of the West Yorkshire STP and the Leeds Plan, the meeting heard the views of commissioners (Leeds City Council and the three Leeds CCGs) and providers (LTHT, LCH, LYPFT and Dr Chris Mills on behalf of GP providers). The feedback received following the meeting showed that almost 60% of respondents believed that their understanding of the STP had improved.

The draft West Yorkshire and Harrogate STP has now been published and is available at: <http://www.southwestyorkshire.nhs.uk/west-yorkshire-harrogate-sustainability-transformation-plan>. The LMC will continue to engage with its future development and we would urge GPs to study the proposals carefully and feedback your views.

We would like to take this opportunity to thank the speakers and our many colleagues who attended the meeting. We received a lot of positive feedback about the opportunity provided for consultants, senior clinicians and GPs to meet together. We have produced a summary of some of the key themes emerging from the feedback and it is **attached to this edition of Viewpoint**.

## **BMA SURVEY ON GP WORKLOAD**

The BMA's recent survey of GPs in England has shown that unmanageable workload means GPs are struggling to provide safe care to patients. Based on more than 5,000 responses, the survey found that 84% of GPs report that unchecked and growing workload pressures are undermining their ability to provide safe and quality care. Of this figure, 57% described their daily workloads as 'unmanageable' with a further 27% saying that excessive pressures are directly impacting standards. GPs also reported that they wanted greater investment in enhanced community nursing to provide better support for the most vulnerable housebound patients in their area, as well as a greater focus on increasing patient confidence in self-care to reduce demand on GP services.

The key results from the survey, including a regional breakdown, are available at: <https://www.bma.org.uk/collective-voice/influence/key-negotiations/training-and-workforce/urgent-prescription-for-general-practice/key-issues-survey>

## **GPC REPORT ON PCSE/CAPITA PERFORMANCE**

As you may know, GPC England undertook an exercise over the month of October to assess the performance of PCSE/Capita as experienced by practices. Practices reported on a number of

issues on a weekly basis, LMCs, including Leeds LMC, compiled responses from their areas, and GPC compiled these responses to build a national picture for analysis. The headline results of the report are shown below; the full report can be accessed here (<https://www.bma.org.uk/collective-voice/committees/general-practitioners-committee/gpc-current-issues/capita-service-failure>) under the October 2016 tab.

### **Key findings:**

- Close to three out of ten (28 per cent) GP practices reported they failed to receive or have records collected from them on the agreed date with Capita.
- Eight out of ten (81 per cent) practices stated that urgent requests for records had not been actioned within three weeks.
- Around six out of ten (58 per cent) GP practices reported that new patient registrations were not processed within the required three days.
- Close to a third (31 per cent) of practices reported that they had received incorrect patient records.
- Around a quarter of those surveyed (23 per cent) had not received the medical supplies they had ordered on the expected date, like medicines and prescription pads.
- Just over half (51 per cent) of GP practices reported that customer service support staff were unable to resolve issues within an appropriate timeframe.

### **Trends over the 4 week period of the survey:**

- For patient records delivery/collection, the situation does not appear to be improving, with a sharp increase in the last week for average number of records awaiting delivery
- For supplies, the situation has improved, with more practices reporting they are receiving all ordered supplies on the expected date
- For the PCSE customer support centre, there appears to be no improvement in issues being resolved via telephone or via email, across the four weeks, with high numbers of practices consistently reporting issues are not resolved
- For new patient registrations, following a small decline, the percentage of practices reporting that new patient records are processed within the three day timescale, showed some improvement but remained at an unacceptably low level overall
- A vast majority of practices reported that they do not have contact with their local NET team (although this improved slightly over the four weeks)
- The percentage of practices reporting issues with payments to their practice, reduced over the four weeks with a steady week on week reduction of incorrect payments

The GPC continues to discuss appropriate compensation for GPs for the extra work caused by the issues and will provide an update in due course. Leeds LMC wishes to thank those practices which took part in the survey; we understand it is a busy time and your assistance is appreciated.

### **HOUSE OF COMMONS DEBATE ABOUT THE CAPITA CONTRACT**

West Midlands MP, Mr Geoffrey Robinson, held an adjournment debate on the Capita contract in the House of Commons earlier this month. Full details of the debate are available at: [https://hansard.parliament.uk/commons/2016-11-08/debates/0A16D70A-5B58-49C1-8679-EBEE84216DC7/CapitaContract\(Coventry\)](https://hansard.parliament.uk/commons/2016-11-08/debates/0A16D70A-5B58-49C1-8679-EBEE84216DC7/CapitaContract(Coventry))

It makes interesting reading and it is hoped it will apply more pressure to ensure that this service is made fit for purpose. MPs from other areas also contributed including Kate Green MP who asked for practices to be compensated for the additional work that this situation has caused.

### **GMS/PMS COMPARISON**

GPC has published new guidance on how the GMS contract and PMS agreement compares to help practices make an informed decision about which is most suitable for them. It can be accessed here and provides a useful guide for those practices considering switching back to GMS:

<https://www.bma.org.uk/advice/employment/contracts/gp-partner-contracts/gms-contract-and-pms-agreement-how-they-compare>

### **RISE IN SYPHILIS CASES IN LEEDS**

PHE, Leeds Sexual Health and the Director of Public Health for Leeds are currently investigating a significant rise in cases of infectious syphilis in Leeds. Early detection and treatment is essential for controlling this infectious disease. As such, frontline practitioners play a crucial role in identifying possible cases and referring them on to local sexual health services for definitive treatment.

Please find **attached to this edition of Viewpoint** a letter providing guidance in promptly identifying cases. Should you have any queries or concerns, please contact Dr Andrew Lee, Consultant in Communicable Disease Control at [Andrew.lee@phe.gov.uk](mailto:Andrew.lee@phe.gov.uk).

### **UNFAIR COMMENTS ON WEBSITES**

The BMA has produced advice on dealing with adverse web forum comments. A copy of the guidance is **attached to this edition of Viewpoint** and is also available on the LMC website at: [www.leedslmc.org](http://www.leedslmc.org).

### **GENERAL PRACTICE PHYSIOTHERAPY POSTS**

The guidance document, *Physiotherapists in General Practice*, produced by the Chartered Society of Physiotherapy in conjunction with the BMA and the RCGP aims to provide GP practices, practice groups and commissioners with information and advice on employing a physiotherapist and the potential of their role within general practice. Further details are available at:

<https://www.bma.org.uk/news/2016/november/bma-backs-greater-use-of-physiotherapy>

<https://www.bma.org.uk/advice/employment/gp-practices/service-provision/physio-cost-calculator>

### **GP WORK EXPERIENCE TOOLKIT**

The latest version of Health Education England's GP work experience toolkit is now available at: <https://hee.nhs.uk/sites/default/files/documents/NAGPToolkitv9I.pdf>.

This toolkit provides practices with all you need to run a successful work experience programme and has been designed to take you through the process step by step.

### **FREEDOM TO SPEAK UP**

In response to Sir Robert Francis' Freedom to Speak Up, and his recommendation to review primary care separately, NHS England has published specific guidance for colleagues in general practice, opticians, community pharmacies and dental practices. This follows a consultation with staff working in primary care.

On 1 April 2016, NHS England became a 'prescribed person', which means primary care staff can raise concerns about patient safety or inappropriate behaviour directly with NHS England.

The guidance sets out who can raise a concern, the process for raising a concern, how the concern will be investigated and what will be done with the findings of the investigation. Please find below the links to the whistleblowing guidance and how to raise concerns mentioned in the above message.

<https://www.england.nhs.uk/wp-content/uploads/2016/11/whistleblowing-guidance.pdf>

<https://www.england.nhs.uk/ourwork/whistleblowing/raising-a-concern/>

### **RCGP REPORT – RESPONDING TO THE NEEDS OF PATIENTS WITH MULTIMORBIDITY**

This report reviews how effectively the current health system serves patients living with multiple long-term conditions, and explores the experiences of these patients. It highlights the barriers that prevent the quality of their care improving such as lack of time and resources for GPs and provides

recommendations to overcome these barriers. The report also recommends improving communication between primary and secondary care; increasing exposure of delivering care for those with multimorbidity in GP training; and developing improved decision making tools. The report may be accessed here: [http://www.rcgp.org.uk/news/2016/november/new-report-shows-gaps-in-healthcare-for-increasing-number-of-patients-with-multiple-conditions.aspx?utm\\_source=The%20King%27s%20Fund%20newsletters&utm\\_medium=email&utm\\_campaign=7706927\\_NEWSL\\_HMP%202016-11-08&dm\\_i=21A8,4L6PB,KOY8L,H1YT7,1](http://www.rcgp.org.uk/news/2016/november/new-report-shows-gaps-in-healthcare-for-increasing-number-of-patients-with-multiple-conditions.aspx?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=7706927_NEWSL_HMP%202016-11-08&dm_i=21A8,4L6PB,KOY8L,H1YT7,1)

### **BRAIN TUMOURS IN CHILDREN**

The RCGP has also produced a toolkit designed to help GPs and other primary care professionals spot signs of brain tumours in children as early as possible by highlighting 'red flag' symptoms to look out for, and providing up-to-date guidance and training resources all in one place. Full details are available at: Royal College of General Practitioners, November 2016  
<http://www.rcgp.org.uk/clinical-and-research/toolkits/brain-tumours-in-children-toolkit.aspx>

### **LATEST NEWSLETTER FROM CHAIR OF GPC**

The latest update from the Chair of GPC has now been published and is available at:  
<http://bma-mail.org.uk/t/JVX-4M3FT-1BJCJOU46E/cr.aspx>

It focuses on Self Care Week and educating patients about how self-care can empower them to take control of their own health and helps them to make informed decisions about which healthcare services they should access and when.

### **SESSIONAL GPs NEWSLETTER**

This month's Sessional GPs newsletter has now been published and, amongst other things, focuses on the implications of the Uber judgement, the relationship between Sessional GPs and LMCs, and gaps in GP training: <http://bma-mail.org.uk/t/JVX-4LLPG-1BJCJOU46E/cr.aspx>

### **LEEDS SESSIONAL GP EDUCATIONAL FORUM (LSGPEF)**

Founded 15 years ago by Dr Doug Pollock, the LSGPEF is now being run by a new team following Doug's retirement. They are keen to hear from any GPs who wish to join the group - GPs fresh from VTS, GPs new to the area or GPs leaving long term posts. They meet monthly for education, peer support and to discuss issues affecting sessional GPs.

For practise seeking locums, they cascade emails out from practice managers to the group. For more information, and for practice managers, please contact: [dr.kumud.verdi@gmail.com](mailto:dr.kumud.verdi@gmail.com)

### **PHARMAID – REDISTRIBUTION OF BNFs TO COMMONWEALTH COUNTRIES**

PharmAid is the annual redistribution of recently outdated copies of the British National Formulary to pharmacists, doctors and other allied health professions to less resource-rich Commonwealth countries. PharmAid has recently partnered with Alliance Healthcare who are facilitating the collection of used BNFs from collection points in pharmacies across the UK.

They want recent BNF and BNFCs editions from the past two years, in good condition. They will shortly be sending out further information on the PharmAid collection which is scheduled to take place in February 2017. Please hold on to your used copies until then. If you need any info in the meantime, please email to: [pharmaid@commonwealthpharmacy.org](mailto:pharmaid@commonwealthpharmacy.org).

### **MINDFULNESS COURSE FOR GPs IN LEEDS**

This course starting on 11<sup>th</sup> January 2017 is open to any GP who is experiencing stress in their life. It is part of a range of initiatives which the 3 Leeds CCGs are offering to support GPs' mental health and emotional wellbeing in partnership with the LMC. The deadline for applications for a

place on the course is 14<sup>th</sup> December and the taster session will be on 7<sup>th</sup> December, 7-9pm. Full details are available on the information sheet [attached to this edition of Viewpoint](#).

Comments from recent GP participants:

*This course has really helped me both professionally and personally. It has allowed me to accept certain things about myself and my life and helped me find joy in the little things again. I don't think I had realized how hard on myself I had become, and the simple act of being kind to myself has made a huge difference.*

*Coming back to mindfulness has taught me new things that I didn't know – thoughts are not facts. This has helped with my mood better than Sertraline ever has and has given me a sense of self-determination and self-healing; it's my choice.*

*It has helped me appreciate my life so much more. To be able to recognize stress and manage that stress is amazing. My mood has lifted. I feel kinder to myself and others. It's been life changing, thank you, Kamilla. It's helped bring an awareness to my life that I've never had before and I will really miss the course.*

*This course has been life-changing. It has given me the tools and skills to be more self-aware, to manage my personal stress and anxiety and to understand myself better. Thank you so much! After the taster session I was so worried that I wouldn't be able to 'do it' or improve and I feel my quality of life and my own effectiveness has improved dramatically.*

*It has made me realize the very high stress levels I have been working at. Then it has provided me with the skills I need to manage this stress, live happier and enjoy each day.*

## **NATIONAL INSTITUTE FOR HEALTH RESEARCH SURVEY TO MAP YOUNG ADULTS ADHD SERVICES**

We have been asked for help with a study from the University of Exeter. The project is about young adults with Attention Deficit Hyperactivity Disorder (ADHD) in transition between children's services and adult services. The study team are aware that GPs play an important role in the care of this group and are very keen to hear from you about:

- the services that you know of that are available in your area to support young adults with ADHD aged 18 or over
- your experience of managing these cases in primary care.

If you click on this link [https://www.surveymonkey.co.uk/r/CATChuS\\_GPs](https://www.surveymonkey.co.uk/r/CATChuS_GPs) you will be guided to a page asking about services for young adults aged 18 or older with ADHD in your area – or the lack of services, along with a few brief questions about your role in managing these cases. The online questionnaire asks no more than 15 questions and should take less than 5 minutes to complete. The survey is anonymous and your response will contribute to the creation of a mapping report detailing services currently available in the UK, as well as a report on the management of young people with ADHD in transition in primary and specialist care. More information is available at: <http://medicine.exeter.ac.uk/catchus/mapping/>.

## **PRISON GP CONFERENCE**

A one-day conference focussing on the key issues for all secure environment GPs has been arranged for 27<sup>th</sup> January 2017.

It will include comprehensive updates on clinical and professional issues of interest to those working in secure environments and will also enable you to raise your concerns, have your questions answered and develop your personal network. Further details are available at: <https://www.bma.org.uk/events/2017/january/prison-gps-conference>

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**CURRENT KEY DISCUSSION AREAS BY THE LMC**  
**.... please contact the LMC Office for current status or further info on ....**

- The West Yorkshire and Harrogate STP and the Leeds Plan

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**GENERAL INFORMATION DISTRIBUTED TO PRACTICES THIS MONTH**

Listed below is the information the LMC has sent to practices. If for any reason you would like another copy and/or further information, please contact us.

- GPC new guidance on how the GMS and PMS contracts compare
- Leeds LMC and Leeds LMC Limited 2016 AGM invitation and accompanying papers

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**COMINGS AND GOINGS**

***A warm welcome to.....***

*Dr Debbie Massheder and Dr Wajeeha Ayub, salaried GPs who have recently joined Lingwell Croft surgery and Graeme Archibald, Advanced Nurse Practitioner, and Paloma Soroa, Pharmacist, who have also joined the practice*

*Dr Berry who was promoted to partner at Manston surgery and Dr Stemmet, salaried GP, who joined the practice on 1<sup>st</sup> October*

*Lindsay Gollin, the new Business Manager at Allerton Medical Centre*

*Emma Solomon who will be joining Fountain Medical Centre in January as the new Clinical Pharmacist – they are excited by the prospect of this new role in the practice*

*Dr Charlotte Coffey who joined Westfield Medical Centre in November as a salaried GP*

*Dr Iram Shahid who has joined The Whitfield Practice as a salaried GP*

*Richard Evans who has joined the Shaftesbury Medical Centre as Business Manager*

***Good bye and best wishes to...***

*Peter McIntyre, practice manager at Vesper Road surgery, who is leaving on 30<sup>th</sup> November and returning to accountancy*

*Dr Gillian Brogan, a salaried GP at Lingwell Croft surgery, who has gone on maternity leave for a year*

*Dr Walker, partner at Manston surgery, who left on 30<sup>th</sup> September*

*Kristine Brown, Practice Manager at Allerton Medical Centre, who retired on 11 November 2016*

*Dr Bryony Mathew and Dr Lee Cuthbertson who are leaving Fountain Medical Centre – the practice wishes them both the very best*

*Jenny Taylor, practice manager at Shaftesbury Medical Centre, who is retiring on 31<sup>st</sup> December, and Dr Khan, salaried GP, who leaves the practice at the end of November. Jenny has worked at Shaftesbury for nearly 16 years and has been in general practice for over 30 years. The practice wishes both colleagues good luck for the future.*

***Practice vacancies at.....***

**Thornton Medical Centre - Salaried GP/Partnership (4-8 sessions per week - we are flexible)**

Dr Addlestone & Partners (Thornton Medical Centre) is a forward thinking, busy GMS practice in Leeds 12, West Yorkshire with a list size of just under 9000. We are in a modern and fully equipped health centre using System One.

We are looking for an enthusiastic and committed GP to join our friendly team. We currently have 4 Partners, 2 Locums, 3 Practice Nurses, 1 Advanced Clinical Pharmacist, 1 Health Care Assistant, 1 Phlebotomist and an excellent admin team. We are supportive of staff education and training as well as providing training to GP Registrars, FY2s and Medical students.

Competitive salary, MDU paid, 6 weeks' holiday pro rata and 1 week study leave pro rata. Opportunities to develop specialist skills, leadership and contribute to our local CCG. We would be happy to consider

salaried or partnership applications, and for the right candidate we are flexible in the number of sessions to be worked.

Position to commence February/March 2017 (applicants due to complete GP training are very welcome). To apply please send your CV and covering letter to our Practice Manager ([pamela.wilson@nhs.net](mailto:pamela.wilson@nhs.net)). Informal enquiries can be made to the Practice Manager by ringing 01132310626 (Mon-Thurs).

### **Oakwood Surgery, Gledhow Rise, Leeds 8**

This practice is looking for:

HCA maternity cover 24 hours per week – Tuesday, Wednesday, Thursday  
ANP – up to 30 hours negotiable  
Salaried GP – 4 sessions negotiable

For further details, please contact Donna Marks, Managing Partner, ([donna.marks@nhs.net](mailto:donna.marks@nhs.net)) or by telephone 0113-295-1515.

### **Gibson Lane Surgery, Kippax**

The practice is looking for a part-time 4-6 session per week salaried GP (applications for reduced sessions considered).

We are a PMS practice looking for a committed and enthusiastic person to join our friendly, well organised team.

List size approximately 11500, large leased modern purpose built premises and two branch sites, part dispensing, full nursing team, enhanced services including extended hours, research, high QOF achievers, TPP SystemOne, teaching and training practice.

For further details, please contact Gill Collins, Practice Manager ([gill.collins@nhs.net](mailto:gill.collins@nhs.net)) or by telephone 0113-287-0870.

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New useful documents on [www.leedslmc.org](http://www.leedslmc.org)

- BMA advice on dealing with unfair comments on websites
  - Updated GPC guidance for GP practices about options for your CCG to take greater commissioning control ('co-commissioning'), including the commissioning and performance management of general practice contracts.
  - Leeds LMC and Leeds LMC Limited 2016 AGM – letter of invitation, agenda and Medical Secretary's report
  - Health Education England's GP work experience toolkit
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