



Update from the Consortium of Lancashire & Cumbria LMCs

Tuesday 18th October 2022

Online Access to Prospective Health Records

Many of you have contacted us to express your concerns about the intention to turn on automatic access to prospective health records, through an App, on 1st November. Your concerns are mirrored across the nation.

As we reported in last week's Brieflet, the GPC Executive have been strongly lobbying NHSE to postpone this implementation due to a significant number of concerns that have been raised but not addressed. GPC were hoping to win this postponement from NHSE, but it has not yet happened, and we are getting very close to the wire on 1st November.

In these circumstances we are anticipating guidance from GPC that will propose a blanket switch off for all patients such that practices can then open access at a pace and within risk parameters that the practice can manage.

We have been promised this guidance "in the next few days" to give all practices air cover. In the meantime, we propose that you make whatever preparations are right for your practice. The options appear to be:

- Make whatever preparations you deem appropriate to deal with online access for all your patients
- Run searches for "at risk" groups and block access - but not clear who these should be or what the plans would be for reviewing and then releasing all of these
- Block access for ALL and then have a process to release if requested - allowing more control to GPs and mitigating risk.

LMC Surveys

We have conducted two surveys over the last few months:

- The first to ascertain if the LMC is meeting your needs
- The second to get a professional reaction to some of the proposals in the Fuller Stocktake

We value your responses and can assure you that we will be taking forward the responses to these two surveys.

Regarding the survey that asked if we were meeting your needs, overall, we received a positive response. However, there were some of you that thought we could do better. We are taking on board all your comments and will be publishing a response, along the lines "You Said – We Did" that we will share with you all.

Similarly, there are some important messages coming out of the Fuller Stocktake survey (the one we did, not the ICB detailed interrogation) and we are currently analysing these responses. We will feed this back to you as well as using it in our ongoing dialogue with the ICB as they proceed with developing a Fuller Strategic Implementation Plan. As ever it is your views that are paramount and that we will be pushing as we negotiate with the ICB on Fuller implementation.





Update from the Consortium of Lancashire & Cumbria LMCs

GP Voice

We are now well advanced with our GP Unified Voice arrangements in each of our health communities in Lancashire & South Cumbria, where GP leaders from PCNs, LMC, Federations and GP Clinical Leads come together to present a unified view of what matters to General Practice.

We are now developing a similar arrangement at ICB level so that we can have a strong voice in our dealings with the ICB management team and interact meaningfully with Acute and Community providers who have established collaborative arrangements at ICB level.

PCSE process and escalation

We wanted to make practices aware of the process for raising a case with PCSE and how you and other stakeholders can escalate a case.

Process for contacting PCSE when raising a case:

- Raise a case through [PCSE online](#)
- Receive an acknowledgement with a case reference number.
- If the case should be prioritised call the PCSE Customer Support Centre (CSC), once you have the case reference number, who can mark the case as High Priority, add notes to the cases to explain why this case should be prioritised over others and provide you with the appropriate timescale.
- If the case becomes *urgent** and exceeds the quoted timescale, call the CSC to discuss. They will discuss with you whether there has been a change to the timescale previously advised, or formally escalate the case. They will add further notes to the case to explain why the case has become urgent.

**Urgent: Severe financial hardship, Risk to a patient or individual's safety, waiting for over 40 days since first raising the case and has reason to believe that resolution is not imminent.*

If practices feel there is lack of resolution, is causing severe financial hardship or there is a risk to an individual's safety or the agreed steps to resolve the issue have not been met by PCSE, the LMC, ICB, NHSE and IGPM can escalate a case on behalf of practices.

Please note a case cannot be escalated if the practice has not followed the correct process above to raise the issue with PCSE first.

LMC Buying Group

Did you know, the LMC Buying Group deliver savings to practices without creating any additional work or inconvenience? Membership entitles practices to discounts on products and services provided by the Buying Group's suppliers.

Membership is free and there is no obligation on practices to use all the suppliers. However, practices can save thousands of pounds a year just by switching to Buying Group suppliers. To view the pricing and discounts on offer you need to log-in to the Members section of the [Buying Group website](#).





Update from the Consortium of Lancashire & Cumbria LMCs

MLCSU Academy

Practices are reminded that MLCSU Training Team offer specialist training in all things IT including Microsoft Office, Clinical Systems, Support Systems and Cyber Security. These can be 1:1, classroom based, or delivered online using Microsoft Teams. Read the latest and past editions of their [MLCSU Academy Newsletters](#) on their [website](#) to find out more about training courses and online resources available to you.

[Registering](#) with a relevant code ensures that you are signposted to appropriate content for where you work. Details of the local codes to enter on the registration form are listed below for reference:

- NHS Blackburn with Darwen: MLCSU560
- NHS Blackpool: MLCSU561
- NHS Chorley and South Ribble: MLCSU562
- NHS Cumbria: MLCSU556
- NHS East Lancashire: MLCSU563
- NHS Fylde and Wyre: MLCSU566
- NHS Greater Preston: MLCSU567
- NHS Lancashire North: MLCSU569
- NHS West Lancashire: MLCSU580

Please let us know if you have any comments on the training and resources available, including any additional content you think could be covered by MLCSU Training Team for practices - or use their website to offer this [feedback](#) directly.

Appropriate prescribing of antipsychotic medication in dementia

A new toolkit aims to aid good practice and to help reduce variation in prescribing antipsychotic medication for dementia across England. It complements guidance available at a regional level, and provides information to address uses, risks and alternatives to antipsychotic medication, risk reduction in antipsychotic prescribing, and support to deliver best practice in antipsychotic prescribing and de-prescribing where appropriate. The toolkit is available on the [London Clinical Network webpage](#)

Speak Up Month Activity and Resources

NHSE recently updated the [Freedom to Speak Up \(FTSU\) policy](#) and [guidance](#) in partnership with the National Guardian Office (NGO). Along with the [planning and reflection tool](#), these will assist primary care in evidencing the assessment of FTSU arrangements which must be complete by 31 January 2024.

A new set of resources are also available, including [new videos and podcasts](#) which focus on developing inclusive speak up cultures, reducing barriers to speaking up, and encouraging our ethnic minority colleagues, evening staff, staff with disabilities, part-time and facility staff to speak up and have their voices heard.

Practices can include the Chief Exec of the LMC as the FTSU guardian in their practice policies.





Update from the Consortium of Lancashire & Cumbria LMCs

'Register with a GP surgery' service now available via self-enrolment

Patients are now able to find practices offering the new ['Register with a GP surgery'](#) service via the NHS [Find a GP webpage](#). If your practice is interested in working with NHSE while they enhance this service further, [you can now self-enrol onto the service](#). Support is also available to participating practices via the onboarding team at england.register-gp-surgery.support@nhs.net.

More information about the 'Register with a GP Surgery' service is available on the NHS [Resource Hub](#).

Updated staff respect materials available for all primary care settings

[Public-facing assets are available to download from the Campaign Resource Centre](#), featuring NHS staff working in a range of different NHS settings carrying the message 'We are here to help you. Thank you for treating us with respect'. They have been produced with staff, stakeholders, and patient groups to support NHS teams to reduce abuse and violence against staff.

This includes posters featuring groups of NHS staff and individuals, social media graphics, digital screen graphics for waiting rooms or staff room screens, and a poster template is also available for download that can be used to feature photography of teams, or individual members of staff.

You can also find other comms to share with patients on our [website here](#).

New patient health questionnaires (Ukraine and Russian translations) now available

GP practices can now [download new patient health questionnaires with bi-lingual English/Ukrainian and English/Russian translations](#) for people arriving in the UK from Ukraine, supporting assessment and management of their initial health needs at the point of GP registration. The questionnaires have been developed with Doctors of the World UK.

There is also an English/blank version available which commissioners and providers can adapt for other languages in supporting initial health needs assessment for other vulnerable migrants. Further translations may be added in due course.

Degenerative cervical myelopathy awareness survey

Myelopathy.org is a charity that aims to bring together clinician and patient voices to advance research and awareness of degenerative cervical myelopathy (DCM). DCM, earlier referred to as cervical spondylotic myelopathy, is a degenerative neurological condition which impairs function and quality of life. Anecdotal evidence suggests there is limited awareness of DCM amongst clinicians, and this is believed to contribute to delays in diagnosis.

Myelopathy have developed a [short survey](#) to quantify the awareness of DCM in primary care, so that impactful, targeted education can help to improve patient outcomes. On completion of the survey, they will offer everyone a DCM factsheet, their summary guide to DCM. Survey closes 31st Dec 2022.

