

Update from the Consortium of

Lancashire & Cumbria LMCs

Tuesday 18<sup>th</sup> February

### Weekly Brieflet brought to you by

## Lancashire & Cumbria Consortium of Local Medical Committees

#### This Brieflet includes the following topics:

- General Practice Alert State (GPAS)
- Cancer Pathway/Service Developments -Clarification
- Artificial Intelligence (AI) within GP Practices -Ambient AI Forum 19th March
- Responsibility for Prophylactic Prescribing in Public Health Cases
- North West Controlled Drugs Team
  Communication Incorrect messaging
- Care Home Awareness Ensure You're Receiving the Correct Global Sum Payment
- LMC Collective Action Tracker Survey -February
- GPC England Regional Elections 2025
- Buying Group Recruitment Support
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- Help us grow our audience



#### **General Practice Alert State (GPAS)**

You can see the latest SitRep results below. Results can also be found on our website.

The data we do not receive prevents us from providing a robust picture of system partners and hinders out efforts to push for more support on your behalf.

We really appreciate you taking the time to help us help you.

<u>Please let us know</u> if you are a Practice Manager and do not receive the GPAS input emails.

If someone at your practice needs to be added to the distribution list please email <u>enquiries@nwlmcs.org</u>. Submission links are sent out every Tuesday and Wednesday.



Please let us know if you have any questions/ issues

#### **Cancer Pathway/Service Developments - Clarification**

It has recently come to light that there have been misunderstandings around LMC processes and that new referral form changes/pathway developments etc. are being reported as 'endorsed' by LMCs without the full detail of proposed changes being reviewed by the relevant Committee or our Consortium Executive Board.

In particular, we are recently aware of updates shared via PETs in Central Lancashire this month.

The Consortium will continue to work with Cancer Alliance and Trust colleagues to ensure there is robust engagement / consultation moving forward to ensure our feedback is informed and constructive.

We aim to avoid any further confusion between system partners by holding formal liaison meetings so that should any proposed changes affect GP workload, discussion about how this would be resourced is documented.

#### Artificial Intelligence (AI) within GP Practices - Ambient AI Forum 19th March

We are aware that Artificial Intelligence (AI) within GP Practices is increasingly being explored and are interested to hear from practices on this as the popularity of ambient AI tools such as Heidi Health, Totrus, Corti etc. continues to grow.

<u>We have previously shared some guidance issued by Midlands and Lancashire</u> on this topic with the intention of ensuring that practices are clear on how they can be best supported to implement new technology and understand that the locally commissioned DPO service has supported some practices in this regard.

The decision to implement AI technology is a practice one, and should involve appropriate colleagues considering the risks involved and any mitigating actions needed, from both an IG and clinical safety perspective.

To provide further support and enable sharing of best practice with regards to clinical safety, an Ambient AI Forum is being established, led by L&SC ICB's Digital Clinical Safety Officer Sharon O'Connor.

The first meeting of this forum will be held 1pm-2pm on 19<sup>th</sup> March.

Please email Sharon directly to express an interest in attending: <u>sharon.oconnor8@nhs.net</u>

#### **Responsibility for Prophylactic Prescribing in Public Health Cases**

Back in late October 2024, we wrote to practices in our Brieflet about the confusion that exists for system partners regarding the above.

At the time, we clarified that **provision of prophylactic medication in public health emergencies does not form part of the core GMS contract** yet we are still aware of practices undertaking this work unresourced.

The expectation of GPs to absorb public health responsibilities without being commissioned to do so is unacceptable and risks destabilising General Practice.

We have discussed this with ICB leaders numerous times and have been assured that this would be commissioned on an ad-hoc basis by L&SC ICB as the need arises - we will continue to push for these arrangements to be put in place.

As such, GPs are reminded not to engage with such requests to prescribe when they are not commissioned to provide this service. Carrying out an activity that is not directly commissioned may also mean that there is no cover by CNSGP if something was to go wrong.

Do not feel pressured into accepting responsibility of any workload shift that you are not comfortable with and contact the LMC if you are unsure of your obligations.

#### North West Controlled Drugs Team Communication - Incorrect messaging

We have received reports from practices that a communication was sent out from the North West Controlled Drugs Team regarding registration of new and temporary patients.

The communication states:

It is important to ask all new patients (whether registering permanently or temporarily) to provide identification upon registering. A combination of the following can be accepted as identification(it is preferable that one item of photo ID is seen, along with one document containing the patient's address).

If the patient provides identification, a note of this should be made on their record and they should be treated as normal. If the patient does not provide identification, the regulations state the registration should still be accepted but a note should be made on the patient's records to say that no identification has been seen and they should be asked to bring something next time they attend the surgery. It is this part of the regulations which mean that it can be abused.

Permanent patients should also be asked to provide evidence of their address. Proof of address could be a driving licence, bank statement, council tax bill etc.

If you have a suspicion that the individual is not who they purport to be then you can raise it with the local Counter Fraud Specialist at the ICB.

We have written to the ICB to advise them that this is entirely incorrect and to ask that this is retracted promptly. Practices do **not** need to ask patients for any form of ID when they register as this is not a contractual obligation and they should not be expected to act like border control agents. Here is the BMA guidance on the subject: <u>Guidance on patient registration for GP practices</u>

# Care Home Awareness – Ensure You're Receiving the Correct Global Sum Payment

As part of the LMC's resilience package, we've introduced finance sessions for practice managers. A key issue highlighted in these sessions is that many practices are losing out on valuable income due to incorrect registration of care home patients.

Did you know that patients in care homes receive an additional 46% weighting in the global sum payment? To ensure your practice is being paid correctly, review your monthly statement under "Practice count of patients in residential care" and compare it with your EMIS search. If there's a discrepancy, check that all care home patients are correctly registered under "Residential Institute."

Since payments are not backdated, any updates must be completed before the next quarterly capitation run. For example, changes made by March 31st will be reflected in your April statement. Regular reviews of patient registration and address updates are crucial to maintaining accuracy.

Take a few minutes to check your records, this simple step could make a significant financial difference for your practice!

#### LMC Collective Action Tracker Survey - February

The February survey opened on Monday 17th February and will close at 5pm on Sunday 2nd March. The survey is available to complete <u>here.</u>

The more responses the BMA receive, the better they can understand the collective actions being taken across the country. This data is crucial for effectively advocating for change with the government. To gain further insight, the BMA have added a question to the tracker survey asking about any factors that may be preventing practices from taking any or more action. This will help them identify and address potential barriers.

#### **GPC England Regional Elections 2025**

The BMA will shortly be seeking nominations for regional representatives to join the General practitioners committee England (GPCE). This is an invaluable opportunity for GPs to represent their regional colleagues and help shape the future of General Practice in England.

Nominations are sought for one representative in the areas, successful candidates will be elected for a three-session term starting in July 2025 and concluding in June 2028. Lancashire and Cumbria are listed within.

These elections are open to all BMA member GPs who are based in the constituency for which they are standing and meet at least one of the following criteria:

- AGP engaged exclusively or predominantly in providing personally or performing NHS primary medical services for a minimum of 52 sessions\* distributed evenly over six months in the year immediately before election.
- AGP on the doctors' retainer scheme.
- A medically qualified LMC secretary.

\*The 52 sessions electoral requirement referred to above shall be waived where a GP would normally have complied with this requirement but was prevented from so doing by sickness or absence on maternity leave, reasonable expectation of returning to clinical practice sufficient to meet the requirement and intends to do so. This exemption is to apply for a period of not more than 12 months and not in two consecutive sets of elections.

Nominations for this election will open at 12pm on Friday 7th March 2025 and close at 12pm on Friday 21st March 2025.

Further information about the work of GPCE can be found <u>here</u>, and information about the elections can be found <u>here</u>.

#### **Buying Group Recruitment Support**

The LMC Buying Group understand that recruitment is often an expensive and timeconsuming business, so they created an eye-catching, easy to use recruitment page where any registered member can post their clinical and non-clinical vacancies at no cost. They also offer practices the opportunity to feature their vacancies with a featured package which comes at a small fee.

As well as posting the job on their website, they also highlight any new job posting at least once across their social media platforms. This is a free service to any member practice interested in expanding their vacancy reach beyond their region.

They have also introduced a 'Featured Job' option for those members that want to draw more attention to their advert. The featured role will appear at the top of the Jobs page in a bright colour and be highlighted on their social media channels each week for a month. This service only costs £50+VAT.

To place an advert, visit the <u>Jobs page</u> and upload your vacancy using the application form template <u>here</u>. If you choose the Featured Advert option, they will send you an invoice once the advert has been posted online.

#### LMC Training Events 2025

Please see a list of upcoming training events being hosted by the LMC:

- <u>Complaints Training</u>
- Conflict Management
- <u>CQC Update</u>

To book your place or find out more information, please contact <u>Rebecca.Noblett@nwlmcs.org</u> or view <u>here.</u>

#### Help Us Grow Our Audience

We understand that you are busy and are likely to receive many emails on a daily basis. However it is important for you to receive communications from us because **we can help and support you.** 

We know there are many colleagues who do not receive our brieflet, so please help us by sharing this with your team and letting us know to add them to our distribution lists.

Contact Us