

# LMC ViewPoint

*The newsletter of Leeds Local Medical Committee Limited*

*14<sup>th</sup> July 2022*

## **Leeds Health and Care System declares OPEL level 4.**

The rapid rise in prevalence of covid-19 circulating in the community and the hot weather has in part led to a rising demand for health care services across the city. This week Leeds Health and Care Partnership declared OPEL level 4 as a result of increasing acuity of admitted patients, increasing numbers of Covid positive patients in acute beds, and high numbers of people waiting for alternatives to acute care, in both LTHT and LYPFT. This has resulted in increased pressure for appointments in general practice and very long waits for people in the emergency departments to be reviewed and/or admitted. It was reported on by [BBC News](#)

To have this situation arising in the summer is very concerning and is not only a clear sign that the pandemic is far from over but also evidence of the historic lack of investment across the NHS, not least general practice, and social care. Practices are asked to refer to virtual wards and use of PCAL if acute assessment is needed to avoid sending people directly to very busy emergency departments.

## **Covid-19 vaccination enhanced service specification**

NHS England have published an updated [enhanced service specification for the Covid 19 vaccination programme](#), alongside a [covering letter](#). Practices should note that the programme from September will pay a reduced Item of Service fee of £10.06 per dose. The deadline to sign up for the service is **5pm on 14 July**.

## **Covid-19 infection rates**

The number of community infections continues to rise as the BA.4/BA.5 wave establishes. Data from the ONS Infection Survey (published 8 July) estimates that in the week ending 30 June 3.95% of the population in England – or 1 in 25 people – were infected with COVID-19. There is some regional variation in prevalence estimates, with London having the highest prevalence (4.3%) and Yorkshire & Humber the lowest (3.6%). The number of infections is, however, high in all regions and is increasing.

### For information

- Living in a COVID world: [Government response to the COVID-19 Committee's report](#) (7 July).
- [The UK Health Security Agency \(UKHSA\) has published the latest reproduction number \(R\) and growth rate of COVID-19](#). The current R rate in England is between 1.1 and 1.3 meaning that, on average, every 10 people infected will infect between 11 and 13 other people. The growth rate is currently between +2% and +5% meaning that the number of new infections is growing by between 2% and 5% every day. These estimates represent the transmission of COVID-19 two to three weeks ago due to the time delay between someone being infected, developing symptoms, and needing healthcare. There is increased uncertainty in both national and regional estimates at present, due to changes in testing policy, which make trends in data streams less clear.
- [The UK Health Security Agency \(UKHSA\) published the latest national influenza and COVID-19 report](#), monitoring COVID-19 activity, seasonal flu, and other seasonal respiratory illnesses (7 July).

### **Current West Yorkshire position**

Hospitals across West Yorkshire now have a total of 571 patients with COVID-19. This number has increased by 110 (30%) over the past week. The current increase, driven by the Omicron BA.4/5 variants began on 7 June, from a low point of 74 patients. It has now exceeded the BA.2 April peak. The current total includes 37 patients in mental health beds. The number in HDU/ITU is 8. In addition, non-COVID demand remains very high in all sectors.

### **GDP service output data increase a result of increased GP appointments**

ONS monthly GDP data which shows that [UK services output grew in May 2022](#) with human health and social work activities growing by 2.1% and was mainly because of a large rise in GP appointments. Dr Farah Jameel, chair of GPC England at the BMA, said: “These figures are yet another example of how hard GPs and their teams are working, but also why we desperately need more resource to close the workforce gap in primary care. It’s clear that GP services are good value for money - GPs are not paid extra for doing more work, and yet, the number of standard GP appointments booked has substantially increased, with 24 million appointments in April 2022 jumping to a staggering 27.6 million in May.”

### **GP workforce forecasts**

Responding to [analysis from the Health Foundation](#) that forecasts a shortage of up to the equivalent of 20,400 full-time GPs in England by 2030, and [new data from NHS Digital](#) that shows a fall of 372 full-time equivalent fully-trained GPs in England in the last year, Dr Samira Anane, BMA GP committee workforce policy lead, said: “This bleak yet sadly not unrealistic forecast shows how devastating it would be for patients and the wider health of communities if we continue to lose GPs at the rate we are now, with millions more patients losing access to ‘their family doctor’ and practices being forced to close. In the most recent year we’ve lost the equivalent of more than 370 full-time fully-qualified GPs in England, 116 of which were in the last month alone. With an additional loss of invaluable practice nurses, as laid out by the Health Foundation, it would be catastrophic for patients and practices that rely on their expertise and care every day.

“But there are solutions and the Government needs to hear the cries of the profession for support and to be listened to. Action on meaningful investment, cutting bureaucracy and inflexibility that prevent GPs providing care for patients in the way they best need, inadequate practice buildings and IT systems that are not fit for 21<sup>st</sup> century care, and punitive pensions taxation rules that drive doctors away before they want to, would all make a difference to recruiting and keeping expert clinicians working within communities and protecting the future of general practice as we know it.”

### **New fit note guidance and training package**

From 1 July new legislation allows nurses, occupational therapists, pharmacists, and physiotherapists to legally certify fit notes, in addition to doctors. More detailed guidance has now been published confirming [who can issue fit notes](#). GP IT systems are expected to be updated by the start of September. However, practices should check with individual suppliers as they are operating on different timescales.

### **Replacement of Gardasil® by Gardasil 9® vaccine**

The vaccine supplied by UKHSA via ImmForm for the Human papillomavirus (HPV) immunisation programme will change from Gardasil® to Gardasil®9 during July and August 2022. This change, detailed in this [guidance letter](#) will affect school-aged

immunisation contracts, GP delivered opportunistic catch up services, and the MSM programme delivered in Sexual Health Clinics.

The two vaccines are interchangeable and vaccination should not be delayed due to preference for either vaccine. There is no impact on the dose schedule currently in place. Immunisers should ensure HPV vaccine is recorded by product/vaccine name (i.e. Gardasil® or Gardasil 9®) in their clinical IT systems to maintain the accurate reporting and recording of vaccines administered and support additional reporting requirements to align vaccination status with screening programmes, for example, for young females who become eligible for the NHS Cervical Screening programme.

UKHSA have also produce [guidance for healthcare practitioners](#).

### **Edoxaban switching for Investment and Impact Fund CVD-06 Indicator**

The West Yorkshire Health and Care Partnership DOAC Task and Finish Group have produced [supportive materials](#) for PCNs working towards 22/23 IIF indicator CVD-06: % of patients on a DOAC for AF on edoxaban. The documents include a training video with accompanying slide deck, quick reference prescribing guideline for clinicians and an FAQs document for PCN leaderships.

### **Disruption to supply of blood collecting devices**

LTHT Pathology are experiencing [supply issues with blood collecting devices](#). It mainly affects blood collection sets (wingsets / butterflies) of all types and brands and is anticipated to be an issue for several months. Current guidance is to only use a needle and holder when clinically indicated. Although Pathology Supplies do not currently supply the butterfly-type collection sets, it is expected that there will be an increased demand for the green 21g and black 22g needles and vacuette tube holders. This extra demand is likely to cause supply issues with these products.

At present, supply issues are mainly affecting LTHT sites, therefore GP patients should not be diverted to LTHT hospital phlebotomy services unless there is an urgent indication. For further information, please contact [leedsth-tr.pathologycustomerservice@nhs.net](mailto:leedsth-tr.pathologycustomerservice@nhs.net)

### **GPMplus - new website launched**

This week sees the launch of a new website for **GPMplus** ( [www.gpmplus.co.uk](http://www.gpmplus.co.uk) ), with information about the range of mentoring and wellbeing services available to practices. These services are delivered via LMC Services Yorkshire CIC, set up by YORLMC to deliver wellbeing support to practices, and are available to access free of charge thanks to grant funding from NHSE/I.

Services available include:

#### **Free peer-mentoring**

Up to 8 hours of 1-1 mentoring with a trained mentor experienced at working in General Practice.

NEW - We now have Practice Manager Mentors available to provide support

#### **NEW - The Healthy Practice**

The Healthy Practice model provide a range of tools for practices to utilise (coming soon) as well as a suite of wellbeing education courses covering:

- Personal resilience – courses suitable for the whole practice team
- Teams resilience – courses suitable for practice management, team leaders, partners
- Practice systems resilience – courses suitable for senior management and partners

A range of courses are available to book immediately, and more courses will be added regularly.

### **Wellbeing resources**

Bringing together a series of websites, tools and services to support you in your day-to-day work.

Visit our new website at [www.gpmpplus.co.uk](http://www.gpmpplus.co.uk) for more information and to access support. Please do share with all your practice colleagues.

### **Survey on return to face-to-face TARGET events**

Previously we asked for individual views on returning to face-to-face TARGET events but unfortunately had a low response rate. To assist with planning, we would like to hear the views of every general practice and every PCN in Leeds.

For practices we suggest that each Practice Manager gathers the views of their staff (all those directly employed by and working within their practice) and completes one return on behalf of the practice.

For PCNs we suggest that each PCN Manager gathers the views of their staff (all of the additional staff working across their PCN) and completes one return on behalf of the PCN.

The survey is for practices and PCNs and can be found [here](#). Please note the closing date for the survey is on a **Friday 15 July 2022.**

We are currently scoping out the logistics of returning to external face-to-face TARGET events. In the meantime, TARGET will continue to be delivered online. (The soonest we would be able to organise a face-to-face event would be November 2022 and/or February 2023.)

We are mindful of the forthcoming winter pressures and will continue to liaise with 111 and Local Care Direct regarding out of hours cover for TARGET.

Thank you very much in advance for taking the time to feedback.

## **Vacancies**

### **Salaried GP - South Queen Street Medical Centre**

#### **Job summary**

South Queen Street Medical Centre an exciting opportunity for a GP to join our friendly and supportive practice team, working 4-6 sessions per week.

We are a practice based in Morley with excellent transport links into Leeds and further afield via the nearby M62. We are a PMS practice of 5000 patients.

We are looking for a confident and independent GP who is committed, enthusiastic and passionate about making a difference in primary care.

#### **Main duties of the job**

The post-holder will provide personal medical services, managing a caseload and deal with a wide range of health needs in a primary care setting, ensuring the highest standards of care for all registered and temporary patients.

#### **About us**

We have a varied and passionate clinical team consisting of ,2 salaried GP's , 1 senior Partner , 1 ANP , 1 Practice Pharmacist , 2 Practice nurses and 2 HCA's ( with 1 newly qualified ) who work alongside our excellent administration team.

We are part of the Morley & District Primary Care Network and are also a training practice for Foundation Doctors.

Please contact Melanie Aveyard [maveyard@nhs.net](mailto:maveyard@nhs.net) or Dr David Kaushal [david.kaushal@nhs.net](mailto:david.kaushal@nhs.net) for further information.

### **Specialty Doctor in Paediatric Palliative Medicine**

<b>Salary</b>	NHS Specialty Doctor Scale (MC75 (01-18) dependent on experience)
<b>Hours of work</b>	4 PAs, 9am-5pm, 2 days per week (preferably Monday and Tuesday) plus on call cover of 1 in 6 rota – which would include weekday nights on call and 1 in 6 weekends (total 6 PAs to allow for CPD)
<b>Place of work/Base</b>	Martin House and in the Community.
<b>Type of contract</b>	Permanent

#### **About Martin House**

Martin House has been caring for babies, children and young people with life-limiting conditions from West, North and East Yorkshire for more than 30 years. Every year we care for more than 420 families at our hospice in Boston Spa, in hospitals and in their own homes. We also support more than 150 bereaved families each year.

#### **The role**

We are seeking a Specialty Doctor in Paediatric Palliative Medicine. The successful candidate will be part of a medical team providing 24/7 medical cover at the hospice, comprising of two part-time Consultants in Paediatric Palliative Medicine, three parttime

specialty doctors and a full time specialist doctor who provides autonomous clinical care for patients. In addition, the team support paediatricians in training.

### **Our ideal candidate will**

- Be on the GMC register with a licence to practise.
- Have a significant level of paediatric or palliative care experience
- Have leadership experience
- Understand and implement audit and quality improvement activity.
- Be dedicated, compassionate, work in collaboration, be open, honest, flexible, caring and deliver high standards in everything you do.
- Want to work in a well-established, award winning hospice, working as part of the multidisciplinary team to support the children, young people and their families from the time of their referral through to end of life care.

### **Our Benefits include**

- 32 days annual leave plus statutory holidays,
- Recognition of NHS pension scheme for candidates who are currently in the scheme and up to 10% contributory AVIVA scheme
- Sick pay — six months full pay and six months half pay from day one of service
- Enhanced parental leave — maternity matched to the NHS.
- Life insurance — two times annual salary.
- Employee Assistance Programme
- Free parking at Martin House Children's Hospice, Grove Road, Boston Spa.

If you want to be part of an exciting new journey within the Charity and are seeking a new challenge, we would love to hear from you...

For further details please see the Recruitment Pack and to apply please complete an application form, through our website, [martinhouse.org.uk/vacancies](https://martinhouse.org.uk/vacancies) referring to the Job Description and Person Specification. For further information, an informal discussion, or if you require any reasonable adjustments at any stage of the application process, please contact: Michelle Hills - [mhills@martinhouse.org.uk](mailto:mhills@martinhouse.org.uk)

The closing date for applications is midday on Wednesday 27<sup>th</sup> July 2022 and applications should be emailed to [hr@martinhouse.org.uk](mailto:hr@martinhouse.org.uk). Interviews will take place on Thursday 18<sup>th</sup> August.

If you have not heard from us by Friday 5<sup>th</sup> August, please assume your application has been unsuccessful on this occasion.

Please note all applicants must already hold the legal right to work in the UK to fulfil this role.

**Manston Surgery -Crossgates, Leeds LS15 8BZ & Scholes branch surgery LS15 4DR  
SALARIED GP's REQUIRED – WITH A VIEW TO PARTNERSHIP FOR THE RIGHT  
CANDIDATE : 4-8 SESSIONS NEGOTIABLE**

Manston Surgery is a two-site practice with surgeries in Crossgates and Scholes (LS15) supporting 8200 patients.

We are looking for GP's to join our friendly and welcoming team as a GP Partner or as a salaried GP for up to 8 sessions per week. Your role will be working alongside 3 existing partners, 2 salaried GP's and a GP retainer all being supported by our excellent management, nursing, administration and care navigation teams.

Our clinics are based on a mix of telephone and face to face appointments with patient choice being our main focus. They are triaged by our competent care navigation team and supported by a clinical 'duty doctor'.

We are looking for skilled GP's with the motivation skills and ambition to be actively involved in our practice to cover up to 8 sessions per week. The post-holder will be expected to undertake all the normal duties and responsibilities associated with a GP working within primary care.

You will be working across 2 locations one of which is a dispensing site.

Manston Surgery are a forward thinking and high achieving practice located in East Leeds and within easy access of the A1/M1/M62 motorway links. The Practice is well established and respected locally. We pride ourselves on providing high quality care and innovation in development of local services through our Primary Care Network (PCN).

Our practice uses SystmOne & AccuRx.

For further details or to arrange a visit, please contact the Practice Manager Julie.martin35@nhs.net or call 0113 2645455