

Welcome to the Member Practice Update

<http://education.worcestershire.nhs.uk/weekly-brief/19-july-2019/>

This weekly member practice update is produced by NHS Redditch and Bromsgrove, NHS South Worcestershire and NHS Wyre Forest Clinical Commissioning Groups for circulation in your practice, to provide you with essential guidance, information and useful support.

Your views and feedback are very much appreciated. If you have any comments, suggestions or contributions for inclusion in the Member Practice Bulletin, please e-mail the [communications team](#).

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Find out about local and national events and training [here](#).

Herefordshire and Worcestershire Merger

The consultation on the proposal to merge the four CCGs in Herefordshire and Worcestershire has now concluded and we are pleased to report that member practices in all four CCGs voted overwhelmingly in favour of merger in April 2020, with unanimous support in Redditch and Bromsgrove and Wyre Forest and 26 out of 31 practice in South Worcestershire. 19 out of 20 Herefordshire member practices also supported this proposal.

We are now in the process of finalising our merger application to NHS England ready for final submission by the middle of August.

Herefordshire & Worcestershire Integrated Primary Care & Medicines Commissioning Team Update

Consultation on the proposed establishment of a Herefordshire & Worcestershire integrated Primary Care Medicines Commissioning Team has concluded.

The teams will be led by Lynda Dando - Director, Primary Care & Medicines Commissioning. Lynda will be supported by Jane Freeguard, previously Head of Medicines Commissioning (Worcestershire) and now confirmed in post as the Associate Director, Medicines Commissioning and Charmaine Hawker, previously Associate Chief Finance Officer (Herefordshire) and now the Associate Director, Primary Care.

Letters are being sent to all staff in the current teams advising them of the end of the staff consultation period. The final structure will be shared with all practices next week.

H&W Personalised Care Adjustment Guidance

(Previously Worcestershire CCG Exception Reporting Guidance)

In line with the 2019/20 QOF rules and the introduction of the Personalised Care Adjustment, the Countywide CCG's guidance on Exception Reporting has been updated to reflect the change. The [document is attached](#) and also on TeamNet. This guidance has been updated in agreement with the LMC and Herefordshire CCG.

Action Required: Re: QOF - Change to mapping of admin codes in V41

An email was sent to practices from NHS Digital on the 15th January 2019 regarding an issue with Read code 685.. Cervical neoplasia screening as an administrative code or problem heading to manage cervical screening recalls. This is due to how codes have been mapped in SNOMED.

In essence, this Read code is now in the preventative procedures chapter and has been mapped to the SNOMED term 171149006 'Screening for malignant neoplasm of cervix' which is in the cancer screening hierarchy in SNOMED in v41 of the business rules.

The effect of this is that any eligible patients with 685.. 'Cervical neoplasia screening' on their record will now be included in the QOF v41 business rules, meaning patients with this code may appear to have had a smear and could be missed from recall.

In order to remedy this, practices will need to carry out EMIS searches to look for this code, and if used for recall purposes, remove and replace with Read code 9O8.. Cervical Smear Screen Admin.

A search has been developed to help practices manage this process and can be found within EMIS in the following location: Worcestershire PCT Search & Reports/Anonymised/Cervical Screening/Patients included in V41 not on V38

Practices will need to copy this search across into their own folder within EMIS Population Reporting. It is also advised that the search is run on a regular basis to check for codes that might come into the practice via GP2GP etc.

A copy of the full email sent to practices from NHS Digital on the 15TH January [can be found here](#).

Revised 2-week wait Referral Forms for Worcestershire Acute Hospitals NHS Trust

There will be a slight delay in releasing the revised 2-week wait forms for Worcestershire Acute Hospitals NHS Trust. We are now expecting the new forms to be released on Friday 26th July 2019.

Apologies for the delay.

Echo Statement

Challenges to the Echocardiography Service provided by WAHT

Sent on behalf of Jasper Trevelyan, Consultant Cardiologist WAHT, Carl Ellson, Strategic Clinical Lead, Worcestershire CCGs

Dear Colleague

There is a national shortage of cardiac physiologists and in particular those qualified to undertake and report echocardiograms.

We have an acute shortage of Echocardiographers across the trust. Despite all efforts to recruit we have currently 8 vacancies.

At the same time there is an ever increasing demand for this investigation. The demand for Echocardiograms is currently 550 per week trustwide with current capacity being around 275 scans.

As many are aware we are not currently scanning at Kidderminster while making plans about how best to run the service, we are asking referrers to think carefully about the use of the resource.

It is likely that we will need to provide alternative pathways for patients in the short and medium term and we will communicate further in the near future.

A short life working group is to be established, involving primary care colleagues, whose aim will be to create a sustainable long term solution.

Jasper Trevelyan
Consultant Cardiologist, WAHT

Carl Ellson
Strategic Clinical Lead, Worcestershire CCGs

Medicines Optimisation in Care Homes Service (MOCH)

Background

MOCH is one of the NHS England programmes of investment, sitting alongside the Clinical Pharmacists in General Practice scheme. Funding was available at STP level to bid for, with CCGs committing to 50% funding in year 2 and 100% in year 3; an application was made in April last year, for which we were successful. A previously commissioned care home pharmacist service in SWCCG was used as the foundation for a new STP wide service and with the existing pharmacists working closely with the H&CT Care Home nursing teams, the CCG Executive Leadership Team agreed to commission a service across the STP through the H&CT from 1st July 2018. Unfortunately, this took longer than anticipated and the service was in place from 1st April 2019.

The Alliance Board Chairs were contacted in December last year to advise them of the expanded provision across Worcestershire, with the initial plan for the pharmacists to work alongside the Community Matrons in WF and R&B to gather intelligence on local issues and hotspots. It is anticipated that the Clinical Pharmacists will be aligned to Networks to support delivery of the national PCN DES service specifications.

Care Home Service

The care home service specification requires them to undertake level 3 medication reviews with direct patient/carer contact with priority given to patients new to the home and patients living with frailty. They are also required to work with Neighbourhood teams and primary care in a multi-disciplinary approach, in the same way that the community nurses already do.

The team are experienced pharmacists and are non-medical prescribers or are training to become prescribers. They are happy to agree different ways of working depending on the PCN and practice, have EMIS on their laptops and can log in remotely if needed once the practices have given them a log in and they have signed a practice confidentiality agreement. They are also using the new medicines optimisation template provided for PCE.

If you have any queries then please contact the Lead Pharmacist for the service Anjee Purewal Anjeepurewal@nhs.net or Anne Kingham at the CCG akingham@nhs.net.

Prescribing Top Tip

This week's Prescribing Top Tip is regarding [Emerade Injection](#).

Worcestershire Lifestyle Advisor Service via PCN's

Over the years Worcestershire's lifestyle services have often struggled to engage fully with Primary Care to receive the number of referrals required to support those most in need. The Living Well service contract (delivered by the Independence Trust) ended on 31st March 2019.

Public Health are working with the CCG to create a lifestyle offer that is more embedded within Primary Care. In line with recent PCN DES developments, it is hoped that the lifestyle service work alongside social prescribing and have a presence within each Primary Care Network, with PCN's receiving funding and employing (or subcontracting) a lifestyle advisor to work across their PCN (funding will be calculated on a weighted basis).

There is a draft specification being worked on and also planning for the proposed funding and these will be shared with the steering group for comment. However we are keen to engage with PCN's as well, If you would like to hear more about the proposals please contact steven.connelly1@nhs.net.

West Midlands Familial Hypercholesterolaemia Service – How and Who to Refer

Sent on behalf of the West Midlands Familial Hypercholesterolaemia service

Familial Hypercholesterolaemia (FH) is a common genetic condition that causes a high cholesterol concentration leading to an increased risk of premature coronary heart disease and/or early death. Although management of FH with lipid-lowering therapy, e.g. statins, is highly effective, more than 85% of people with FH in the UK are unaware that they have the condition and are therefore untreated. The NHS Long-Term Plan aims to increase the identified prevalence to 25% over the next five years.

Untreated, people aged 20-39 with FH have a 100-fold increased risk of death from heart disease compared to those of a similar age without FH. Early identification of FH is important because if treatment is started early enough, it will give patients a life expectancy similar to the general population. Systematic searching of GP records to find those at high risk of FH is an important method of identifying affected individuals, and allows us to cascade test relatives. Cascade testing is the process of systematically offering DNA testing to the relatives of affected individuals because someone with FH has a 50:50 chance of passing the condition on to their children.

The benefits of cascade testing are early treatment and the avoidance of heart disease.

The West Midlands Familial Hypercholesterolaemia Service (WMFHS) was launched in November 2017. To date, over 350 patients have genetically confirmed FH and hundreds of family members including young children are now eligible for cascade testing.

There is a designated FH specialist nurse for Hereford and Worcestershire CCG's and the service is delivered from multiple GP practices across the area.

Patients can be referred opportunistically or following a systematic search of GP records. Referrals should also include patients with clinically diagnosed FH (based on the Simon Broome criteria) who have not had FH genetically confirmed.

Please see the [attached referral criteria](#) and [referral form](#) which should be emailed to Westmidlands.fhnurses@nhs.net.

For more information, please contact Elaine George, Clinical Programme Manager on 0121 371 8179 or via Westmidlands.fhnurses@nhs.net.

Important Information - Female Genital Mutilation

Information sent on behalf of Ellen Footman Head of Safeguarding /Designated Nurse for Safeguarding Adults and Children

Dear colleagues

Please see [attached a joint letter](#) from NHSE/NHSI, NSPCC and CCP (Chief Crown Prosecutor) regarding Female Genital Mutilation. It clarifies recording and reporting of FGM; as well as clarity regarding genital piercing and re-infibulation. Please ensure dissemination across your organisation.

Safeguarding Sub-Bulletin

Please find the [Safeguarding Sub-Bulletin](#), which includes upcoming events and training opportunities.

To register with the courses email: WHCNHS.Learninganddevelopment@nhs.net.

Change to ANCA reporting

Please find attached the [ANCA procedural change memo](#).

Public consultation for proposed changes to out of hours dental services

A consultation has launched today to gather views on proposed changes to out of hours urgent and emergency dental services across the West Midlands. The consultation is open to anyone, but the dental team are keen to hear from anyone with a professional or personal interest in how urgent and emergency out of hours dental care is delivered in the West Midlands. You can view the proposals in full on the [Engage website](#) where you will also find information on how to have your say.

Please distribute / display the [attached poster](#) and share the details with your networks as appropriate. We'll also be tweeting to encourage more responses so please do keep an eye out on @NHSMidlands and RT. If you wish to receive a copy of the consultation documentation, please email the dental team on: england.dentalcontractswm@nhs.net.

Survey of cancer screening in the West Midlands

Views of general practice sought

Sent on behalf of Andrew R H Dalton PhD FFPH, Screening and Immunisation Lead, NHS England and NHS Improvement – Midlands

Dear Practice manager / cancer screening lead

I'm writing to ask for your help with completing a short on-line questionnaire.

The Screening and Immunisation team at NHS England and NHS Improvement – Midlands has commissioned a health equity audit (HEA) of cancer screening programmes across the West Midlands. The aim of this is to not only understand the key inequities in our cancer screening programmes, but to understand current work to address these – and highlight further work that all of us in the screening system can do going forward.

PHAST, a community interest company committed to addressing inequalities and improving health and wellbeing, have been appointed to deliver this HEA. They have developed an online survey to better understand what is currently happening in general practice to support cancer screening programmes (bowel, breast and cervical) and to gather suggestions for reducing inequalities in these programmes.

It would be a great help if you can complete the survey which can be found here:

<https://www.surveymonkey.co.uk/r/general-practice-survey-of-cancer-screening-in-the-West-Midlands>.

The survey will be open throughout July though it will close automatically as soon as the target number of responses has been reached. If you have any queries, please feel free to contact Leila Meads at PHAST leila.meads@phast.org.uk.

GPs with Extended Roles - questionnaire

Sent on behalf of GPwER team.

Dear Colleague,

The Royal College of General Practitioners (RCGP) will shortly complete an accreditation pilot for GPs with extended clinical roles (formerly GPwSI) in Dermatology. The process involves an assessment of a candidate's portfolio against a national framework by trained GP and consultant dermatologist assessors and demonstration of continued competence through the annual medical appraisal, supported where possible by an annual performance review in the GP's extended scope of practice.

Further information about the College's extended roles framework can be found in the [RCGP Framework to Support the Governance of GPs with Extended Roles](#).

The RCGP is inviting clinical commissioning leads, those leading service design and others with relevant expertise to help the College understand which accreditation areas it should potentially introduce next. We are also engaging with our members to understand the clinical areas where they would most value a formal recognition of competence in an extended role.

We would value a few minutes of your time to complete this short [questionnaire](#) before the 2 August 2019.

Please also forward this email and survey on to other colleagues who may find this of interest. All responses will be treated confidentially.

If you have any questions please do not hesitate to get in contact.

Kind regards,

GPwER team

gpwer@rcgp.org

Public Health Newsletter

Please find the June [Public Health Newsletter](#) attached.

Salaried GP - Barn Close Surgery

A [rare opportunity](#) to join our cohesive, friendly rural dispensing practice in the beautiful Cotswold Village of Broadway.

Advanced Nurse Practitioner - DeMontfort Medical Centre

An [exciting opportunity](#) has arisen to join a friendly, dynamic and forward thinking team at the newly extended building of DeMontfort Medical Centre. The surgery is easily accessible and has on-site parking for staff.
