

# Harrow LMC News Update

July/August 2018

*Chairs: Dr Meena Thakur/Dr Noreen Ryan*

*LMC Secretary: Dr Eleanor Scott*

## 1. Prescribing of Oral Anticoagulants in Primary Care

The LMC understands that CCGs medicines optimisation team have worked with LNWH to produce guidance to assist in the safe prescribing of oral anticoagulants in primary care. It includes information on long-term management of these patients and also on initiating treatment for those who wish to do so.

Practices are advised to be aware that the referral pathway does not include a clear path of urgent re-referral back into the DOAC or Warfarin clinic. Although it is for the practice to decide whether to initiate DOACs based on an assessment of their level of expertise, confidence and time, there are risks associated with these medications. As prescribers, GPs bear responsibility if they prescribe a DOAC medication even if it has been commenced by the hospital anticoagulation clinic.

## 2. Docman – NWL CCGs advice to practices

Practices have received a [communication from NWL CCGs](#) providing an update on its previous communication regarding the 'unprocessed folder' in Docman. NWL CCGs advise that the fact that there are documents in the folder should not create risk, as long as practices have been using and acting on the alerts (as per training received) that are triggered when a document ends up in the 'Unprocessed folder'. Practices should continue to ensure that they check their alerts in the scheduler application in a timely manner.

Please contact the Docman helpdesk for further advice if you need it. NW London Service Desk: 020 3350 4050.

## 3. Shared care and unresourced work

### Shared care protocols

Shared care protocols are increasingly used to transfer care from hospitals into general practice, including the prescribing of specialist medication. It is important to note practices are not obliged to participate in shared care arrangements, which are voluntary. Shared care arrangements require additional competencies, and it is important that GPs do not undermine care for patients by feeling pressured to treat beyond their knowledge and skills. Shared care arrangements also require additional GP, nurse and administration time, and it is important that practices do not take on this additional optional work beyond their capacity to deliver. Practices should receive resources to provide this extra service, so that current staff are not diverted away from providing core needs of patients.

If the GP decides not to participate, the clinical responsibility for the patient remains with the specialist service. See LLMC's [GPSOE resources](#) for further information and a template letter which you may use to refuse a request.

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## Harrow LMC members

Dr Mark Levy  
Dr Chaand Nagpaul (co-Vice Chair)  
Dr Azeem Nizamuddin  
Dr Nizar Merali  
Dr Noreen Ryan (co-Chair)  
Dr Amit Shah  
Dr Meenakshi Thakur (co-Chair)  
Dr Ali Dhankot (co-Vice Chair)

Harrow LMC members can be contacted via the [LLMC office](#).

## Visit

[www.GPSOE.org.uk](http://www.GPSOE.org.uk)  
to help you through  
this state of  
emergency

## 4. LMC advice re Harrow CCG process for working at scale

Following queries from practices, your LMC sent a communication to all practices providing some information and context on the current Harrow CCG process for incentivising working at scale. The application process was not a competition between practices, but Expressions of Interest (EOI) or bids were expected to pass the eligibility criteria in the guidance sent you by the CCG.

- All 8 north west London CCGs are incentivising their practices to develop collaborative working arrangements with other practices through geographically based units called networks, primary care networks or primary care homes of 30K-50K registered population.
- Where practices wish to form units smaller than 30K or larger than 50K, this should be discussed with the CCG
- GPFV funding (£3 per head of the registered population) is available to support the development of collaborative working arrangements and is non-recurrent.
- Collaborative working and/or a superpartnership **does not require the merging of individual GP practice contracts.** However, to qualify for funding, the CCG will wish to see a shared vision for outcomes through eg a memorandum of understanding (MOU) or agreement between participating GP practices.
- Collaborative working through new networks does not need to replace current arrangements such as the Harrow CIC. Collaborative working can involve working with/through the CIC or under the CIC umbrella.
- The CCG process currently in place to support the development of collaborative working is not competitive - **All Expressions of Interest (EOI) from practices will be considered by the CCG.**
- An EOI is not legally binding. Should a practice change their mind they can withdraw from the arrangement.
- Individual practices can choose not to participate in the process and therefore not access the incentive monies as this is not available to individual practices.
- The funding is to support the development and the set up of the collaborative working arrangements, not for specific services.
- This process is to support practices working together, this does not impact on their contractual status, for example, practices are not required to merge.

If you are considering a practice merger that does involve merging contracts on a smaller scale (eg two practices merging contracts to secure their future) **we recommend you discuss your options with our GP support team first.**

## *Training opportunities for practice staff*

Londonwide Enterprise Ltd (LEL) was set up to provide affordable, high quality training and educational events for practice teams. Please see the list of upcoming events [here](#).

## *Free practice manager conference - Thursday 22 November 2018*

Our next **free to attend** practice manager's conference will take place on Thursday 22 November 2018 at Woburn House, 20 Tavistock Square, London WC1H 9HQ.

The packed programme so far includes topics such as working at scale, digital health, patient engagement, data protection, building your team and a CQC update.

This is going to be a very popular event so *if you would like to express an interest in reserving a free space please email [karen.cooper@lmc.org.uk](mailto:karen.cooper@lmc.org.uk)* More details [here](#)

### Contact us

Harrow Local Medical Committee, Londonwide LMCs, Tavistock House, Tavistock Square LONDON WC1H, 9HX. Tel: 0207 387 2034 Fax: 0207 383 7442, [www.lmc.org.uk](http://www.lmc.org.uk) The next Harrow LMC meeting takes place on **20 August 2018**

### Harrow LMC Team

[Dr Meena Thakur/Dr Noreen Ryan](#) - Harrow LMC co-Chairs

[Dr Eleanor Scott](#) - LMC Secretary

[Jane Betts](#) - Director of Primary Care Strategy

[Lesley Williams](#) - Assistant Director of Primary Care Strategy

[James Winstanley](#) - Committee Liaison Executive

[Communications](#) - Communications and PR (Media enquiries)

[GP Support](#) - For confidential advice and support