GLASGOW LOCAL MEDICAL COMMITTEE LIMITED 8th March 2024



To All GPs and GP Practices

Welcome to our March 2024 newsletter.

Sessional GP Development Day

We would like to thank all of the 52 delegates who attended our Sessional GP Development and Information event on Saturday, 2nd March. Sessions were provided on child and adult protection; CPR training; an IT and service update; workload and wellbeing for sessional GPs; and questions to the medical directors. This was also a valuable opportunity for sessional GPs to network with each other. If you attended the event, we would welcome your feedback via the survey that was sent out by the office.

As part of the event, we sent out a survey to the delegates asking about working as a sessional GP in GGC. We will study the responses but wanted to highlight with practices some of the positive aspects from working as a sessional GP in GGC practices, that the sessional GPs highlighted with us (see the word cloud to the right).



Employers' Superannuation Contribution

Practices have contacted us regarding the increase in employers' superannuation contributions from April. Funding for practices for this is a matter that SGPC has been raising with the Scottish Government. We are still awaiting an update on this.

SFE 2023/24

The 2023/24 Statement of Financial Entitlements was circulated by the board on 1st March 2024 via the practice mailing. The document can also be found <u>here</u>.

BMA Safe Workload Guidance for GPs/Template Letters

Practices are reminded that if they are in a position that they need to utilise the Safe Capacity Exceeded Alert voicemail outlined in the <u>BMA's Safe Workload Guidance for GPs</u>, that the GMS Contracts Team should be notified via <u>email</u> that the practice is doing this. We are aware that a small number of practices have used this alert.

We would encourage GPs to consider the guidance as a whole. There are some template <u>letters</u> within the guidance and practices may find these useful. We would encourage practices that when using these letters regarding inappropriate work transfers from secondary care to ensure that these are addressed to the consultant in charge of the patient. Their contact details should be on the IDL. If the contact details are not there, the communication should be addressed to

the chief of medicine for the site. The office has contact details for the chiefs of medicine, should practices require them.

GP IT Re-provisioning Update

Practices using the EMIS system will be changing to Vision over the next 2 years. The software and technology that will enable the EMIS to Vision migration is in the final stages of development. The first pilot migration from EMIS to Vision in GGC is planned for July 2024.

We are working with the eHealth team to develop a migration plan for the 211 EMIS practices that will transfer to the centrally hosted (Cloud based) Vision system. This will include information for practices about things that can be done at the practice before migration that will help to smooth out the process. In addition, training materials and resources will be made available for practice staff, the wider MDT members and locum GPs / bank staff.

The plan will be to migrate practices by HSCP / locality areas. The IT Re-provisioning Programme Board will agree the schedule, and this will be communicated to practices in due course. Those practices in areas that will be migrating first will be contacted by eHealth and the HSCP.

Some practices that are currently using Vision have already been migrated to the new cloud based service. These migrations are ongoing and it is hoped that all GGC Vision practices will be on the new hosted platform by the end of April.

Docman Replacement

Docman 10 has been procured nationally by the NHS as the replacement to the current Docman 7. The roll out of the new product will commence this year and will be separate to the EMIS to Vision migration. The new software will be on a hosted environment (cloud based). Migrations will be planned by HSCP areas and information will be coming to practices soon. The programme is due to begin in May/June 2024 and run until December 2025 to migrate all 227 GP practices.

Practice Situation Survey

We would like to thank practice managers for their ongoing support with our practice situation survey. This is a weekly, one question survey to practice managers asking them to gauge the level of pressure experienced by their practice over the past week. We are aware that many practices are experiencing significant workload demand and practice pressures. We are keen to monitor the situation in general practice in GGC and to allow us to feed back locally and nationally. The survey is anonymous and should take practice managers less than a minute to complete. The weekly email notes the data that is coming into the office. We are having good uptake with this, with around 120/130 practices completing this each week.

Email Mailing List

If any GPs would like to receive our communications direct to their own inbox, as well as their practice's, please do <u>let the office know</u>.

Wellbeing Resources

The cumulative stress of the pandemic, the workload pressures, and patient demand is undoubtedly affecting people's mental health. We know that practice leadership, and a supportive and valuing culture in general practices is vital in maintaining the wellbeing of the practice team. These are some of the wellbeing resources available to GPs, PMs and practice staff-

National Wellbeing Hub- www.promis.scot

NHS GGC Occupational Health Service-

Occupational Health - NHSGGC

The Workforce Specialist Service-The Workforce Specialist Service (WSS) - National Wellbeing Hub

BMA Wellbeing Resource-

https://www.bma.org.uk/advice-and-support/your-wellbeing/wellbeing-supportservices/sources-of-support-for-your-wellbeing

Working Health Services Scotland

Working Health Services Scotland (WHSS) - Health and Well-being (nhsinform.scot)

The Cameron Fund | The GPs' Own Charity

Royal Medical Benevolent Fund

Royal Medical Benevolent Fund - Help for Doctors in Need (rmbf.org)

Yours sincerely,

Dr Maureen Byrne Chair **Dr John Ip** Medical Director **Dr Patricia Moultrie** Medical Director

Marco Florence Policy Officer Elaine McLaren Administration Officer