BroTaf Local Medical Committee Ltd

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ANNUAL REPORT 2022-23

CONTENTS

	Page
Bro Taf LMC Ltd Staff and Members	3-4
Chairman's Report	5
Bro Taf LMC Overview	6
Cardiff and Vale	7
Cwm Taf Morgannwg	8
Bro Taf LMC Ltd Detailed Income and Expenditure for the Year Ended 31 March 2023	9

BRO TAF LMC LTD STAFF AND MEMBERS

STAFF MEMBERS

POSITION	NAME
Chairman	Dr Steve Davies
Vice-Chairman	Dr Mark Semmens
Medical Director	Dr Kevin Thomas
Medical Director	Dr Sarah Morgan
Executive Officer	Mrs Alison Cole
Secretarial Assistant	Mrs Clare Thomas

COMMITTEE MEMBERS AS AT 31 MARCH 2023

CONSTITUENCY	NAME	
Cardiff	Dr Sayma Ahmed	
	Dr Om Aggarwal	
	Dr Ratnesh Agnihotri	
	Dr Roya Basir	
	Dr Steve Davies	
	Dr Thomas De Souza	
	Dr Amir Ghanghro	
	Dr Avkash Jain	
	Dr Helen Lawton	
	Dr Keziah Maizey	
	Dr Sarah Morgan	
	Dr Damian Pathy	
	Dr Bethan Roberts	
	Dr Jane Roberts	
	Dr Ceri Walby	
Merthyr Tydfil & Cynon	Dr Sanjiv Khanna	
	Dr Padma Nannapaneni	
	Dr Mark Semmens	
	Dr Kevin Thomas	
Rhondda Taff Ely	Dr Peter Brooks	
	Dr Stephanie Foulkes	
	Dr Has Shah	
	Dr Oliver Williams	
	Dr Rekha Shroff	
	Vacant	
	Dr Peter Evans	
Bridgend	Dr Ian Harris	
	Dr Sarah Medlicott	
	Dr Sarah Thomas	
	Vacant	
	Vacant	

	Dr Akram Baig	
Vale of Glamorgan	Dr Fran Ferner	
	Dr Rhodri Lewis	
	Dr Christian Ogden	
	Dr Matthew Whitcombe	
Co-Opted GPs	Dr Daniel Herbert	
	Dr Kate Davies	
	Dr Charlotte Scott-Davies	
	Vacant	

CHAIRMAN'S REPORT

This year has not been an easy one. We have yet again faced overwhelming demand with reduced capacity in the face of multiple crises. For example, the continuing long waits to get our patients seen in secondary care, multiple ambulance service strikes, nursing strikes, and of course the media-created Strep A 'storm' raining down during the height of winter pressures. But once again we have proven to be a reliable, robust service taking all of these challenges in our stride and providing the best care we can for our patients.

During all of this the LMC has continued to work on your behalf – where possible providing clarity in the face of changing regulations and liaising with health boards to help support the sustainability of general medical services across Cardiff Vale and Cwm Taf Morgannwg.

Our colleagues at GPC Wales have also been striving for improvements for general practice, negotiating on the forthcoming Unified Contract, which will see many elements previously classed as enhanced services being taken into core – with the aim of providing practices with a more balanced income to allow for better future planning.

As of 1 April 2023, a new committee will stand up, elected by you, to represent your interests and with this a new Chair will be elected who will take the committee forward. Sadly though, it is also time to say goodbye to those members who have chosen not to stand for re-election. The committee is this term losing 3 experienced members – Dr Damian Pathy, Dr Helen Lawton and Dr Akram Baig. Two of our newer members - Dr Padma Nannapeneni has also chosen not to return. All will be missed for their valuable input to the LMC and its constituents and we thank them for giving their time and expertise.

We would also like to encourage our GP Trainees to become involved in the LMC. Many of the issues also affect this cohort and so early engagement with these issues is recommended. We currently have 2 vacant GP Trainee seats.

The recent elections have brought a new Executive Committee for the LMC, and so my last act as Chair is to thank you for your support this far and wish you all the best for the future.

Dr Steve Davies Chairman

BRO TAF LMC OVERVIEW

Many of the issues dealt with this year have been those affecting the whole of the Bro Taf area and pan-Wales, rather than individual health boards. For example, what can only be described as the Strep A chaos at the end of 2022 caused by poor messaging from the media and Public Health, along with the expected increase in demand on services normally seen during the winter months. These have been further compounded with the effects of COVID still being present - increasing demand exponentially to an unsustainable level across all health care services. Consequently, sustainability still remains an issue in primary care, as it no doubt will for the foreseeable future, particularly in light of the ever-rising costs of living and increases in energy pricing affecting everyone.

This year has seen contract changes made such as the transfer of elements of QAIF into the contract, with a move towards further elements being subsumed to create a unified contract to come into force on 1 Oct 23, which aims to modernise and remove unnecessary barriers to service delivery. Further details of the new contract will be disseminated as they emerge.

Confusion remains with the introduction of the new FIT pathway, with many examples of inappropriately rejected referrals being sent to us (many with urgent suspected cancer). We continue to discuss this with the health boards in order to gain clarity for both primary and secondary care on when FIT testing should and should not be required prior to referrals.

We remain concerned at the number of reports we are receiving linking non-attendance of ambulances as attributable to patient deaths. It is expected that many more of these will come to light through the introduction of the Medical Examiners Service.

We have also raised our concerns with both health boards and GPC Wales regarding the apparent discretionary nature of GMPI coverage currently offered to GPs. This discretionary cover (paid for from GMS funding) appears to be add to odds with the GMC requirement to be fully indemnified. We therefore encourage all GPs to check their levels of coverage with their MDOs as well as with GMPI.

As always, we continue to encourage the reporting of incidents and breaches of the clinical communications protocol. Reporting of these breaches remains extremely important and vital to arm us with the evidence needed to approach different departments seeking a change in behaviours.

The LMC held an election this year for the term of 2023-2023 and as a result, as of 1 April 2023 a new committee will stand up, elected by you to represent your interests. The LMC is your organisation, working on your behalf to represent your interests. Any concerns regarding any aspects of general practice, the GMS contract or secondary care should be raised via your LMC constituency lead or directly to the LMC Office at the earliest opportunity. We look forward to hearing from you.

CARDIFF AND VALE OF GLAMORGAN

The rapid growth Urgent Primary Care Centres across C&V has been of concern to us this year. The current referral criteria is extremely limited to many ailments which could be dealt with by self-care and pharmacy input through the common ailments scheme. Constituents feel that the centres are monopolising the locum workforce – offering more money for less work - whilst also creating a demand amongst patients which would be difficult to sustain if the centres closed.

Improvements in waiting times and ambulance release times have been seen across Cardiff & Vale due to the implementation of various schemes, albeit still with long waits in A&E. Cancer performance is still below standard but improving slowly.

There are still many areas of concern – such as lack of provision of mental health services and the transfer of workloads to GPs without consultations – and these are being dealt with on a case by case basis with the health board.

Sustainability within Cardiff & Vale practices also remains precarious with various practices experiencing issues with their premises. Where possible the health board are providing assistance with these issues – however the LMC remains on hand when needed to discuss any issues you may have and would always recommend early intervention.

CWM TAF MORGANNWG

The biggest change within Cwm Taf Morgannwg Health Board this year has been the introduction of a new management structure, moving away from the integrated locality group model to a care group model. We have been assured that the changes to the primary and community care group should not impact on primary care services, however it is hoped that the new model will provide clearer governance and processes for the secondary care departments and a move away from 'silo working' across 3 different sites to a more unified and comprehensive structure. The project is now entering Phase 2 and we are therefore likely to hear of more changes before the year end.

From a primary care perspective, the LMC has been working on a number of issues affecting the delivery of GMS including (but not limited to):

Following complaints by GPs that the current childhood bruising policy expectations were unrealistic and burdensome on GPs, we are now working with the health board to review and improve the policy, with input from key stakeholders to make it more realistic and user friendly for all whilst not compromising on patient safety. The reviewed policy should be available shortly for comments.

There has been a recent bid by the health board to reintroduce spirometry back into general practice. The LMC is standing firm on this due to spirometry not being GMS, the general lack of capacity within practices to undertake this work and the increased health and safety requirements. However, practices may receive communications from the health board seeking expressions of interest to reintroduce this service.

The LMC has also requested that a treatment pathway be constructed which deals with those patients who require iron and blood transfusions. At the moment these patients are being sent back to primary care with no secondary care departments taking responsibility. Therefore, a clear pathway has been requested for these patients.

We also continue to push for admin hub which was promised as a means of dealing with the multiple patient queries GPs are receiving regarding waiting lists and expedite letters. Whilst there is a specific telephone number available for some specialties, the health board have acknowledged and are addressing that the priority should be for the highest demand generating departments first with other departments following after.

As always, we will provide updates in our newsletters as they become available.

BRO TAF LMC and BRO TAF LMC LTD

INCOME & EXPENDITURE SUMMARY

YEAR ENDED 31 MARCH 2023

TO BE INSERTED WHEN RECEIVED BACK FROM ACCOUNTANT