Edition 3

July 2021

Your PCN Executive Team

PCN Clinical Directors (job share)

Dr Lesley Freeman

Dr Sagar Shanghavi

PCN Lead Nurse

Lisa Tindall

PCN Lead Practice Managers (job share)

Karen Nicholson

Karen Smith

PCN Operations Manager

Hilary Brockway

Primary Care Development Team PCN Support

Dawn Gunga

Sonia Robson

LS25/26 Primary Care Network (PCN) Newsletter

PCN Workforce

A summary of the existing PCN workforce and recruitment plans for additional workforce are outlined below: -

PCN Pharmacy Team

- Michael Richards – Senior Clinical Pharmacist
- Scott Dalgleish – Senior Clinical Pharmacist
- Alisha Clair – Senior Clinical Pharmacist
- Maariyah Pandoor – Clinical Pharmacist
- Shiv Mistry – Clinical Pharmacist
- Noel Kizere – Clinical Pharmacist
- Diana Apostolescu – Pharmacy Technician

A **new pharmacist** Noel Kizere has recently joined the PCN Pharmacy Team and we will have a new **trainee pharmacist** joining the team shortly.

Steroid emergency cards: We are continuing to look through patient lists for the different steroid forms to see which patients are eligible. Each patient needs to be individually assessed.

Structured Medication Reviews: We are carrying out structured medication reviews across all practices, initially focusing on patients who are on 10-19 drugs with severe frailty.

Practice Pairings: We are taking the opportunity of the growth of our team to reorientate the PCN pharmacy team towards specific practices. Each practice will be aligned to two of the pharmacists and Diana (Registered Pharmacy Technician) will continue to work across the PCN.

PCN Pharmacist Task Groups for each practice are active and we are currently checking them daily. We will dedicate 12 hours per week for this once our 6th pharmacist is fully trained. The aim of these is to assist practices with supply disruption/ out-of-stock queries, medication queries and Treatment Advice Notes.

Community Pharmacy Consultation Service: Scott is coordinating with Community Pharmacy reps and individual practices to support roll out of GP referrals to Community Pharmacy for minor ailments. The aim is to release 6-8% of appointment capacity by moving consultations to community pharmacy for conditions/symptoms that can safely be referred. From mid-August the first practices will start to use the Pharm Refer system to create and send the

PCN Member Practices

Garforth Medical Centre

Practice Manager: Lisa Carroll

Lead PCN GP: Dr Aparajit Kakkar

Gibson Lane Surgery

Practice Manager: Gill Collins

Lead PCN GP: Dr Clare Hirst

Kippax Hall Surgery

Practice Manager: Karen Taylor

Lead PCN GP: Dr Jacqueline Hawkhead

Lofthouse Surgery

Practice Manager: Karen Nicholson

Lead PCN GP: Dr Anna Tarr

Moorfield House Surgery

Practice Manager: Ade Brownlow

Lead PCN GP: Dr Nighat Sultan

Nova Scotia Medical Centre

Practice Manager: Karen Smith

Lead PCN GP: Dr Vishal Kapoor

Oulton Medical Centre

Practice Manager: Hilary Farrar

Lead PCN GP: Dr William Cowie

referrals to pharmacies. The service will involve reception/admin leads in coaching staff and overseeing referrals day to day, as well as a specific clinician per practice to be a point of contact with the pharmacy team, who can liaise on clinical issues e.g. urgent referrals back to the practice where pharmacies identify this is necessary.

We continue to provide our regular clinical sessions, support to vaccination clinics, care homes MDTs and support and training. We have several projects in development including working alongside the CCG to review frameworks for DOAC initiation and review.

Our clinical sessions have increased since April to 42 hours per week, and these will increase again once our new pharmacist, Noel, has completed his induction.

PCN Care Coordinators

- Danielle Gunga

Danielle is continuing to support the Care Home MDT meetings to ensure that these meetings are run effectively, and actions are recorded and circulated in a timely manner. She has also been coordinating the volunteers for our vaccination clinics, supporting the pharmacy team with the steroid card work, and assisting with the Healthy.Io project.

- Rebecca Farrar

Rebecca is joining the PCN team on a secondment from Garforth Medical Centre. She will be supporting with the administration of the Covid boosters, as well as providing general administrative support for the PCN.

Physician Associate

- Bakhtawar Nawaz

Bakhtawar is continuing to work with Oulton Medical Centre, Nova Scotia Medical Centre and Kippax Hall Surgery. We have also appointed two additional Physician Associates who will start working in the PCN on 23rd August 2021.

Social Prescribers/ Healthcare Assistants

- Jo Lee (LS26)
- Charlie Easter (LS25)

The PCN Social Prescribers/Healthcare Assistants are working with practices. They are doing home visits to housebound patients and patients in care homes, and supporting with clinics in practices. Over the next couple of months they will be deployed into the Leg Clubs in Garforth and Rothwell, more on the Leg Club later...

First Contact Practitioners (FCPs)

- Rob Southern & Mark Wood (FCP Leads)
- Rochelle Bodey, Sarah Robinson, Sam Davies, Caroline Tobin (FCPs)

The First Contact Practitioners are employed via Leeds Community Healthcare on an employ/deploy model of employment. The team are now starting to see more patients face to face.

Paramedics

We have recently had confirmation that we have been assigned four paramedics who will start with our PCN from 13th September 2021. We will have 2 full time paramedics working in the PCN at a time, and they will rotate spending between primary care and with West Yorkshire Ambulance Service (YAS).

Advanced Nurse Practitioner

We are currently advertising for an Advanced Nurse Practitioner who will provide clinical supervision for the PCN clinical workforce, as well as providing direct patient care. Please share the link below with anyone who might be interested in joining our team.

https://beta.jobs.nhs.uk/candidate/jobadvert/U0053-21-1838

Planning Ahead Coordinator

We have been successful in employing a Planning Ahead Coordinator, Jo Joy-Jones will be joining the team on 9th August 2021. Jo will be developing the work done as part of the Population Health Management project.

Health & Wellbeing Coaches

The advert for two Health and Wellbeing Coaches has recently closed and interviews are taking place at the start of August.

Covid Vaccination Programme

As of the 28th of August the PCN had delivered **58,156 doses of Covid vaccine** to our patients. We have a couple of week of 2nd dose clinics left which should take us to over 60,000 doses. This has been a huge effort involving staff and volunteers from across the PCN so a huge thank you to everyone involved.

Practices have now signed up to the Covid booster programme, which starts from September.

Flu Update

Those eligible for NHS influenza vaccination in 2021 to 2022 are:

- all children aged 2 to 15 (but not 16 years or older) on 31 August 2021
- those aged 6 months to under 50 years in clinical risk groups
- pregnant women
- those aged 50 years and over
- those in long-stay residential care homes
- carers
- close contacts of immunocompromised individuals
- frontline health and social care staff employed by: o a registered residential care or nursing home
  - registered domiciliary care provider
  - a voluntary managed hospice provider
  - Direct Payment (personal budgets) and/or Personal Health Budgets, such as Personal Assistants.

The vaccine uptake ambition for each cohort is shown in the table below: -

Eligible Group	Uptake Ambition
Routine programme for those at risk of influenza	
Aged 65 and over	At least 85%
Aged under 65 'at risk', including pregnant women	At least 75% in all clinical risk groups
Aged 50 to 64 years	At least 75%
Children's Programme	
Preschool children aged 2 and 3 years old	At least 70% with most practices aiming to achieve higher
School-aged children	At least 70% to be attained across all eligible school years.
Reducing levels of inequality	
All ages	No group or community should have a vaccine uptake that is more than 5% lower than the national average.
Health and Social Care Workers	
Frontline health care workers	100% offer with an 85% ambition
Frontline social care workers	100% offer with an 85% ambition

One major change to the flu programme for 2021/22 is the incentive programme for general practice. The previous four indicators in QOF (totaling 18 points) have been replaced with new incentives for target groups in the Investment and Impact Fund (IIF). The IIF operates in a similar way to QOF, but with calculation of achievement at PCN level rather than practice level. The vaccine can be provided in any patient setting (e.g. primary care or community pharmacy), provided provision is coded on GP IT systems. Payment based on PCN achievement will be paid to PCNs, not individual practices.

A copy of the full letter can be accessed via the link below: -
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1006038/Letter_annual_flu_2021_2022_20210727.pdf

What is happening in the LS25/26 PCN

Leg Club Relaunch

We are very excited to announce the restart of the Garforth Leg Club in September 2021, which will continue to run at Garforth NET. We are considering various models of delivery to ensure that the service can be delivered in a way which ensures that members and staff are safe. The initial plan is to deliver a weekly service between 9am – 12 noon.

We are also working towards a launch date for the Rothwell Leg Club.

Patient Story – Garforth Leg Club

Barbara had been housebound for 3 years before attending the leg club and was apprehensive about her mobility, transport and coming to the appointment. Garforth NET discussed her concerns and reassured her that they would provide the correct transport for her needs. Since coming to the leg club Barbara has advised that she has had the confidence to purchase a scooter and is going to go outside on the scooter. Barbara has also made friendships at the group which have continued by telephone throughout the Pandemic recently Barbara advised "I'm missing the leg club so much it gave me the chance to engage with people"

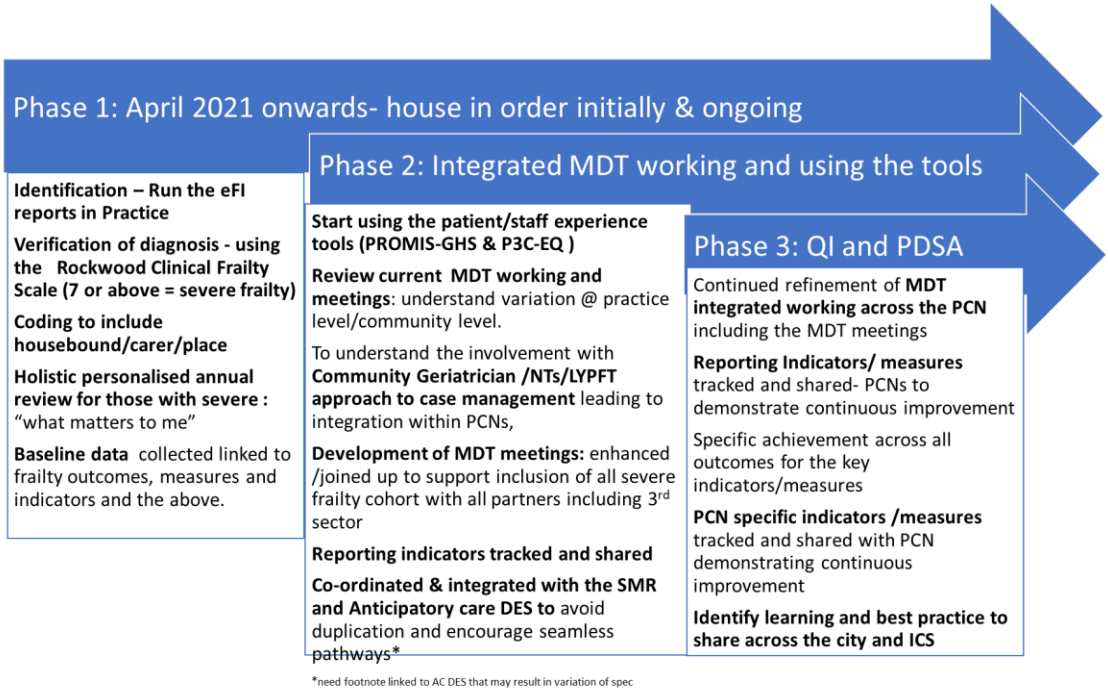
Blood Pressure Monitors

Our PCN is due to received 250 blood pressure monitors which will be distributed to practices. These monitors are to be used to provide home monitoring for patients with a diagnosis of hypertension. There are plans to provide a system where the patient can upload their results from their phone, rather than having to come into the surgery, or phone in. Hopefully there will be more on that soon.

Enhanced Frailty Scheme

The scheme will run over 3 years and replaces the CCG's care home scheme. It will support a wider cohort of patients and take into consideration the impact of the Covid pandemic. There are 3 phases, with a view to improving the effectiveness of diagnosis, multi-disciplinary /multi-skilled team conversations and approach; and improve quality of life outcomes for people and their carers.

The scheme is aligned to the city's **Frailty Outcomes**, which is underpinned by **The Leeds Carers Partnership Strategy and Living with Dementia in Leeds: The Strategy.** The achievement of the outcomes, indicators and measures will be at PCN level.



Phase 1 started in April 2021 and will run throughout the scheme as this relates to the verification of diagnosis through the identification of people at risk (eFI report twice a year), with a review and diagnosis of severe frailty using clinical tool: The Rockwood Clinical Frailty scale. Annual holistic review using the "what matters to me" person centred care approach.

Phase 2 will begin no later than Q4 of 2021/22 and focuses on using patient and staff experience measures, along with a review around MDT working and meetings occurring within and across primary care

Phase 3 is the delivery and achievement aspect against the specific outcomes, along with identifying learning and sharing good practice. This phase will begin no later than Q1 2023/24.

Livi Update

All practices have signed up for the Livi scheme and we are awaiting a go live date from the Livi team.

Livi Connect offers video appointments which patients can access through their mobile, laptop or tablet. The service is only bookable by the patient, and there is clear guidance when booking about what health concerns can be dealt with.

Further information regarding the Livi Connect service can be found via this link to their **website**.

Minuteful App (developed by Healthy.io)

The Minuteful App allows patients to carry out their annual ACR (albumin creatinine ratio) test at home and submit their results via a Smartphone. There is a pilot project running in Leeds and so far 2 of our practices are taking part in the pilot. Results show that home testing does increase uptake and allowed the identification of a small number of patients with abnormal results, which could then picked up and managed by the practice.

Micro-Grants Available

As part of the work they have been doing around obesity the LS25/26 Local Care Partnership have set up a micro grant funding opportunity to support local groups and leaders to support access to sports and exercise groups in the area in response to asking local people what could help them keep healthy.

Further information and guidance can be found in the supporting attachments.