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Suffolk LMC Office Christmas Opening Hours

The LMC office will be operating as usual over the Christmas period. We will be closed on Christmas Day, Boxing Day, and New Year's Day. Please continue to contact us through the usual routes: support@suffolklmc.co.uk / 01473 372940 Like many organisations, our team members are available at different times, so please ensure you cc the support inbox into any communications where you are seeking assistance. This will help ensure your emails are dealt with in a timely manner.

Suffolk LMC Activities in 2025

It has certainly been a busy year for the LMC with changes across primary care coming thick & fast. A brain dump of recent office activity looks like:

- Generalised advocacy for primary care - ensuring your voice is heard in many different forums
- Work around ADHD, Spirometry and other ES matters
- Working with public health to ensure a clear pathway and to remove expectation that "GP will do all"; Smoking Cessation, School referrals, Housing applications
- Pastoral support including to challenged practices and individual GPs
- CQC preparation / support; risk registers
- PM & GP leaders away day
- WhatsApp Group Support / Input
- Recruitment Ads / Support
- Interface responses including EPIC (see separate newsletter item), regular forums with both acute trusts, NSFT, ICB & others.
- Representation in statutory matters (including national policy), local primary care commissioning and medicines management policy.
- Contract issues / negotiations (PMS framework, LES & other contracts)
- MP meetings (to support individual practices and represent general practice as whole)

The office – steered by the committee – has been working hard on making the LMC more responsive & representative. We're always open to suggestions and comments on this topic – drop us a line with what you'd like to see!

Suffolk GP Summit update

In November GPs from across the county met to discuss – alongside technology and service provision innovations - GP leadership structures, coherence & surviving in the new commissioning landscape. It was evident from this meeting that there was considerable appetite to work together, that East & West Suffolk really aren't all that different and that the constitutions of both LMC, Fed & CDs* would benefit from updating.

This paper [here](#) summarises issues raised in the discussion and proposes a direction of travel. It is currently under consideration by a large number of GP leaders/committees! We would love to hear your views – do use this anonymous web [form](#).

*if this exists in your PCN



Suffolk LMC WhatsApp

A broadcast group which is open to all working in primary care in Suffolk, for local clinical nuance, contractual updates and pass-through info from GPC



Suffolk PMs, Managers + LMC WhatsApp

No third parties are included in this group; it is for Senior Managers within Suffolk General Practice only.



(Lots of) Changes at ESNEFT

EPIC

The LMC is well aware of recent difficulties relating to duplicate results/requests and is in conversation with both the ICB & ESNEFT on the matter. We note that there is a precedent for payment to practices – acknowledging rather than offsetting the work incurred - in similar circumstances in the West Suffolk area.

Clarification of results in MyChart:

We understand there is some uncertainty around which results patients can view using MyChart and felt the following worthy of publication:

Only results requested by ESNEFT providers go to MyChart. There is an automatic release schedule as below:

Only those in the right column are not released automatically, or if for the others at the time of ordering manual release only was chosen.

There is also new functionality where clinicians can prevent automatic release from their In Basket. But that only in reality applies to the middle column.

Select table	17 days after report	By Clinician Action Only
Blood science labs	Adult Imaging	Paediatric imaging
Normal drug / sexual health screenings (i.e., HIV)	Abnormal drug / sexual health screenings (i.e. HIV)	Potentially sensitive results that clinicians have marked "Do Not Route to MyChart" at the point of ordering
Obstetric ultrasound	Cellular Pathology	Genetic
Normal Tumour markers		Abnormal Tumour markers
		Antenatal screenings
		GP ordered

Rheumatology Helpline at ESNEFT

Following discussions with ESNEFT Rheumatology we are told the helpline is now open going forward (without capping or closing) from 9-11. Patients are also encouraged to contact the team via MyChart. We've said that primary care type queries (analgesia, etc) won't be sent there.

A formal communication about all the routes of contact into Rheum. are coming shortly and – as a related aside - we await discussions on fracture liaison service changes.

"C the Signs" & CT Requesting

Recent changes appear to have been made whereby CT scanning can now be ordered via C the signs in both West & East Suffolk. Concurrently we are aware that East Suffolk practices will have noted a change to CT requesting on ICE. It is still not yet clear whether this relates to EPIC or "C the Signs" – we hope to unpick and restore the status quo shortly.

Whilst CT access has been nationally mandated under cancer standards, the LMC remains thoughtful about the workload associated with incidental findings and is clear that this should not mean restrictions in existing pathways. We continue to engage & hope matters will be clarified shortly.



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Click here to see a list of

[Committee Members](#)

Recruitment

Take a look at our current live vacancies across Suffolk [here](#). If you would like to advertise a role, just send us the vacancy details along with anything you would like included, such as the job description, how to apply, and a contact person for the role.

To advertise please email the LMC - support@suffolklmc.co.uk

Neighbourhood Teams

Progress has slowed on Neighbourhood Teams as a result of a lack of detail around national contracts. We do know that West Suffolk is likely to focus on Diabetes whilst efforts in the East will focus on Heart Failure.

Oliver McGowan

The LMC would like to reiterate the [guidance](#) put out in September. We are not aware of any substantial changes & would happily liaise directly with any practice that feels under pressure to fund the Oliver McGowan training directly.

Stop smoking – Prescribing Arrangements

From 1st December 2025 the new pathway set up by Public Health & Communities will open, enabling residents of Suffolk to be supported to stop smoking using prescribed medication. Both Varenicline and Cytisine will be available via Feel Good Suffolk (FGS). This is part of a trial pathway with a limited budget and we have been asked to manage patient expectations around this. FGS advisors will undertake a pre-quit assessment and offer the most suitable pathway. If medication is recommended, FGS will then place an order with a participating pharmacy. The patient will have a further consultation with the pharmacy before prescribing. For those who don't have a local pharmacy within the trial, a postal service will be offered. Patients will receive weekly behavioural support, as per the NCSCT Standard Treatment Programme.

Patients can self-refer at <https://feelgoodsuffolk.co.uk/stop-smoking/how-to-stop-smoking/>. Professionals can also refer using the same portal, or by calling 0345 603 4060.

This has been a long running issue and we trust it will now resolve. As ever, the LMC office would like to hear of issues/requests for commissioned practice based prescribing support.

HCAs & non registered HealthCare Professionals

This has been a confusing topic!

Recent clarification from UKHSA may be [found here](#) & mirrors [LMC advice](#) issued prior to this release. Whilst these requirements are not new, they do challenge custom & practice in a number of practices and raise concerns over the financial viability of some immunisation programmes.

If any practices are struggling operationally following this advice and would like some support, please contact us.

OpenSAFELY

Practices using SystemOne or EMIS Web are reminded to activate the NHS OpenSAFELY Data Analytics Service in their clinical systems following the data direction that was issued on 9 June 2025 by the Department of Health & Social Care. We understand NHS England have written to practices this week who are yet to activate to remind them. Instructions are available [here](#). Activation is a legal requirement of the Health and Social Care Act

Your GP Fed Board

Chair	Dr Nick Rayner – Oakfield, Newmarket
Medical Director	Dr Ruth Bushaway
Chief Executive	David Pannell

Non-executive directors

Andrea Clarke	Orchard Street Practice Manager, Ipswich
Dr Paul Driscoll	Haven Health, Felixstowe
Dr Andrew Hall	Felixstowe Road, Ipswich
Dr Mark Hunter	Guildhall & Barrow, Bury
Dr John Lynch	Framfield House, Woodbridge
James Pawsey	Ivry St, Ipswich
Dr Simon Rudland	Sessional GP
Dr Peter Smye	Guildhall & Barrow, Bury
Jane Wallace	Wickham Market Practice Manager
Dr Firas Watfeh	Haverhill Family Practice



Suffolk GP leaders' summit

On 13 November Suffolk's GP leadership met for the first time to discuss future opportunities and what is needed to respond. Attendees were Suffolk LMC Committee, GP Federation Board and PCN Clinical Directors.

One of the key questions discussed was how we should make decisions, on complex questions, where the influence of general practice is maximised by presenting a single view to the rest of the health and social care system? Lots of ideas were generated and we will be developing a list of actions.

Peter Smye – Medical Director Suffolk LMC
Nick Rayner – Chair Suffolk GP Fed



Learning from a child's death in our Out of Hours service

The parents of a young child contacted 111 and the case was passed to the Fed Out of Hours service with a disposition to contact within six hours. Our team attempted to contact the family several times without success. The child sadly died shortly afterwards.

Key learning included clearer communication, for example keeping phones switched on when awaiting callbacks, particularly overnight. Appropriate safety-netting advice, including attending A&E if symptoms worsen, was also reinforced.

This is the first significant clinical incident we have experienced in the Out of Hours service and has highlighted important areas for strengthening patient safety.

Fed 2024/5 accounts

In 2024/5 our revenue increased by 11% to £28.8m. Our surplus after tax was £0.2m which reflects our target to breakeven. Our balance sheet remains very healthy with net current assets of £1.8m. We employ 496 staff.

The Fed is a not-for-profit community interest company which supports primary medical services in Suffolk. During the course of 2024/5 we have significantly developed our support offer through the creation of a Member Services Division which works alongside Suffolk LMC. The active initiatives supported by the Fed, as our community interest remit, are listed below:

Support area <i>Italic is work in progress</i>	
<ul style="list-style-type: none"> ▪ GP & staff support <ul style="list-style-type: none"> ○ GP Support Hub ○ <i>Suicide prevention (current bid)</i> 	<ul style="list-style-type: none"> ▪ Practice/back-office support <ul style="list-style-type: none"> ○ LMC Buying Group ○ HR Advice service ○ Agilio contract
<ul style="list-style-type: none"> ▪ Clinical services <ul style="list-style-type: none"> ○ NHS Health Checks – Fed bid and manages contract on behalf of practices ○ Meeting commissioning service gaps – delivered at cost <ul style="list-style-type: none"> - Respiratory diagnostics (spirometry) - <i>LARC/coil fitting</i> ○ New initiatives outside PMS/GMS & ES e.g. West Ipswich INT Care Management Service (and planning for Suffolk-wide service) ○ <i>Weight Management national programme referrals</i> 	<ul style="list-style-type: none"> ▪ New/additional revenue streams <ul style="list-style-type: none"> ○ Clinical research - building capacity within primary care as part of Mereside practice, in Cambridge's, winning bid ▪ Estates <ul style="list-style-type: none"> ○ GPF Estates - Community interest Company for complex practice leases (when needed) ○ Alternative estates models e.g. Remote/Admin Hubs
<ul style="list-style-type: none"> ▪ Digital <ul style="list-style-type: none"> ▪ Sponsorship of: <ul style="list-style-type: none"> - GP Digital & Automation monthly group of interested practices - SystemOne Expert Group ▪ Digital governance <ul style="list-style-type: none"> - Horizon scanning, due diligence, governance review & implementation support for digital not covered by ICB/ NHSE IM&T - GP Digital Governance Group – with oversight from GP Fed Integrated Governance Sub-committee - Clinical Safety Officer sign-off on behalf of practices ▪ AI <ul style="list-style-type: none"> - Heidi AI – consulting scribe - Brave AI – automation of incoming clinical mail & repeat scripts - <i>Quantum Loop</i> - <i>AI chat bot for practice queries to LMC & ICB Primary Care Teams</i> 	<ul style="list-style-type: none"> ▪ Digital (continued) <ul style="list-style-type: none"> ▪ Automation <ul style="list-style-type: none"> - Kynoby - document processing & repeat prescribing - Automation & Reporting SystemOne Unit - <i>TPP Auto filing path results</i> ▪ Software packages <ul style="list-style-type: none"> - Welby LTC management - Heattech-1 new pt registration - <i>Titan dispensary software</i> ▪ Training <ul style="list-style-type: none"> - Clinical Safety Officer ▪ Other <ul style="list-style-type: none"> - <i>Facilitate West DSNs using EPS</i> - <i>ADHD self-referral pathway to Right to Choose</i> - Support Turning Point getting their services on SystemOne

Fed clinical services round-up

- **Spirometry service go-live** – this has now launched for practices/PCNs not wanting to take-up the Enhanced Service and deliver spirometry themselves. Developed with Suffolk LMC, it uses N-Tidal Diagnose for faster COPD diagnosis and spirometry to support asthma assessment.
- **Glemsford merges with Unity** - Glemsford Surgery merged with Fed managed Unity Healthcare on 4 December.
- **Podiatry apprenticeship success**
Shara, our first podiatry apprentice, has qualified through the apprenticeship programme, completing her training. This is a major milestone as there are an acute shortage of podiatrists.
- Congratulations, Shara!



Fed Member Services – digital

- **AI receptionist & GP triage** – we are aware this is a priority for members. There is plenty of innovation:
 - Emma is an AI phone receptionist being implemented at Two Rivers Medical Centre.
 - GP Nav is a protocol-based workflow supporting care navigators
 - GP Triage is an AI GP triage which replaces Anima/eConsult. They will be presenting at our January Digital and Automation meeting
 - The Digital and Automation meeting is held on the second Tuesday of each month from 1–2pm, email (howard.woldsmith@suffolkfed.org.uk) to join us
- **Kynoby** – this software automates incoming mail processing and repeat script requests. We have prepared a short video on its significant impact on our five test practices https://youtu.be/_1ptwQoJPTA. We will be contacting remaining practices in the new year regarding the next wave of adopters.
- CQC has produced a ‘myth buster’ on using AI in practices. How the Digital & Automation Group operates is consistent with this. <https://www.cqc.org.uk/guidance-providers/gps/gp-mythbusters/gp-mythbuster-109-artificial-intelligence-gp-services>

Fed Member Services – other initiatives

- **Agilio contract** - This has been novated to the Fed from the ICB and will save West Suffolk practices £30,000 annually.
- **Supporting Turning Point onto SystemOne** – The Fed’s tech team is helping with configuration, training and technical support.
- **ADHD adult self-referral for practice websites** – we are developing an online Right to Choose module which practices can put on their websites and direct patients to. This will reduce the clinical and admin time needed to process adult referrals.

Fed Member Services – save the date

- Member Services will be hosting a showcase on 24 February in Bury St Edmunds, supporting you to make practice life easier.

Call in for a practical look at the support, tools and ideas Member Services can offer your practice right now – along with what’s coming next. We will provide more details in the new year.

