# Worcestershire and Herefordshire Local Medical Committees Ltd

 $\label{thm:condition} Worcestershire\ Local\ Medical\ Committee\ Ltd$  St Stephens\ Surgery

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Chairman: Dr Shaun Pike – <u>spike@worcslmc.co.uk</u> Vice-Chairman: Dr David Herold

Secretary: Dr Simon Parkinson - <a href="mailto:sparkinson@worcslmc.co.uk">sparkinson@worcslmc.co.uk</a>
Executive Officer: Lisa Siembab - <a href="mailto:lsiembab@worcslmc.co.uk">lsiembab@worcslmc.co.uk</a>

The Minutes of the Worcestershire Local Medical Committee Ltd held on Thursday 14<sup>th</sup> December 2017 at 7.30pm at The Charles Hastings Medical Centre, Worcester.

### **OPEN MEETING**

PRESENT: Dr I Haines, Dr D Herold, Dr R Kinsman, Dr F Martin, Dr S Morton, Dr S Parkinson, Dr S Pike, Dr E Penny, Dr D Pryke, Dr B Fisher, Dr J Rankin, Dr H Ray, Dr R Fanous, Dr R Dhuck, Dr E Shantsila, Amy Louvaine, Lisa Luke, Dr C Ellson, Dr A Kelly, Carole Beardsmore, Dr S Gaspar

- APOLOGIES: Lynda Dando, Dr P Bunyan, Dr M Davis, Dr G Farmer, Dr K Hollier, Dr G Moore, Dr J O'Driscoll, Dr J Rayner, Dr C Whyte, Dr M Venables, Dr L Stepien, Helen Garfield
- 2. FORMAL APPROVAL OF THE MINUTES OF THE MEETING HELD ON THE  $8^{\text{TH}}$  DECEMBER 2017

### 3. E-REFERRALS

The Chairman welcomed Dr Savio Gaspar and Carole Beardsmore from NHS Digital to the meeting who attended to give an update on the E-Referrals Project. John Quinn was unable to attend. Carole Beardsmore and Savio Gaspar ran through a presentation on E-Referrals. This is for all first consultant referrals to secondary care and will be introduced in Worcestershire by May 2018. Advice and Guidance has been introduced by the Trust to complement this where GPs can contact a consultant directly regarding bloods etc. This advice can then be translated into an E-Referral if necessary. By May 2018 most Trusts in the Midlands will be rejecting paper referrals as they will no longer be paid for these.

A number of issues were raised by the Committee and Carole Beardsmore agreed to take back issues raised around communication with Primary Care. Our local lead within the Trust is Heather Flemming, Outpatient Elective Access Manager. It was agreed that Officers should contact her.

Action: The Secretary to make contact with Heather Flemming

- **4. MEMBERSHIP** nothing to report
- **5. CCGs** Dr Carl Ellson updated the meeting as Lynda Dando sent her apologies.

**PMS Monies** – Dr Ellson updated that it has been agreed that the remainder of the PMS Premium is to be used to fund spirometry for all practices and the funding will be released in January 2018.

**Training Developments –** The Secretary updated that there are three strands to this, and this is becoming quite confusing, Practice Manager Training, Practice Nurse Training and the Resilience Fund. These are individual pots of money. The Training webpage is now available whereby practices can book onto specific training for practice nurse updates. There will also shortly be a Practice Manager training programme to be developed together with an away day and these will also be available to book on the website.

There is also a need for Practice Manager Mentoring and we need to have these mentors trained. The NHS England want monthly activity of the spend against these budgets.

The Secretary further updated that Resilience Team have been recruited and have had 5 practices contact or be identified and one has had a visit. One has had a nurse advise them and there are others being discussed as to what action is required. Resilience training is required and we are scoping out companies who can provide this.

**CCG Constitutions** – Dr Kelly updated on the changes to this. The managerial aspect of the three CCGs have been working as one for the last year and the view is that, although they will not officially merge, they will work together more cohesively. There are Four Non Executive Directors across the county, although there will continue to be three statutory bodies with an extra 2 GP members totally 9 across the County. Alliance Board Chairs will also be elected by April 2018.

Dr Ellson updated that the period of office will be 18 months to 2 years. Dr G Moore asked for a concern to be raised in her absence with the new structure of 3 GPS for each CCG as this does not reflect the population. Dr Ellson updated that the reason for this is that 3 GPs will maintain the clinical majority as there are 6 non clinical.

Anti-virals for Residential/Nursing Care Homes – Dr Ellson updated that the CCG are now responsible for developing a plan for this and they have developed an addendum to the care home LES. They are putting together an options paper. The Secretary updated that there was a letter from the centre regarding this in the summer and now the CCG has been identified as not already having a policy in place for this. There needs to be a procedure in place should Public Health England declare an epidemic so that prophylactics can be administered within 48 hours. The Secretary shared his response on this to the CCG that this work should be funded at the minimum of £250-300 per session as a locum rate. He also raised specific concerns around boarding schools with the CCG as there are issues around dosage

and consent. He also added that an inter-practice agreement would be required as practices may be struggling themselves as staff may be off sick and sharing this across practices or using locums will require a protocol. A Winter Plan is required and this should be developed now in preparation for winter 2018. Dr Ellson agreed to take this back to Lynda Dando for her to feedback. Dr S Morton suggested that it should be costed per dose given. There was a discussion as to whether out of hours could do this work as they have access to the records.

- **6. HEALTH AND CARE TRUST** Dr Sant sent his apologies and has resigned as he has a new position.
- 7. STP The Chairman updated on the Carers Memorandum of Understanding. The STP is requesting all Board Members to sign up to this. There are some workload implications for GPs to consider. The Chairman also updated on a document on the Accountable Care System. The Chairman will share the document and highlighted a couple of issues with it. The Chairman asked for feedback on the document via email.
- **8. WORCESTERSHIRE ACUTE HOSPITALS TRUST** No-one attend from the Trust

### 9. **REGULAR ITEMS**

- **a. NHS England AT** the Secretary reported the meeting scheduled with NHS England for 13<sup>th</sup> December 2017 was cancelled due to sickness. This is to be rescheduled. The Secretary also feedback on a meeting with Frances Campbell, where NHS England expressed concern about clinical governance in joint working, new roles for GPs and that they may be working outside their areas of competence. They are also concerned about inter practice referrals pneumococcal vaccinations and the recall of patients.
- b. Public Health/County Council nothing to report
- c. Federations

**NW Healthcare** – nothing to report

**SW Healthcare** – nothing to report

Wyre Forest Health Partnership – nothing to report

- **d. Education** nothing to report
- **e. LWAB (Local Workforce Action Board, formerly LETC)** the Vice Chairman updated that next meeting in January 2018.
- **f. Dispensing** nothing to report
- g. Out of Hours / NHS 111 nothing to report
- h. Non-Principals Group nothing to report
- i. Registrars –Dr F Martin updated that she is in discussions with a GP Registrar from the South who may be interested in joining the Committee.
- j. P.M. Groups nothing to report
- k. Administration
- <u>Timing of Meetings</u> the Secretary raised on behalf of the Deputy Secretary asked if the Committee would like to move the meetings to afternoons. The committee declined this.
- Website/Noticeboard the Secretary updated that the

website is being revamped and asked for the Committee's views on a noticeboard for job advertisements, locum availability and training being provided by other organisations. The Committee agreed to placing reputable courses on the website and Job advertisements. However, they did not wish to have locum availability advertised. It was suggested that we liaise with Jenny Murray regarding job advertisements.

- Forward Planning Meeting the Secretary suggested that the committee needs to start to consider how the LMC may be structured once he retires. LMC finances are being reviewed as to how the Committee may be organised and the impact on the levy if we need to increase staffing/resources. The Secretary updated that there will be a meeting in the New Year to discuss this if anyone wishes to attend.
- I. Workload nothing to report
- **m. PAG** nothing to report

### 10. MATTERS ARISING

### Minute 5/848: RESPECT Process

The Secretary raised this and recently circulated the papers. He updated that although this is something the LMC would support this is not something GPs have the capacity to undertake at present.

## Minute 5/854: Social Prescribing

The Secretary updated that the pilot practices have received the monies and the training is being planned.

### 11. COMMITTEES

a) GPC – The Secretary updated on the meeting on 16<sup>th</sup> November 2017. The indemnity issue is continuing to cause massive difficulties but this is still planned for 1<sup>st</sup> April 2019. Changes to the GP Contract are looking to be fairly minor and more on this will be known in January 2018.

**GPFV Transformation Board Meeting 28<sup>th</sup> November 2017** – the Deputy Secretary sent her apologies so was unable to update on this

**GPC Workforce Conference 24<sup>th</sup> November 2017** – the Deputy Secretary sent her apologies and the Secretary updated that the whole time equivalent number of GPs in England has dropped together with the headcount. Overseas recruitment was discussed.

**LMC Conference UK** – the Secretary updated that this is to be held on 9<sup>th</sup> March 2018 in Liverpool with a dinner to be held on the 8<sup>th</sup> March. If anyone wishes to attend as a representative or an observer to let Lisa

Siembab know before the New Year. Motions need to be submitted on 21<sup>st</sup> December 2017 and the Secretary asked for any suggestions.

# b) GPC News – nothing to report

# 12. NEW ITEMS

No new items

- 13. ITEMS B Receive Circulated
- **14. ITEMS C** For discussion

# 15. ANY OTHER BUSINESS

No AOB

# **CLOSED MEETING**

The Chairman closed the meeting at 9:25 pm