# Worcestershire and Herefordshire Local Medical Committees Ltd

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The Minutes of the Worcestershire Local Medical Committee Ltd held on Thursday 11th October 2018 at 7.30pm at The Charles Hastings Medical Centre, Worcester.

#### **OPEN MEETING**

**PRESENT:** Dr P Bunyan, Dr I Haines, Dr D Herold, Dr K Hollier, Dr R Kinsman, Dr S Morton, Dr S Parkinson, Dr E Penny, Dr D Pryke, Dr B Fisher, Dr J Rankin, Dr C Whyte, Dr L Stepien, Dr R Fanous, Dr R Benney, Dr W Safdar, Dr E Shantsila, Amy Louvaine, Dr Carl Ellson, Dr Anthony Kelly, Lisa Siembab

- **1. APOLOGIES:** Dr S Pike, Lynda Dando, Helen Garfield, Dr J Seewoodhary, Dr F Martin, Lisa Luke
- 2. FORMAL APPROVAL OF THE MINUTES OF THE MEETING HELD ON THE 13<sup>TH</sup> SEPTEMBER 2018 BY THE VICE CHAIRMAN

The Vice Chairman opened the meeting as the Chairman had sent his apologies. The Secretary ran through the Action Points from the last meeting.

**MRI Scans** - The Chairman asked at the last meeting for the CCG to raise with the Trust that they should not to ask patients to see their GP to chase up MRIs. Dr Carl Ellson confirmed that the work around MRI scans is now completed.

**Shared Care Protocol** - the Secretary updated that a meeting was set up but is currently being rescheduled.

**Acute Trust** –the Secretary updated that the Acute Trust and LMC are producing a document that will set out the responsibilities for ordering and reporting on tests, this was discussed at the last meeting. This should be circulated soon.

**Deanery** – Lisa Siembab has provided the Trust with the contact details for the lead at the Deanery.

**Renal Impairment and IQSP** – Dr Gemma Moore had agreed to take this forward through IQSP but was not at the meeting.

**Dispensing Practices Audit** – the Vice Chairman updated that the audit has now been sent out to all practices. However, he does need to have a discussion around what is in the contract.

**OOH Inductions and IT Access** - Dr E Penny has fedback the issue that was raised by Dr E Shantsilla. This has been discussed with the out of hours GPs, they are low on trainer numbers and they are undertaking a survey on this.

PAG – the Assistant Secretary has escalated the issue with LMC PAG attendance with Richard Vautrey. It is the view of GPC that NHS England are out of line and London-wide LMC has restructured their PAG and they have LMC Reps. NHS England are discussing the performance scheme. The Secretary further updated that the Area Team Meeting with NHS England and other neighbouring LMCs discussed attendance at PAG and all have agreed that there will be a letter to PAG attendees including a leaflet developed by local LMCs and this will be reiterated in the NHS England letter to the attendees also.

**LMC Conference** – all the agreed Worcestershire Motions have been submitted.

- **3. MEMBERSHIP** nothing to report
- 4. CCGs Dr Carl Ellson updated that Lynda Dando had sent her apologies. He updated that there had been an escalation of concerns about provider quality and he stated that it is vital that GPs take the complaints route with the CCG Quality Team copied in, in order for them to be sited on trends. GPs can raise issues directly with the CCG Quality Team but this is sometimes is not joined up. Dr George Henry is the Quality Lead and they are looking to make changes to the quality regulations. Dr Carl Ellson also commented that often patient identifiable information gets caught up in email threads and this is a concern in light of GDPR. The Secretary agreed to remind GPs, not to include patient details in communications in the newsletter. The Secretary asked for this to be included in the next Member Update.

Action:

The Secretary to include an article on escalation routes and that PID should not be included when raising quality issues in the next Newsletter

Dr Carl Ellson to ensure this is included in the Member Update

Dr Anthony Kelly thanked the Secretary and the Assistant Secretary for the Shared Care template examples and asked if DOACS could be included as a sub subject in the imminent meeting. The Secretary asked for clarification if there is now to be funding attached as part of this work separately to the anti-coagulation LES. He commented that there needs to be a discussion on this.

The Assistant Secretary asked for clarification on the Shared Care Protocols and whether this will include the Health and Care Trust in addition to the Acute Trust. The plan is to develop this in time to cover mental health.

The Secretary asked about the Woodrow dispersal as there have been large numbers registering at some of the practices. Dr Carl Ellson commented that Lynda Dando would need to respond to this.

The Secretary commented that when she is attending the three Alliance Board Meetings she has gained a sense that there should be more standard offers to neighbourhood teams. For example, GP designed templates that can be used if GPs want to use them. Dr Carl Ellson responded that there is a potential for having an IT lead for the county but it would be good to have a GP working with this lead. This should be developed within the Alliance Boards. Dr Anthony Kelly commented that these things should be feed up through the Alliance Board structure to the Alliance Board Programme Board and the Secretary commented that there is also an IT working group that is well placed to take on this role, all felt that GP friendly clinical templates would be of value to all practices.

The Secretary commented that there were some errors on the members practice update on mandatory training and that Prevent Training does not have to be face to face training. She did ask for these to be updated and was assured that the next Member Practice Update will be correct.

Dr B Fisher asked about the meeting on the 24<sup>th</sup> October 2018 and the scale of the restructure of the MSK Scheme being planned for the South of the county. Dr Anthony Kelly updated that there is a mandate to deliver an acute community primary care model with triage. There are three separate models in the county. The South is most aligned with the national model but there needs to be a decision made about the county model to be implemented by January 2019. The CCG want to work with the North to move to a south model and promote good working relationships. The have met with a range of MSK providers and there is a desire to work together.

The meeting on the 24<sup>th</sup> October 2018 is a clinical meeting and they want as many GP representatives as possible. This scheme will be piloted for a year as the north is coming up for procurement next year. They have 12 weeks to get something in place and then this will be tested over 15 months to ensure it is fit for purpose as this is a new way of working and the sharing of risk, especially financial risk.

The Secretary commented that MRI requests are still being rejected with the comment "specialist referral only". Dr Anthony Kelly responded that the Trust are now working to the NICE guidance as an interim measure until 1<sup>st</sup> January 2019. The Assistant Secretary asked who takes clinical responsibility as he has received unsigned rejected letters that he has escalated this via the Quality Team and he has not received a response. Dr Anthony Kelly responded that there will be a telephone number to discuss issues such as these in the future. Dr Carl Ellson asked for these issues to be escalated in writing and the Secretary confirmed that this has been done to Dr Suneil Kapadia and Dr Graham James. The Secretary commented that Frances Campbell's view is that the responsibility lies with those who triage the referral not the GP. Dr Carl Ellson confirmed that a two week wait cannot be downgraded without a discussion with the GP. The Secretary commented that this should be the process for all referrals.

- 5. **HEALTH AND CARE TRUST** The Secretary updated that she sat on the interview panel for a new Associate Medical Director for Community Care and they recruited Dr Simon Challand.
- **6. STP** The Chairman sent his apologies. The Secretary updated that the Chairman has produced an STP update that will be shared with the Committee shortly. She updated on a few points from the last meeting the Chairman attended.

The Assistant Secretary updated on his last GPC meeting and there was an agenda item on the NHS England's consultation document on Integrated Contracting Arrangements. He ran through the main points of this document. The Secretary has met with the Herefordshire STP leads to discuss this and how we bring ourselves into a structure with a unified provider voice. Dr J Rankin asked if we would be told which additional services we will be providing. The Secretary responded that practices will be given an offer and there will be choice and flexibility but we are not sure how this will look at present. The Assistant Secretary commented that there needs to be a budget attached to do this work. The Secretary updated that the LMC have managed to get small amount of transformation monies from the CCG to establish a Provider Board.

7. WORCESTERSHIRE ACUTE HOSPITALS TRUST – The Secretary updated that she is attending some of the Alliance Board Meetings. The Secretary has been invited to meet with the Medical Divisional Directors from the Trust and there is a willingness to work with us.

The Secretary has responded to the A&E letter that was recently sent out from the Trust and she has also discussed the issue of communication with Dr Suneil Kapadia and Dr Graham James. There was a discussion about LMC attendance at meetings. Dr E Penny raised the issue of the OOH Care Hub and it would be good to have an LMC member sitting on the Emergency Department Delivery Board.

#### 9. REGULAR ITEMS

a. NHS England – The Secretary updated on a recent meeting with NHS England and our neighbouring LMCs. The Secretary has concerns that GPs who work under the Special Allocation of Violent Patients Scheme are more likely to receive complaints. All allegations are recording on the GPs file and this is a cause for concern. Dr C Whyte raised an issue with online pharmacies that are not delivering patient's medication. Dr J Rankin asked for a link about the dispensing practices to be included on the newsletter.

#### Action: The Vice Chairman to forward the link to Lisa Siembab

**b.** Public Health/County Council – The Secretary updated on flu vaccinations as there is a supply issue. There is a communication going to out all practices shortly. The advice is to give the alternative vaccine but there has to be patient consent or alternatively GPs can direct them to a pharmacy. The Assistant

Secretary agreed to raise this nationally. The Vice Chairman also updated that the rules around vaccination have changed. Dr B Fisher asked if there is a route to report this behaviour by the pharmacy. The Secretary commented that this should be reported to the CCG. Dr C Whyte raised that her practice have issues about the pharmacies administering vaccinations that could be unsafe as they do not have the facility for anaphylactic treatment.

### Action: The Assistant Secretary to raise with GPC

**c. Federations –** nothing to report

**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 the next meeting is next week.
- f. Dispensing Dr J Rankin commented that the dispensing audit has been published and is more of a questionnaire with an EPS theme. The deadline for completion is the middle of February, giving practices less time to complete this. The Vice Chairman and Dr J Rankin will both discuss this and feedback to the Secretary.

# Action: Vice Chairman and Dr J Rankin to feedback to the Secretary

- g. Out of Hours / NHS 111 The Assistant Secretary updated that the Herefordshire out of hours service provider, Prime Care are pulling out of this service. Worcestershire, Warwickshire, Coventry and Herefordshire contracts will now all end at the same time and will include extended access.
- h. Non-Principals Group nothing to report
- i. **Registrars** nothing to report
- j. P.M. Groups nothing to report
- **I. Workload** The Secretary suggested deleting the workload as it is included across the board. This was agreed.
- k. Administration The Vice Chairman raised the issue of whether the LMC should post job advertisement on the website. The Secretary also update on the Herefordshire and Worcestershire Training Hub who are about to launch a free recruitment function free across the STP footprint. They will also shortlist and set up interview dates. The Secretary asked if the committee would like for the LMC to advertise jobs on the website. Dr C Whyte suggested it come to the next meeting and Dr Kinsman suggested asking the whole committee.

#### Action: Lisa Siembab to email the committee for their views

m. PAG – the Secretary updated that the next meeting has been cancelled and is being rescheduled. Dr S Morton attended the September meeting. He asked who we could discuss our issues with if we are not happy with how our

PAG is run. The Secretary updated that this has been discussed with NHS England and all the LMC do now feel more comfortable.

## 10. MATTERS ARISING

- Nigel Huddleston MP the Secretary met with the MP recently and he was keen to hear about GP issues. The Secretary has written to all the MPs about the pay rise and we have received responses which have been shared with the meeting.
- 2) Shanee Baker, LMC Law the Secretary met with LMC Law and Shanee has agreed to a free bespoke seminar for the county. We are awaiting the detail of what she could offer. She would also be happy to facilitate on a free legal surgery. The Committee agreed this would be a good idea.

Action: The Secretary to arrange the seminar/surgery

3) West Midlands LMC Liaison Group – the Secretary updated that Worcestershire have been asked if we could like to re-join this group following our departure a year ago. The Secretary would like the committee to consider re-joining. They host two Nuts and Bolts Sessions per year and they generally have high profile speakers. All agreed for us to join for a year and review at the end of the year.

Action: The Secretary to feedback on the next nuts and bolts session

4) **WMAS** – the Secretary updated on an issue Dr R Kinsman raised about ambulances leaving patients at surgeries. She asked if this had happened to any other practices. WMAS are stating these patients need urgent care and cannot get home. The Secretary agreed to raise this with WMAS.

Action: The Secretary to raise with WMAS

#### 11. COMMITTEES

a) GPC Committee - The Assistant Secretary updated on the last meeting.

#### 12. NEW ITEMS

N/A

- 13. ITEMS B Receive Circulated
- **14. ITEMS C** For discussion
- 15. ANY OTHER BUSINESS

Dermatology – Dr L Stepien raised the issue of dermatology at DMC seeing a patient once and discharging inappropriately. She had a patient recently that was discharged and the Secretary advised to raise this via the Quality Team at the CCG.

Action: The Secretary to also raise with Dr George Henry

# **CLOSED MEETING**

The Vice Chairman closed the meeting at 9.25 pm.