### MINUTES OF HEREFORDSHIRE LMC MEETING HELD 6<sup>th</sup> May 2020

**Those in attendance**: A Seftel, P Adams, R Dales, N Fraser, R Dua, C Reese, J Johnson, F Nikitik, P Dye, A Hargreaves, A Leeman, L Dando, C Hawker, S Parkinson, V Goodger, S Moran, Cllr S Bowen, R Walthew, J Freeguard, M Hearne, L William, Lisa Siembab

### 1. Apologies None

# 2. Herefordshire Half Hour

RD asked for CH, who attended on behalf of the CCG, to give an update on the position with the Herefordshire Half Hour. CH updated that nationally GMS practices are contracted until 6.30pm each day. There has historically been a locally agreed contract in place with Taurus Healthcare for call handling during this period each day at an approximate cost of £21,000 per annum. As the CCGs have now merged there is move towards standardising local contracts to create equality across the STP footprint.

CH further explained that there was a plan to implement a new agreement called Revivo in April across both counties, however, this has been postponed due to the current crisis. This has provided an opportunity to take on some of the learning from the last 6-7 weeks.

A Commissioning Intention has gone out to all practices from the CCG setting out what they will and will not be commissioning going forward. The plan is to revinest the  $\pounds 21,000$  back into Herefordshire General Practice to be ringfenced.

RF asked for views from practices if they would be open to funding this half hour themselves and commission the service directly with Taurus. It was agreed more information would be required in order to make an informed decision. CH confirmed the CCG would be happy with this provided the service for patients would be seamless and it required no CCG funding.

MH commented that it would cost in excess of  $\pounds 21,000$  as it is likely that this service would drive up demand. He agreed to work up an options appraisal for consideration by the LMC before sharing this with all practices for consideration.

Jane Freeguard updated on safe prescribing enhanced and the requirement to include more monitoring/shared care, in addition to safe prescribing for those patients that require extra work. This is to be paid quarterly and is currently being drafted. It will be shared with the LMC for comment before going out to practices.

### 3. **AGM**

RF opened the formal AGM by requesting an update of the LMC Expenses Report from PA. She presented a summary of the LMC Expenses for the year 2019-20. She confirmed that last year the budget ran at a slight deficit in order to keep the levy down for practices. It has been agreed by LMC Officers to freeze the levy at 53p for all practices for 2020-21.

RD confirmed that all LMC Officers are happy to continue, however, in terms of succession planning it would be good to have a Vice Chairman for the Committee. If anyone is interested or is aware of any GP who would be interested please let him know.

RD updated that all Committee Members need to ensure they have declared any conflicts of interest to the LMC Office so that these can be uploaded to the LMC website.

RD formally transferred the work of Herefordshire LMC to Worcestershire and Herefordshire LMC Ltd and confirmed that the Board of this limited company remain unchanged with RD and RF sitting on this board.

RD confirmed that LMC Officers Salaries remain unchanged with the exception of the national 2% uplift. RD also confirmed that the LMC Accountants and Auditors remain as French Ludlam.

The AGM was formally closed.

- 4. Conflicts of interests: No new conflicts of interested were declared.
- 5. Minutes of the last meeting: These were agreed.

# 6. MATTERS ARISING

### • Provider Board Update

RF updated that the Provider Board are having weekly operational calls with the CCG to raise issues on Covid-19.

### MAIN BUSINESS

### • Covid Response

RD shared that it was felt that Taurus Healthcare have done an excellent job locally for practices and there is now an opportunity to continue some of this work. NF commented that, although general practice is now stable and the system is stepping

down, locally the number of cases are not rapidly lowering so this presents a risk to practices.

There is to be a meeting facilitated by Taurus Healthcare to be held on 7<sup>th</sup> May 2020 to discuss how general practices moves to the next phase.

### • Referrals to Secondary Care

NF shared that there are some cases being reported where referrals are being rejected in some specialities. The Trust is now in restoration and many specialities are now accepting referrals. RD commented that some practices are holding onto their referrals for specific specialities including radiology and this is not in line with national guidance and he is escalating this.

### • Restoration

RD asked if SP has an update on restoration nationally. SP responded that until very recently GPC had been solely focused on the Covid-19 response and only today they released a survey asking for comments on a restoration plan.

SP also commented that referrals to secondary care is a huge issue in Worcestershire and the issues of risk and those patients being lost in the system.

### **ANY OTHER BUSINESS**

### • LA enhanced services

RD shared that all CCG local enhanced services payments have been largely protected. RD was to write to the Local Authority to ask that their enhanced service payments are also protected. Following a further discussion, LMC representatives unanimously agreed that they would prefer to provide the service for implants and coils via the federation

JJ commented that she is a trainer for LARCS and if anyone wishes to be trained she would be happy to facilitate training in the new diploma for all practitioners.

RD agreed to write to this effect to the Local Authority.

### • Parkinson's Association

Cllr SB congratulated everyone on their work during the crisis. He is involved locally with the Parkinson's Association and asked if all practices would have a collection box on their reception. FN agreed to take this to the PM group.

# • Joint Working with Secondary Care

NF commented that there has been great work recently working with secondary care and we need to ensure that we continuing this and do not lose momentum.

# • Verification of Death

VG raised the issue of verification of death and that under the revised regulations anyone can verify death, however, the responsibility for certifying death rests with the GP. Verification of death is not contractual and someone cannot be forced into this and it does depend on the view of the coroner locally.

# DATE OF NEXT MEETING

**Next Meeting**: to be held on 17<sup>th</sup> June 2020