

# Précis of February meeting of Derbyshire LMC

LMC website: <http://www.derbyshirelmc.co.uk>

BMA website <http://www.bma.org.uk/>

Derbyshire LMC met on the afternoon of 4 February 2010 at Santos Higham Farm. Dr Sean King was in the Chair and the following members were present: Drs Ashcroft, Barrett, Bermingham, Dils, Early, Enoch, Evans, Gembali, Grenville, Hands, Kinsella, Livings, Love, Neofytou, Portnoy, Salisbury, Short, Tinker, Williams, Zammit-Maempel & Kate Lawrence. Jackie Pendleton was in attendance. Dr Peter Holden has extended leave of absence whilst on GPC business.

## MATTERS ARISING

**Minor Injuries Unit in Ilkeston.** Kate Lawrence had sent notes from the meeting of 10 December to Ilkeston doctors.

**Maternity Services.** Sally Baughen had replied that she had requested further details from Chesterfield Royal Hospital. In the meantime the LMC would forward names of GPs who had specific concerns in Brimington and Staveley to Sally Baughen so that she could raise issues with the hospital.

**Choose & Book.** Peter Williams said that his practice had been informed that consultants could only be named in the body of a referral and not as the addressee of the letter. Ruth Dils reported that John McDonnell had now taken on the task of liaising between primary and secondary care and it was hoped that these problems would be addressed.

**Improving Access to Psychological Therapies (IAPT).** A revised implementation plan for IAPT in Chesterfield and North East Derbyshire had been received from David Sharp. Rachel Tinker reported that GPs were still concerned that there was no referral pathway and there were unacceptably long waits for appointments. Jackie Pendleton said that there would be a further meeting next week to review the implementation plan. The LMC would ask to be kept up to date with revised plans. The IAPT services in other parts of Derbyshire (Amber Valley, Erewash and Derby City) which were provided by several different providers, were also struggling to cope with demand. Peter Short asked whether the PCTs had made an estimate of the numbers of patients who would require this service before awarding the contracts.

In High Peak & Dales doctors had not been informed when their IAPT service would start and were therefore unable to make staffing decisions. The LMC would write to the Chairman to insist that doctors were kept informed so that they could fulfil their contractual obligations to staff.

Joe Zammit-Maempel reported that the City IAPT service had sent a letter to all GPs restricting the number of patients who would be seen. Val Winn had promised to provide the LMC with feedback about a meeting with the City IAPT service providers.

## PANDEMIC FLU

Information about the closure of the National Flu Line would be sent to practices, along with the updated opening hours for antiviral collection points.

## DERBYSHIRE COUNTY PCT

(a) **Strategy for the Commissioning of Primary Care.** LMC members asked Jackie Pendleton for clarification of some issues before discussing the matter more fully in Closed Session. John Grenville said that the use of the term APMS for services other than essential and additional services was confusing because GPs associated this term with private providers. He asked whether the PCT would bear the legal costs of setting up federations. Jackie Pendleton said the aim was to give all patients access to the same level of services.

(b) **Financial update.** The recent meeting of County PCT Professional Executive Committee had been told that the PCT would be required to reduce staffing costs by 30% over the next three years,

20% in the first year. The PEC members were looking at procedures of limited clinical value (PLCV). Mark Bermingham asked whether the LMC could see the PLCV list; Jackie would check with PEC.

(c) **Report of meeting of GPOG.** John Grenville reported that the following items had been discussed by GPOG on 8 January: INRs, extended hours around bank holidays, fairer funding scheme, primary care commissioning strategy, premises, CVD LES, IAPT, and correct use of sharps bins.

### **DERBY CITY PCT**

Dr Ian Matthews and Val Winn had attended a meeting at the LMC office on 21 January. The following items had been discussed: open/closed lists, Normanton/Peartree, IAPT, needle exchange, PMS contracts, 084 numbers and DMARDs. Several practices in Derby City had expressed concerns about the DMARDs LES. County LMC members were asked to canvass their constituents' opinions about the LES. The next meeting would be held on 10 March at 9 am.

### **WINTER PRESSURES**

Derbyshire hospitals had experienced severe pressure over the past few weeks and John Grenville had taken part in several Urgent Care teleconferences. An LMC volunteer was sought to attend a meeting about winter pressures on 9 March to review the problems and discuss ways of avoiding them in the future.

### **OUT OF HOURS**

Laura Smith from County PCT was present to gather members' views about the specification for commissioning OOH services. The current DHU contract would expire in March 2011. Six of the members present worked for DHU as sessional doctors.

Members expressed satisfaction with the service and agreed that DHU had coped well in the bad weather. Members made the following suggestions: Severe Untoward Incidents should be investigated by someone outside the organisation; use should be made of the Summary Care Record especially for patients on palliative care; practices would like the Adastra message to be improved so the clinical details were easier to understand and to know whether the patient had been seen by a nurse or a doctor but did not need all the administrative details that were currently included in the long report. John Grenville had replied to a query from the Independent on Sunday; he had been supportive of the DHU service and had pointed out that DHU employed 130 doctors who were on the Derby or Derbyshire Performers List and did not engage non-UK resident sessional GPs. The LMC recorded thanks to William Jones and the GP Directors of DHU.

### **HOUSING APPLICATIONS**

Peter Williams noted that there was widespread variation and consequent unfairness in how housing authorities and doctors dealt with letters of support for housing applications. John Grenville said that there was now a large number of organisations involved with social housing and it was impossible to negotiate with all of them. Peter Short suggested that there should be a proforma on the LMC website for doctors to give to patients to ask the housing authority to clarify exactly what confirmation they required from the doctor.

### **CORRESPONDENCE**

(a) From Notts LMC – *GP Negotiator Roadshow*. LMC members noted that the roadshow would take place on 16 March, 7.30pm, at the Nottingham Belfry.

(b) From Dr P J P Holden – *Referral forms*. LMC members supported Peter Holden's objection to the large number of different referral forms. Jackie Pendleton would refer the problem to the Planned Care Group.

(c) From Royal College of Physicians – *National audit of falls and bone health in older people*. LMC members noted that the national audit would take place between September and December 2010. Practices might be contacted by local audit teams and could then decide whether they wished to participate in the study.

#### **ANY OTHER BUSINESS**

**(a) INRs.** Rachel Tinker had been asked to report on how the INR service was working within County PCT. **County GPs were asked to contact Rachel on [rachel.tinker@nhs.net](mailto:rachel.tinker@nhs.net) to report any persistent problems.**

**(b) Derbyshire Community Health Services.** In accordance with “Transforming Community Services: Enabling New Patterns of Provision” PCTs were required to find new solutions for managing community health services by 31 March. Solutions under consideration were vertical integration with the existing foundation trusts or the mental health trust. PBC consortia might also be involved. NHS Derby City was in the process of transferring the majority of the community services provided by Derby City Provider Services (DCPS) to Derby Hospitals NHS Foundation Trust (DHFT). This had been referred to the Cooperation and Competition Panel.

After a Closed Session, the Chairman closed the meeting at 5.50 pm.