

## DERBY & DERBYSHIRE LMC LTD

**Derby & Derbyshire Local Medical Committee Ltd Meeting**  
**Higham Farm Hotel, Main Road, Higham, Alfreton, Derbyshire, DE55 6EH**  
**Thursday 4<sup>th</sup> September 2014 - 13.30 to 16.30**

<b>PRESENT:</b>	Dr Kath Markus (Chair)	
	Dr John Grenville	Dr Sean King
	Dr Peter Holden	Dr Denise Glover
	Dr Jenny North	Dr Ruth Dils
	Dr Mark Wood	Dr Brian Hands
	Dr Paddy Kinsella	Dr Gail Walton
	Dr Peter Enoch	Dr Vineeta Rajeev
	Dr Andrew Jordan	Dr Pauline Love
	Dr James Betteridge	
<b>APOLOGIES:</b>	Dr Peter Williams	Dr Greg Crowley
	Dr Peter Short	Jackie Pendleton (ND CCG)
	Dr Murali Gembali	Doug Black
	Dr John Ashcroft	Derek Bray
<b>IN ATTENDANCE:</b>	Hazel Potter (Minutes)	Hannah Belcher (Area Team)
	Lisa Soultana	Graham Archer (LPC)
	James Cutler	Dr Jane Perry (Registrar)
	Nwando Umeh	Dr Claire McDonald (Registrar)

In attendance – Dr Markus welcomed Hannah Belcher (NHS England Area Team), Graham Archer (LPC) and Dr Claire McDonald, (GP Registrar) as guests.

### 14/120 APOLOGIES

Apologies were received from Dr Peter Williams, Dr John Ashcroft, Dr Peter Short, Dr Murali Gembali, Dr Greg Crowley, Derek Bray, Doug Black and Jackie Pendleton.

### 14/121 EXPENSES/ATTENDANCE REGISTER

Members were reminded to ensure that the Attendance Register was up-to-date for remuneration purposes.

### 14/122 CLOSED SESSION (MEMBERS ONLY)

An item was discussed.

## **14/123 DATE OF LMC MEETINGS IN 2015**

After discussion, it was agreed to hold the January LMC meeting on Thursday 8<sup>th</sup> January as Thursday 1<sup>st</sup> January 2015 is a bank holiday. It was also agreed to hold the April meeting on Thursday 2<sup>nd</sup> April 2015.

## **14/124 MINUTES OF PREVIOUS MEETING**

- a) The Minutes of the meeting of the 3<sup>rd</sup> July 2014 were approved and signed by the Chairman as an accurate and true record, subject to the below amendments: -
- b) **Dr Peter Holden asked that his apologies were recorded due to leave of absence due to GPC business.**

## **14/125 MATTERS ARISING**

### **14/102 AOB – EMAS TARGETS**

Dr Love spoke about a problem with EMAS emergency times relating to Ashgate hospital. Dr Grenville said that EMAS must be held to count for missing their targets and that this involves not giving them extra time when they are struggling. Dr Holden said the problem is they are not being commissioned with sufficient resource and are being manned by people on minimum wage. Often to upgrade the emergency call to a 999 call is the only way to be dealt with swiftly.

### **14/93 PRIMARY CARE SUPPORT SERVICES REVIEW**

Dr Grenville said that NHS England has reached a decision and they are going out to full procurement.

### **14/126 CWFI GP WORKFORCE REPORT EXECUTIVE SUMMARY**

Dr Grenville said that CWFI have produced an important report on the GP workforce. There is a current major crisis in the GP workforce. The CWFI figures are based on the assumption that all the training places have been filled. Therefore the actual figures are much worse than reported. Dr Holden had seen the draft paper in March and said there is a lot of political work being done at the moment. He has explained to his MP that it's the participation rate that matters and numbers of the whole time equivalents. A lot of GPs are choosing to have a gap in their careers. Also 40% of training places in Chesterfield are empty and there is a 15% reduction in funding. Many male and female GPs are choosing to work part time. Currently there are 34,000 whole time GPs nationally and we need 50,000. Dr Kinsella has noticed a steadily increasing demand on GPs. Dr Hands said that his practice are offering 7 sessions a week less. His opinion is that demand fills time and this might be a good time to stop offering increasing number of patient appointments. Dr Grenville said that Dr Ashcroft is at 10 Downing Street today and he has asked him to raise the problem of resource. A discussion followed between Dr King, Dr Jordan, Dr Betteridge, Dr Enoch, Dr Kinsella, Dr Markus, Dr Grenville and Dr Holden. It was generally agreed that the report is using historic and not current data. It does not recognise that a lot of GPs are choosing to retire early. The training will soon take 4 years and not 3 years so it will take longer to train GPs. Dr Holden did some work in February 2014 which was taken from Q research in Nottingham. He thinks that MPs and the general public are not aware of the shortfall in GP numbers. Also, as there is an election coming up it was suggested that Dr Grenville writes to the prospective participating candidates of the mainstream parties in Derbyshire to make them aware of the crisis.

**ACTION: Dr Holden has a spreadsheet which models the number of whole time equivalent GPs needed dependent on various assumptions, which he will forward to the LMC members.**

**ACTION: Dr Grenville to write to MPs and Prospective Parliamentary Candidates.**

*It was decided to discuss the following item of any other business now as it relates to the previous agenda item.*

#### **HSCIC - Graham Archer**

Graham Archer described a pilot scheme sponsored by the Area Team whereby patient level data will be made available to Pharmacists via HSCIC, in the hope that this will enable them to be more effective in relieving some of the pressure on GPs.

#### **14/127 CCGs**

- **HPV and Basket of Services**

Dr Grenville reported there was a letter in August regarding the changes to the HPV immunisation program. This is to be carried out in schools and not GP surgeries. There has only been two months' notice that the funding is being withdrawn from GPs which is insufficient. He has written to make a formal protest but has had no response. The new two doses regime is to be delivered in schools and the GPs may be asked to do catch up immunisations. Some practices are not happy that it has gone to schools. There is a significant change in funding for practices. Currently each immunisation attracts a fee of £7.65 and the new HPV immunisation program will become effective from October 2015. Hannah Belcher said she is not sure when the school service starts and she is waiting to hear from Public Health to confirm the cost and will check the communication from them when is published in September 2014. Dr Grenville noted that the money which used to sit within the basket of services has been redistributed between NHS England, CCGs and Local Authorities, Current arrangements will cease on 1<sup>st</sup> October 2014. Dr Betteridge asked if GPs will be made aware of this and they will be. Dr Grenville also said that North Derbyshire and Hardwick CCGs are currently unpicking the Basket of Services and producing a list of what may be in the new basket. He has emailed Jackie Pendleton to remind her that where the CCG Board determines that patients will be better served if a service is provided by a single defined provider, guidance states that there is no requirement to go out to competitive tender.

Dr Holden raised concerns about the anti-coagulation service as AQP would be dangerous from a prescribing point of view. He commented that the prices for services should include a profit element. Dr Markus said that if other people are monitoring INRs, GPs are at risk, as when a GP is prescribing they take responsibility for it. There is less risk involved when only one provider is monitoring and prescribing anti-coagulation drugs. Graham Archer said that Pharmacists deliver the service in the North as they were asked to by the PCT in that area. This service will be reviewed by the CCGs. The patient journey and accessing patient records can be fraught. Dr Grenville said that if a patient is prescribed anticoagulation drugs by the Pharmacist, it needs to be communicated to the GP. Dr Markus, Dr King and Dr Betteridge had a discussion about the who should take responsibility for prescribing warfarin, and who would be checking for possible interactions with other prescribed drugs, if they are being given by the Pharmacist. Graham Archer said that anticoagulation drugs are only given by trained Pharmacists.

**ACTION: Hannah Belcher to raise this issue with Doug Black.**

**ACTION: Dr Grenville to attend a NDCCG Liaison meeting with Jackie Pendleton and state that anticoagulation drugs should be in list 1. The dosage needs to be prescribed and monitored by the same body.**

## **14/128 AREA TEAM**

### **• PAG & PLDP**

Dr Grenville reminded the committee that we had previously had discussions with the Area Team regarding LMC representation on the PAG and PLDP and that agreement had been reached that the LMC would nominate GPs to these committees, and that the GPs on the PAG and PLDP would be remunerated by NHS England. This agreement had been reached subject to guidance from NHS England centrally. That guidance has now been issued and the commitment that the professional representation on the PAG and PLDP should be nominated by the Local Representative Committees has been dropped. Also the remuneration for professional representatives sitting on the PLDP is set at £50 per hour with no remuneration for members of the PAG. The committee agreed that £50 per hour was entirely inadequate for a GP with the experience, knowledge, status and confidence of his / her colleagues that would be required for this quasi-judicial post. Dr Holden suggested that the LMC should offer to match fund the remuneration for the PLDP member in order to achieve a realistic remuneration. Dr Grenville reassured the committee that NHS England was offering indemnity for members of the PAG and PLDP.

**ACTION: LMC Officers and Executive members to discuss with Area Team and Nottinghamshire LMC the best way forward following release of this guidance.**

### **• NHS Friends and Family Test – Letter to LMC Chairs**

Dr Grenville has received a letter on 8<sup>th</sup> August from Dr Eric Saunderson who is leading nationally on the Friends and Family Test and the contractual obligation which is being rolled out to all practices on 1<sup>st</sup> December 2014. Lisa Soultana attended a workshop with a handful of Practice Managers. It has not been very well publicised. Dr Grenville noted that some commercial organisations have produced packs to introduce the Friends and Family tests. One organisation “iwantgreatcare.com” is offering a package whereby LMCs sign up to enable their practices to access the “iwantgreatcare.com” pack free for the first three years. He is not sure if we should sign up although some LMCs have. We need to make a decision whether to sign up to “iwantgreatcare.com” and asked how much information they would need. Lisa Soultana asked how much they would use the data.

*POST MEETING NOTE: The LMC Buying Group are currently in discussion with software providers.*

**ACTION: Dr Grenville to have a meeting with “iwantgreatcare.com” to discuss this.**

Lisa Soultana explained there will be a lot of workload generated at practices to complete the Friends and Family tests as the slips are to be completed by patients and the data will have to be analysed monthly. Dr Jordan commented that on “iwantgreatcare.com” website, there is an entry which discusses at great length a GP consultation card which identifies the GP and the patient concerned. He also gave an example of a patient he had seen recently who had complained on the NHS Choices website but who apologised for the comments made and said he would remove the comment. Practices will be required to ask some additional questions in the Friends and Family test and it was suggested that there might be merit in all the practices is an area asking the same question.

**ACTION: All to email suggested questions to Hazel Potter or Dr Grenville.**

## 14/129 CQC

- **New Regulations**

Dr Grenville reminded the committee that the new CQC inspection regime will start on the 1<sup>st</sup> October. He and Lisa had attended a meeting on 3<sup>rd</sup> September 2014 with the CQC Regional Inspection Manager. Nwando Umeh produced a document (Nwando – On Closer Inspection), which has been emailed to all practices, the Area Team and CCGs. The feedback has been that it is clear, helpful and straight to the point. When new CQC information is available we will be providing updates via Nwando.

**ACTION: Nwando Umeh to upload this document onto the website.**

Derbyshire and Nottinghamshire LMC are designing a series of CQC update half day seminars. There are checklists in place to get ready for the new CQC inspections. GP surgeries need to make sure that action plans are done and all policies are easily located. Under the new regime from 1st October 2014, ratings and special measure will be used, similar to those used in schools now. Practices need to put as much effort in as possible to ensure they are compliant on inspection. Dr Dils asked Lisa Soultana if practices would be able to have a “dry run”. Lisa said that unfortunately due to increased workload that is not possible but we have arranged the seminars to give the information required. The CQC inspection will cover five domains, split down into population groups and will be graded in four categories. Lisa Soultana explained it is very important when speaking to an inspector that you are able to clearly describe and evidence the quality and safety of services. They will want to know that you have carried out risk assessments, and that audits are undertaken and well documented. Lisa Soultana explained that the CQC are seeking powers to prosecute dangerous providers without having to go through a prolonged warning process first. The new CQC regulations include a fit and proper persons test that places a clear duty that Directors / Board members meet certain criteria as set out in the test. You could show your partnership agreement if asked.

## 14/130 PCDC

- **GP Rep for the PCDC GP Training and Advisory Group**

Dr Wood and Dr Betteridge have already volunteered to be GP reps for the PCDC GP Advisory Group.

- **Recommendations for Derbyshire Reps on Service Improvement Advisory Group**

Subsequent expressions of interest have been received from Dr Jane Perry and Dr Jenny North.

- **Leadership Offer**

James Cutler discussed the Leadership offer. The Primary Care Development Centre (PCDC) is proud to be able to offer leadership training to clinical and non-clinical staff from practices within Derbyshire and Nottinghamshire. The PCDC aims to help general practice by devising means to increase the capacity, capability and sustainability of your current primary care workforce and also to develop yourselves as provider businesses.

The courses and training programmes being offered through the PCDC are **FREE**, and therefore there would be no cost implication to either you or your practice.

Please [Click here](#) for the Primary Care Development Centre Prospectus for 2014/15. Please [Click here](#) for the Programme Directory for 2014/15, for the training courses being offered by the East Midlands Leadership Academy through the PCDC.

If you would like to express an interest in any of the courses being offered please complete the attached form and return to [info@pcdcnottingham.co.uk](mailto:info@pcdcnottingham.co.uk).



PCDC- Expression of  
Interest Form v1-4.doc

If you have any questions or would like to discuss any of these courses in more detail please feel free to contact me on 0115 979 6911, or by email at [james.cutler@pcdcnottingham.co.uk](mailto:james.cutler@pcdcnottingham.co.uk).

Dr Holden praised the LMC, and in particular Dr Paddy Kinsella and Lisa Soultana for their work in the PCDC which raises the profile of the LMC nationally.

#### **14/131 LETB / LETC**

- **Derbyshire Workforce Development Plan 2014 – 2017 Executive Summary**

Lisa Soultana said this is still carrying on and they are going through organisational changes. There are indications LETC will contribute £10K to PCDC and Lisa will keep us updated. Dr Betteridge asked Dr Grenville if Sheona McLeod had responded to his letter and he has not received anything further.

- **Practice Nurse Project**

Lisa Soultana said the Practice Nurse project has been picked up nationally and it has been reported as a news item. The Practice Nurse project team are presenting the competency framework to the East Midlands. She asked for Nurses to use the competency framework to help them demonstrate their skills and competency for CQC.

#### **14/132 PRACTICE PREMISES**

James Cutler has been visiting practices who have experienced significant invoicing problems from NHSPS. He has been identifying a priority list in Derbyshire. He is trying to take the pressure off practices by addressing their problems. Dr Holden said there are new Premises Directions coming out soon. He has been asked to try to sort out the service charges with NHS England. The problem has arisen as PCT Finance Directors were able to ring fence money leaving a £750M hole. £750M accounts for 9% of the budget so it's not surprising there are resource problems. He said if you are with NHSPS do not pay anything until it is sorted out. It is a scandal which has been unreported and it needs to be resolved. GPs will not be thrown out of their practices.

#### **14/133 CLINICAL WASTE COLLECTION POLICY**

Dr Grenville said that Jackie Pendleton was going to speak to colleagues about this but he has heard nothing yet. The question is whether completing the form produced by the Councils falls within the collaborative arrangements.

Dr Markus asked if anyone had received letters from nursing homes regarding medication issues. Graham Archer said in Derbyshire there are 65 agencies, all with their own medication policy and it is a risky business. He said that agency staff are trying to shift their responsibilities onto pharmacies. Dr Holden reminded the committee of the existence of the Cabinet Office Regulatory Impact Office document on reducing GP workload. This is available on the LMC website on the following link: -

[Reducing GP Workload](#)

#### **14/134 INTRAVENOUS ANTIBIOTICS – MDU POSITION**

Dr Grenville reported that the MDU has confirmed that where a scheme exists for the administration of intravenous antibiotics in the community, the prescription of the antibiotics is covered by the normal GP subscription rate.

#### **14/135 OFFICE REPORTS**

No questions were raised.

#### **14/136 GPC NEWSLETTERS – JULY AND AUGUST**

Dr Holden made it clear that he is still very active and influential on the GPC where he has been a negotiator for 15 years, and he chose to step down. He still regards his responsibility is to represent the LMC and GPs in Nottinghamshire and Derbyshire.

Dr Grenville said that Chaand Nagpaul had asked for evidence of the GP workload increase and we have had a huge response from Derbyshire practices.

Dr Holden spoke about the Doctors and Dentists Review Body (DDRB). GPs had agreed to a 1% increase in line with national austerity measures but the DDRB failed to recognise the increase in GPs overheads. Therefore in real terms GPs profits have fallen. GPC is working hard to try to ensure that practice expenses are properly recognised. .

#### **14/137 NEW IMAGING APPOINTMENT CARD – CRH**

Dr Grenville said that CRH have sent a PDF document for practices to print out using their own paper and ink. He intends to talk to the CCGs about the transfer of resource from secondary to primary care. Following debate it became clear that arrangements for patients to access imaging appointments varies from practice to practice. This will be discussed with the CCGs.

#### **14/138 ANY OTHER BUSINESS**

- Dr Glover reported on a conference she had attended on 16<sup>th</sup> July 2014 at the Derbyshire Hotel, chaired by the Assistant Director of Public Health, to avoid emergency hospital admissions. It was attended by CCGs, GPs, and Provider Trusts etc. They were asked, if money was no issue, what we would want to see to avoid unplanned emergency admissions. However, money is an issue. There is to be an exercise during one week in September when all possible responses will be used to reduce admissions. Dr Kinsella said an American company did a survey recently that confirmed that 75% should be in hospital anyway. Dr Love commented that all CCGs are monitoring GP referrals.
- Next LMC meeting – Dr Hands gave his apologies and suggested a vote be taken at the next LMC meeting to decide if there should be an August LMC meeting.
- Dr Markus asked for mobile working to be added to the next LMC meeting agenda.
- *Post Meeting Note: Lisa Soultana will be attending a professional development programme for the next 5 LMC meetings and gave her apologies.*

#### **14/139 DATE OF NEXT MEETING – 2nd October 2014**

There being no further business, the meeting closed at 5.15pm.