



## Derby & Derbyshire Local Medical Committee Ltd Meeting Higham Farm Hotel, Main Road, Higham, Alfreton, Derbyshire, DE55 6EH Thursday 11 January 2018, 13:30 – 17:00

PRESENT:	Dr Peter Williams (PW) (Chair)	Dr Yadavakrishnan Pasupathi (YP)	
	Dr Susan Bayley (SB)	Dr James Betteridge-Sorby (JBS)	
	Dr Brian Hands (BH)	Dr Mark Wood (MW)	
	Dr John Ashcroft (JA)	Dr Andrew Jordan (AJ)	
	Dr Simeon Rackham (SR)	Dr Peter Enoch (PE)	
	Dr Denise Glover (DGI)	Dr Gail Walton (GW)	
	Dr Paddy Kinsella (PK)	Dr Murali Gembali (MG)	
	Dr Pauline Love (PL)	Dr Kath Markus (KM)	
	Dr Jenny North (JN)		
IN ATTENDANCE:	Clive Newman DCCGs (CN)	Lisa Soultana (LS)	
	Graham Archer (GA) (Chief Officer LPC)	Dr Heather Ryan (HR)	
	Dr Michael Wong (MW)	David Gibbs (DG)	
	Heather Simpson (HS)	Laura Grainger (LG) (Minutes)	
	Janine Miller (JM)	Marion Leister (ML)	
APOLOGIES:	Stephen Bateman (SBa)	Simon Morritt (CRH)	
	Dr Vineeta Rajeev (VR)	Dr Chris Clayton DCCGs (CC)	
	Dr Ruth Dils (RD)	Dr Greg Crowley (GC)	
	Dr John Grenville (JG)	Buk Dhadda (BD) (SDCCG)	
	Dr Peter Holden (PH)		

## 18/01 Welcome and Apologies

Apologies noted for LMC members
Dr Holden away on GPC business
Dr Crowley attending a CPRG meeting on behalf of the LMC

## 18/02 Welcome and Apologies

PW welcomed those joining the meeting in the open session.

## 18/03 Minutes from previous meeting

Minutes were approved and all outstanding actions have now been completed.

### 18/04 Matter Arising

Covered in the agenda

#### **18/05 For Information**

Members reviewed the information documents

### 18/06 For Feedback

Members reviewed the meeting feedback documents

### 18/07 For Discussion

## DDLMC office move update (March meeting)

KM advised that the DDLMC office location has now moved from Celtic House to Norman House in the same complex in Derby city centre. KM offered an open invitation for members to come and see the new space and meet the team. It was noted that the new office has a meeting room available to hire. Thanks were given to the office operations team had worked well over this period and LS for negotiating favourable terms on the lease.

## Extended access pilot

Heather Simpson and Janine Miller gave an in depth presentation to members about their Hub which offers pre-bookable appointments from 18:00 till 20:00 Monday - Saturday. HS and JM gave great insight into the benefits of running a hub and the challenges overcome with lessons learnt for the future. Members discussed the clinical needed of the hubs, funding attached and staffing requirements. It was noted that CN would like to organise a learning session for other Places within Derbyshire to learn about the pilot hub presented. Members questioned the future funding of Hubs and concerns that this could become unfunded core work. CN added that there is funding for the current duration however, could not guarantee any future monies at this stage. The presentation is to be circulated with minutes.

## STP: Joined up care for Derbyshire

KM advised that the new name for the STP was *Joined up care for Derbyshire* and the number of Places was to be reduced from 21 to 7 or 8. This would allow Joined up care Derbyshire (JUCD) to delegate monies more easily to Place and also retain and develop local engagement including GPs. It was noted that no set boundaries of Place had been confirmed yet by the CCGs although it was likely to be along the local authority/council areas.

## GP PAG

SB advised that drafted terms of reference had been created with the support of the Midlands federation network and DDLMC to discuss representation for GPs. The document (if agreed) will allow for a unified GP voice to feed into the main Provider Alliance Group which in turn feeds into JUCD. SB will share updates to members in the near future.

## CCGs updates and current topics

## Asylum centre

SB confirmed that Derby city centre was to have a 225 bed asylum centre opening incrementally in the next few weeks. The centre is to be managed by G4S and is not gated; the centre is currently unfunded with the CCGs picking up the cost of the facility. Every 3 weeks new asylum seekers will arrive to the centre. Two nearby practices have been awarded the contract for care for the asylum seekers which should minimise additional workload for neighbouring practices and Derby hospital. SB advised that she has requested that the CCGs send further communications to surrounding practices regarding the Asylum centre and also instruction leaflets for any asylum seekers on where they can receive medical help in multiple languages. PW raised that the original communication sent to practices by the CCG advised that the centre was funded. CN noted that the CCGs hope to be compensated by the government.

#### Electronic referral system (e-RS)

SB advised that an information update had been sent to all practices regarding the e-RS. It was noted that it was unclear of who held the risk is a paper referral was rejected. SB confirmed that hospitals are still accepting paper referrals however, e-RS was preferred. From October 2018 paper referrals will no longer be accept. KM requested for members to share examples of referrals being rejected so these can be shared with the hospitals to improve the process and make ERs better for all involved.

#### Workforce (multiple meetings)

KM advised that currently there are multiple workforces meetings (as many as 5) of which have similar attendees and all have no clear direction or outcomes. Roles such as ACPs appear to be the main focus for many of these meetings with little attention to the workforce issues for GPs. CN advised that the CCGs plan to streamline these meetings, ideally with one focusing on GPs. Members discussed shortages of GPs within Derbyshire and the pressures placed on Practices and the CCGs to fill vacant posts with an ever growing population.

**Action:** CN to present a list of workforce meetings held within Derbyshire identifying their purpose and outputs.

#### NHSE 8-8

Covered in Extended access pilot.

## IT (process)

DG advised that practices have been flagging issues to the LMC regarding differences in service by their new IT contact provider (NECS) from the previous contract holder (Arden and Gem). DG noted that NECS are more business orientated whereas Arden and Gem who had been providing services to practices that were not strictly in their agreed contract. CN confirmed that discrepancies have come to light between the

contracts and encouraged members to alert IT with issues they were experiencing. Members discussed the IT challenges they face daily (RAM, slow operating systems, small display screen and no laptops to access patient records when doing a home visit). Members advised CN that they would like to see a written IT policy including what a standard set-up for a GP should be. It was noted that there is funding to improve the entire IT network and equipment would form part of this. CN welcomed any members to input on the current IT plans for the future.

Action: CN to set-up a process for practice to flag issues to the CCGs.

## Influenza treatment and prophylaxis update

SB confirmed that she will be sending out a position statement to practices in due course however, clarified that treatment of those with acute influenza symptoms was part of the core contract, prophylaxis is not. The CCGs are developing a protocol for prophylaxis which has become more urgent now that flu season is upon us. SB encouraged all members to share this with their constituents.

### Joint Prescribing Area Committee (JPAC) consultation (self-care and gluten free)

KM advised that the prescribing policy for self-care and gluten free medication/items has been updated and encouraged all members to support this. KM noted that insistent patients can still request to be prescribed gluten free medication as items have not been blacklisted. The new policy does not quantify the amount that should be prescribed therefore; savings could be made by prescribing less.

Members requested an updated on the decommissioning of the MAR sheets. GA advised that conversations were being had with the CCGs and to date was 'on hold'. It was noted that a pilot of pharmacists covering Derbyshire and Nottingham will offer services to support patients with eye, nose and throat concerns and will refer the patient to a GP if needed.

## Diagnostics of Limited Clinical Value (DLCV)

KM advised that the LMC had been invited to a joint meeting between primary and secondary care to review this. Members discussed the positives and negatives of being able to select all tests and knowing and understanding the costs associated with requesting for tests. KM advised that she would feedback updates to members in due course.

### Coroners and Confirmation of Death

PW presented PL feedback from her meeting with the coroners and advised members that although confirming deaths is not a GP contract requirement it was agreed if needed that GPs could confirm death for 'Expected Deaths' only, unexplained deaths will be done by the police and unexplained deaths will be attended by EMAS. The feedback document concluded that the disparity over the east midlands needs to be streamlined as Derbyshire operates differently from other areas. All relevant bodies are to review their process and the coroner will be raising this issue nationally.

### Now Patient

SB asked members if they had heard of Now Patient, she advised that it is a company that contacts practices, targeting practice managers offering support with websites (bookable appointments). They claim to be NHS Digital approved with a CQC rating. Members discussed the increase in website services such as this one and that clinical systems are not set-up to receive updates of what has been prescribed and purchased online. SB requested for members to share any issues they face with online services such as this one and neighbourhood direct.

## 18/08 Closed Session (members only)

#### 18/09 AOB

JA requested an update regarding dressings in practice. PW advised that Marie Scouse and Hannah Belcher CCGs where working on a specification and would share with the LMC once drafted.

SB requested for members to invite GP trainees to come along and meet the LMC with a view to joining.

#### 18/10 Date of next meeting

## • DDLMC Senior Team Meeting

Thursday 1 February 2018, 13:00 – 16:00, DDLMC Office, Heritage Gate, Norman House, Ground Floor Derby DE1 1NU

## • LMC Executives and Senior Management Meeting

Thursday 1 February 2018, 16:00 – 17:00, DDLMC Office, Heritage Gate, Norman House, Ground Floor Derby DE1 1NU

## **LMC Meeting**

Thursday 1 March 2018, 13:00 – 17:00, DDLMC Office, Heritage Gate, Norman House, Ground Floor Derby DE1 1NU

Meeting closed at 16:40





# **LMC Meeting Action Log**

	Date	Agreed action	Resp	Update
24	02/11/2017	Liaise with local LMCs and take a unified action on reporting deaths in the community with EMAS/Coroner/Police. SB to invite Dr Hunter to a LMC meeting discus reporting deaths in the community in more detail	SB	Completed – PL to attend a meeting with Dr Hunter 16.11.17
25	02/11/2017	Meeting with CCGs, Steve Hulme and LPC to discuss pharmacy concerns in Derbyshire CCGs/		Completed
26	02/11/2017	Email CN all collated commissioning gaps advised by members to be reviewed by CCGs and actioned accordingly with a view to end with a position of agreement.	PW	Completed
27	02/11/2017	Position statement to practices regarding winter pressures, BD to have sight of the communication before it is sent.	SB/DG	Completed
28	02/11/2017	Review and consolidate process for reporting a significant event and update the LMC of progress.	CCGs/CN leading	Completed

