
DERBY & DERBYSHIRE LMC LTD

Derby & Derbyshire Local Medical Committee Ltd Meeting
Higham Farm Hotel, Main Road, Higham, Alfreton, Derbyshire, DE55 6EH
Thursday 7 July 2016 – 13:30 to 17:00

PRESENT:	Dr Peter Williams (PW) (Chair)	
	Dr John Grenville (JG)	Dr Susan Bayley (SB)
	Dr Sean King (SK)	Dr Andrew Jordan (AJ)
	Dr John Ashcroft (JA)	Dr Murali Gembali (MG)
	Dr Ruth Dils (RD)	Dr James Betteridge (JB)
	Dr Brian Hands (BH)	Dr Mark Wood (MW)
	Dr Jenny North (JN)	Dr Greg Crowley (GC)
	Dr Paddy Kinsella (PK)	Dr Peter Holden (PH)
	Dr Pauline Love (PL)	Dr Denise Glover (DG)
	Dr Jane Perry (JP) (Registrar)	
IN ATTENDANCE:	Samantha Yates (SY) (Minutes)	Melanie Foster Green (MFG)
	Graham Archer (Chief Officer - LPC) (GA)	Jayne Stringfellow (JS) (NDCCG)
	Stephen Bateman (SB)	David Gibbs (DG)
APOLOGIES:	Dr Peter Enoch (PE)	Lisa Soultana (LS)
	Dr Vineeta Rajeev (VR)	Andy Gregory (AG)
	Helen Cawthorne (HC)	Dr Gail Walton (GW)
	Gary Thompson (GT)	Dr Kath Markus (KM)
	Dr Peter Short (PS)	Dr Clare Shell (CS)
	Rakesh Marwaha (RK)	

16/58 Welcome and Apologies

Welcome to Stephen Sorby, Clinical Quality and Patient Safety Manager for Southern Derbyshire CCG. Stephen Bateman, Chief Executive Officer, Derbyshire Health United.

Welcome to David Gibbs appointed in April as Head of Business Support for the LMC.

New agenda and meeting format introduced.

16/59 Minutes from previous meeting

Dr Greg Crowley details missing from LMC Meeting attendance list.

Action: SY to update.

16/60 Matters Arising

Building works to a residential home next to Whitworth Hospital, which is believed to be for step up/forward from hospital admission have now been completed; it has been noted that visitors have begun to enter the site. PH raised concerns that a funded contract for General Practice support for the home has not yet been confirmed. JS informed members that the home is a Social Care funded home and therefore is unable to provide feedback at this time to what arrangements are currently in negotiation.

PH expressed concerns that interim arrangements have not been put in place for any call outs that require medical support.

16/61 For Information

Documents circulated for information to members before meeting.

PL confirmed that a teleconference will be taking place with JG and LS to discuss the SWG report suggested improvements regarding End of Life Education. It is recognised that there are standards within the report that are not reasonable or possible such as performance management. PL confirmed that the education sessions are not funded, do not have admin support and often take much longer than the allocated 6 hours session.

JB confirmed that LWAB has now replaced LETC, and stated that mapping of End of Life education will be discussed further with that agenda.

16/62 For Feedback

- **Southern Derbyshire Primary Care Panel**

JG and SK provided brief overview of Primary Care Panel

- **Southern Derbyshire Primary Medical Care Commissioning Committee**

JG expressed concerns regarding the prescribing performance indicators that have been enhanced without allocation of funding to reach the new targets. JG noted that the SDCCG Medicines Management team had explicitly stated that they had taken decisions about GP prescribing without involving GPs in the discussions. This seemed to align with SDCCG's approach to conflicts of interest in Primary Care commissioning which, in contrast to the approach of the other three Derbyshire CCGs, is to exclude GPs from decision making entirely, regarding them as advisory voices only, rather than recognising that conflicts of interest must necessarily arise in membership organisations and that they should be managed appropriately.

HK suggested that the member practices and the LMC should monitor the CCG's decisions closely and make it clear when they feel that decisions have been made without adequate GP input. It is recognised that the degree of GP input that is appropriate will vary from issue to issue.

- **Annual Conference**

This year's conference had a new format whereby motions were arranged into themes, allowing for people to discuss a theme instead of many individual motions. There has been both positive and negative feedback for the new format, as delegates are unsure as to how the voting will translate over to policy creation and updating.

Action: LMC Members to be kept up to date with information as received.

Members discussed recent EU referendum results in regards to possible effects on Healthcare. It was agreed by all that until workload issues are addressed the situation will not change. It was acknowledged that the NHS workforce relies heavily on EU and non-EU foreign nationals.

Action: PH to re-distribute Whole Time Equivalent spreadsheet to members.

Members discussed the concept of industrial action in the commissioner/ provider system. SK observed that there are other options of protest that do not affect the care of patients and gave example of a public transport company who refused to take fares.

Action: Members to submit ideas for further discussion.

JA highlighted that there has been a promise of a funding increase, but currently there is no evidence of where the funding is allocated to or when it will arrive. Further discussion took place as to how monies need to be directed to workforce in order to obtain the transformational change objectives placed upon healthcare.

- **DIDB – Immunisations**

DG provided feedback regarding the identified issues of access to information held by general practice and also the updating of general practice with details pertaining to completed immunisations. The TPP system should not have an access issue, however EMIS may cause difficulty. David Hill, Arden Gem, has confirmed with the office that a team member has been identified to complete an initial mapping exercise.

The figures for flu vaccinations for year 2015/16 have been released, showing a small decrease of uptake in all demographics bar maternity. Discussion took place to identify possible reasons for decrease, including:

- Media coverage of this year's vaccine "not working as well"
- General Practice seen as too busy
- Minimal uptake of pharmacy service

- **Firearms Licencing Arrangements**

Updated information was included in the June Newsletter. Template letters have been developed for practices to use when responding to police requests for information. JG reminded attendees that if the form/letter is not responded to at all there is automatic assumption that the licence can be granted. Responsibility for the issue of a licence ultimately lies with the Chief Constable of the local police force.

PH provided feedback from the BMA update released today (7 July 2016). PH confirmed that it is recognised that the agreed approach to firearms licencing is not suitable and that the faults in the system need to be reported back to the Home Office. PH feels that further local consideration should include writing to the Coroner to highlight the issues.

- **Physician's Assistant**

JB reported that Swadlincote Surgery has recruited a Physician's Assistant (PA). After many months of unsuccessful advertising for a GP it was felt that a different workforce approach was needed in order to meet clinical and medical needs of the practice and its patients. The role comes with its own indemnity insurance and PAs can complete and perform a range of clinical and medical roles. PAs are unable to sign prescriptions and a GP's signature will be required. It was noted that there is currently no Regulatory body for PAs and members were clear that if the profession were to be expanded such a body would be required. Members discussed at length impact on practice insurance requirements. JB noted that many of the issues had been considered by the Recruitment and Human Resources lead at Swadlincote Surgery.

Action: Members to submit questions and queries regarding Physician's Assistant role to the office for the creation of a FAQ's, to be circulated with documents for the next LMC Meeting.

16/63 For Discussion

- **Sustainability and Transformation Plan (STP)**

JG provided an overview of the STP, which is the next re-organisation of Health and Social Care Services. It has no statutory basis. A large amount of work has already been undertaken by CCGs without involvement from relevant GP bodies. It is recognised that CCGs can give insight into primary care and general practice; however this is from a commissioning perspective. JG has written to those leading the STP in Derbyshire to advocate the need for representation from general practice as providers.

The initial plans subdivide Derbyshire (including the city) into 20 different "places", which will then become their own healthcare commissioning and providing areas. Meetings have taken place to look at models of working. Meetings have included analysis of the Erewash Vanguard site as they already operating under a similar remit.

Initial deadlines set by NHS England included the submission of the plan by 30 June, however this has now become a "checkpoint" and a longer period of submission and review has been mapped out.

JG will continue to press Gary Thompson of Southern Derbyshire CCG and STP lead for Derbyshire, to discuss LMC participation in the STP meetings from this point forward.

Action: Members to submit questions regarding the STP for Gary Thompson.

Action: Gary Thompson to be invited to submit overview of STP for information for Members.

Action: Information on STP not deemed as confidential, to be circulated to members.

- **Opticians and Hearing Tests**

JP stated that local Opticians are offering hearing tests to patients, which include the recommendation of making a GP appointment for a referral to hearing services. Members noted that although this can be seen as an increase in workload, it is a good service as patients often do not choose to have hearing tests. Further discussion took place identifying that if providers of audiometry services were to be enabled to make referrals directly to hearing services, this would reduce the workload of General Practice.

EMAS - CPR Forms

PL confirmed that London Ambulance Service are currently circulating the forms to their paramedics, however the roll out nationally has not been confirmed. PH confirmed that there had been a new update from the Resuscitation Council detailing the requirement for Ambulance services to be made aware of patient wishes.

Action: LMC to write a letter to EMAS to confirm if they will be circulating CPR forms.

Further discussion took place regarding the importance of people completing an Advanced Directive.

16/64 Any Other Business

- **Dr John Grenville, Retirement**

JG was recognised throughout the meeting for his success, inspiration and encyclopaedic knowledge of everything general practice. It is with sadness but great respect that JG will be retiring on 29 July.

PW proposed the co-option of JG; this was seconded by BH and further approved by the committee.

- **Dr Jane Perry**

JP has completed training and will be taking a job in Leicestershire. JP thanked the meeting attendees for their support and requested to step down from the committee. Members thanked JP for her time with the committee.

- **Dr Peter Short**

PS has taken an additional role with the HCSIS and has informed the LMC that he will be unable to attend over the next year period. Committee agreed for an extended leave of absence.

- **Cremation Forms – Physical Examination of the Deceased**

JB raised the long-standing concern of how to proceed if a body that is for cremation has been removed a significant distance from the practice of the GP who attended the deceased in his/her last illness before the GP has had an opportunity to examine it. JG reminded the Committee that talks have been held in the past with the National Association of Funeral Directors but that in the final resort it boils down to the lengths to which the Funeral Director and the GP are prepared to go to assist the bereaved family.

- **Care Record Summaries**

PL provided an overview of the “Care Record Summary” system. Access to the system is slow in some areas and different computer “set-ups” show the programme in an incomprehensible format. There are also issues when updating information into the system, which has resulted in email swapping for GPs to update information onto the system and possible duplication of entries.

- **MIG**

PW provided an update on the MIG information sharing system. Social care currently does not have access, and their records are not viewable. This is being developed. The system is live in Erewash. PL confirmed that Arden Gem are offering one to one training sessions with practices regarding the new patient records viewing systems.

16/65 Date of next meeting

Thursday 1 September 2016, 13:30 – 17:00, Santos Higham Farm Hotel.

Meeting closed at 16:55

LMC Meeting Action Log

Date	Agreed action	Resp	Update
03/03/16	Members interested in developing a possible premises funding solution to contact the office.	All	
03/03/16	Letter to be sent to RCGP asking for a finite resolution as to what is a safe workload for a GP during a day and working week.	Execs	
03/03/16	LMC Members to identify reasons they entered into the profession and what will make them stay, to be fed back in the next LMC meeting.	All	
03/03/16	Letter to Hardwick CCG regarding Ambulance waiting time choices.	Execs	
03/03/16	Letter to be sent to Midwifery department in acute trusts to ask for clarification of the systems to be put in place, this system to then be implemented across all practices to ensure that the same service is provided.	Execs	
03/03/16	PW to address DCHS access to child immunisation and vaccination information through IT systems in the next DIDB meeting.	PW	Completed
03/03/16	Practices to write letter to CCG detailing issues regarding referrals and investigation as CCG have processes in place.	Members	
05/05/16	JA, GA and JG to raise concerns regarding current smoking cessation contracts in meeting with Council, DCHS and PHE. Feedback to be provided as appropriate.	JA/GA/JG	Completed
05/05/16	LMC Members to be copied into PCSE emails sent to practices to ensure they can support their constituents.	Office	Completed and on-going as appropriate
05/05/16	Minor Injuries meeting feedback as appropriate	Members	Completed and on-going as appropriate.
05/05/16	LMC members are to encourage constituents to return MIG SIA documents. All questions to be directed to the LMC Office who will forward onto relevant contacts.	Members	
07/07/16	LMC Members to be kept up to date with conference and policy information as received.	Office	Completed and on-going as appropriate
07/07/16	Whole time equivalent calculator spreadsheet to be re-distributed to members.	PH	
07/07/16	Members to submit ideas for demonstrating their concerns other than “Industrial Action”.	Members	
07/07/16	Members to submit questions regarding Physician’s Assistant Role at Swadlincote. Questions will then be submitted for detail.	Members	
07/07/16	Members to submit questions and queries regarding Physician’s Assistant role to the office for the creation of a FAQ’s, to be circulated with documents for the next LMC Meeting.	Members	
07/07/16	Members to submit questions regarding the STP for Gary Thompson.		
07/07/16	Gary Thompson to be invited to submit overview of STP for information for Members.		
07/07/16	Information on STP not deemed as confidential, to be circulated to members.		
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