

CALDERDALE LOCAL MEDICAL COMMITTEE

Minutes of the Meeting of the Calderdale Local Medical Committee
held on Wednesday 21st March 2018

Present <u>LMC Members</u> Dr S Nagpaul (Chair) Dr R Loh Dr N Taylor (Co-opted Member) Dr A Siddiqui Dr F Chaudhry Dr M Azeb (Co-opted Member) Dr S Chambers Dr P Kumar Dr S Vivekananthan Dr B Wyatt <u>Sessional GP</u> Dr R Hussain	Spring Hall Queen's Road Hebden Bridge Keighley Road King Cross Southowram Church Lane Plane Trees Todmorden Sessional Sessional GP	(SN) (RL) (NT) (AS) (FC) (MA) (SC) (PK) (SV) (BW) (RH)	<u>CCG</u> Dr A Brook <u>Practice Managers</u> Kirsty Freeman <u>Administrator</u> Tracy Worrall <u>Observers/Guests</u> Caron Walker	Longroyd Caritas Spring Hall CMBC	(AB) (KF) (TW) (KW)
					<u>ACTION</u>
270/18	<u>WELCOME</u> Members welcomed Caron Walker SN congratulated MA on being appointed vice chair of Calderdale CCG. Conflicts of interests were noted regarding this appointment and also the appointment of Dr Steven Cleasby as Chair of Calderdale CCG as in the same GP partnership as SN				
271/18	<u>APOLOGIES</u> Apologies were received from Dr G Chandrasekaran, Helen Barker				
	MINUTES OF THE LAST MEETING				

	<p>Minutes of meeting 21/2/2018 corrected and agreed</p> <p>261/18 Update on core hours MA explained they had received communications from YORLMC which agreed the same core hours as Calderdale LMC</p> <p>265/18 Collaborative fees for mental health RL will forward the correct claim form which needs sending to Broad Lea House Huddersfield. RL to forward to practice managers and RH to put on website.</p>	<p>MA to forward communication to SN</p> <p>RL/ Website</p>
	<u>Public Health</u>	
272/18	<p><u>178/18:E Coli surveillance</u> CW has been informed that there is a template on EMIS and SYSTM1 which self populates the information required and will then just need to be sent by secure email. There were concerns raised that the template would not be able to extract all of the information required. It was agreed that practices should trial and inform CW if there are any issues</p>	Website
	<u>AGENDA</u>	
	<u>CCG</u>	
273/18	<p><u>Primary Care Home In Calderdale CCG and Prescribing Gain Share 50/50 scheme</u> MA advised the meeting that Primary Care Home had been discussed at the Clinical Commissioning Team event this afternoon and had been agreed in principle for the CCG to put the plan through clinical governance at the CCG. Gain share 50/50 scheme: This is a 3 year programme. The plan is for practices to work in localities to work on reducing their prescribing costs and the savings made will be split 50/50 between the locality to improve patient care and the CCG QUIPP. The LMC was to be involved in the discussions of this scheme.</p>	
274/18	<p><u>Walk in my shoes</u> SN met with Ruth Buchan re surgeries and pharmacies spending time learning how each other works. The idea is for someone involved in the prescription process at your practice to spend time with the pharmacist to get an idea of how it works from their perspective; It could just be for a few hours. BW this would be good for appraisals</p>	CCG and Ruth to distribute information
275/18	<p><u>Primary Care Assurance</u> MA explained that primary care performance have been asked to bring information on primary care to the public meeting. There will be numerous figures that will be collected and discussed. All of the information collected is already available for FOI. The goal of this is to identify where funding is needed and where practices need help and not to name</p>	BW

276/18	<p>and shame. This is not about publishing this information but is about it being discussed at a public meeting. Concerns were raised that the parameters chosen were not evidence based and BW agreed to help the CCG to agree which data is collected</p> <p><u>Gluten Free Prescribing</u></p> <p>The CCG would like to propose that Calderdale stop prescribing all gluten free products on the basis that there are gluten free products available at a reasonable price. This has been taken to a public consultation and the public have agreed the policy The Department of Health have recently done a consultation on this and have advised that only flour and basic bread products should be prescribed. This was discussed at length and it was agreed that the LMC would be happy to support the CCG policy, but would remind practices that they are contractually obliged to prescribe if they feel there are exceptional circumstances. However, the CCG will support any GP in implementing this policy and if a complaint was to arise from not prescribing this product the CCG would support the practices in their decision. The CCG confirmed CHFT have also been advised to give this standardised advice to patients.</p>	<p>RL to respond formally to CCG</p> <p>SN to discuss at CHFT/LMC liaison</p>
	<u>PRACTICE MANAGERS</u>	
277/18	<p><u>GDPR training event 28th March CHFT learning and developments centre.</u></p> <p>SN explained that at the training session she was hoping to discuss with the GPs the best way to communicate with the GPs and also to discuss hard to reach practice managers at the meeting.</p>	
278/18	<p><u>Practice manager Development Funding</u></p> <p>The LMC was given money for coaching and mentoring £1800, "appraisals", and networking £1292. The appraisal money will be kept separate. It was noted that the "appraisal" a developmental session rather than a formal appraisal. The CCG was also given approximately £3500 to engage hard to reach practice managers. The LMC and CCG have agreed to put the mentoring money together (approx. £5000) and have NHSE agreement to provide joint coaching and mentoring across Calderdale. Calderdale MBC has agreed to work with us to put on some form of coaching and mentoring for all of Calderdale practice managers within this budget. The information gained from the development appraisal will be used to inform the programme. The money for the appraisal will only cover 12 PM's, SN asked if the LMC could use the networking money to increase this amount to cover approximately 16 PM's</p>	

279/18	<p><u>Text Over Usage</u> SN wanted clarification over how the overpayment would be split amongst practices for any over usage for 2018/19. It was agreed as EE have advised that they are able to drill usage down to individual practice level and will send out running data that that is how it should be charged.</p>	SN to discuss at CCG/LMC exec
280/18	<p><u>Primary care workforce conferences</u> Meetings to be held in Leeds 25/4/2018 and 6/6/2018. BW agreed to attend.</p>	BW
	<u>CORRESPONDENCE</u>	
281/18	<p><u>School sick notes</u> GPs are being asked to do sick notes for schools. It was agreed that RL should send a letter to the local authority advising that it is not appropriate and is not part of GP responsibility. RL will also include that it is not appropriate to do prescription for paracetamol just so the school have the name on a label. Also to mention that referrals to CAMHS should be done by the school not pass back to the GP to do. Template letter to be placed on the website</p>	<p>RL letter to Council and template letter</p> <p>RH website</p>
282/18	<p><u>Ear Irrigation</u> SN received a holding email from the CCG today re this issue and whether it will be included on the treatment LES</p>	NT to discuss with CCG
283/18	<p><u>Dr Brook retirement</u> SC wished AB well in his retirement. He said that he appreciated the values which he had brought to the LMC and his leadership. AB thanked the meeting and he urged practices not just to complain but to make a constructive suggestion on how things could be better, and for GPs to think about what things are best done by GP's and to keep this in primary care in order to make general practice strong and valued</p>	
284/18	<p><u>DATE OF NEXT MEETING</u> Date of Next Meeting Wednesday 11th April 2018 - Learning & Development Centre, Calderdale Royal Hospital, 7.45 pm medium training room</p>	

Calderdale Local Medical Committee Meeting on Wednesday 21st March 2018

Action Sheet

Item	Agenda Item	Action Required	Lead	Status	Comments/Completion Date
232/18	CHFT update	Of the flu admissions, how many patients had been immunised?	(HB)	Ongoing	
233/18	Delayed discharges	Clarification needed re payment for practices Figures to be send to SN per practice SC to pass details of the delayed results he has received by fax CHFT working with LMC PM to improve quality of letters	(HB) (MG) SC/HB/CHFT DK	Ongoing	
238/18	Pink forms	DN's to be able to use the original prescription in order to dispense, CHFT are picking up any requests where practices do not wish to complete the MAR chart	(HB) CHFT	Ongoing	
245/18	Website update	AS to forward useful Arden's templates to RH for the website	AS	ongoing	
257/18	Practices not receiving third party smear results	SN to forward emails to CW who will discuss with the screening teams	SN/CW	Ongoing	
261/18	Update on core hours	MA to forward communication to SN	MA/SN	New	

265/18	Collaborative fees for mental health	RL to forward claim form to practice managers RH to put on website	RL RH/ Website	New	
272/18178/18	E Coli surveillance	RH to put on website	RH Website	New	
274/18	Walk in my shoes	CCG and Ruth to distribute information	CCG An Ruth	New	
275/18	Primary Care Assurance	BW to meet with Debbie Robinson to help develop what information is collected	BW	New	
276/18	Gluten Free Prescribing	RL to respond formally to CCG SN to discuss at CHFT/LMC liaison	RL SN	New	
279/18	Text Over Usage	SN to discuss at CCG/LMC exec	SN	New	
280/18	Primary care workforce meetings	TW to forward details to BW so that he can attend	TW/ BW	New	TW-Done
281/18	Correspondence	RL to send letter to local authority and all schools RH to add to the website	RL RH /Website	New	
282/18	Ear irrigation	NT to discuss with CCG	NT	New	