CALDERDALE LOCAL MEDICAL COMMITTEE

Minutes of the Meeting of the Calderdale Local Medical Committee held on Wednesday 13/3/19

Present						
LMC Mem	<u>nbers</u>			Practice Managers		
		Spring Hall	(SN)	Tracy Worrall	Spring Hall	(TW)
Dr R Loh		Rosegarth	(RL)			
Dr D Kuma	ar	Plane Trees	(DK)	<u>Liaison Officer</u>		
	ıdrasekaran	Plane Trees	(GC)	Marcus Beacham	LMC	(MB)
Dr N Taylor Sessional GP		Station Rd	(AC)			
·		Hebden Bridge	(NT)	Observers/Guests		
				Dr S Ganeshamoothy	Rastrick	(SG)
				Dr S Kahn	Church Lane	(SK)
Dr M Mensah		Keighley Road	(MM)	Anna Basford	CHFT	(AB)
				Caron Walker	Public Health	(CW)
						ACTION
	WELCOME and APO					
29/19	Apologies were received from MA, BW, HB, AC, TL, RH					
30/19	Ardens/QMaster Presentation					
	Overview of the new Ardens system was presented by Sue Richardson (CCG) supported by NT.					
	The CCG will be delaying the roll out until June and will be arranging training for all prior to this, however it will be					
	available from April if practices want to switch it on and work through the online training prior to roll out. This is being					
	funded by the CCG to assist GPs to ensure that the referrals for the 17 mandated limited clinical effectiveness					
	procedures are completed correctly following nationally set criteria. GPs will need to be shown how to correctly use the					
	templates as they will need to input data onto the records through templates which will then enable the system to pull					
	the correctly coded information through to the referral forms. There will be an aid memoir for practices to use until go					
	live. Further discussions to be held with CHFT in regard to existing referrals and time frames for the new process to be fully implemented. To ensure discussion continues to be on the Agenda for the next LMC/CHFT liaison meeting.					
	rully implemented.	to ensure discussion continues	s to be on the Ag	genua for the next LIVIC/CHFT	naison meeting.	

	Apex/Insight Demonstration	
	Demonstration of both connected systems provided by representatives of the companies showing the connectivity	
	between workload planning and workforce development.	
	Previous concerns expressed by the LMC regarding data security and potential breach during the daily upload	
	procedure remain in place. The options discussed at the last committee meeting were communicated to the CCG and	
	the LMC are awaiting a response to the clarifications sought. Practices can choose to turn this on prior if they are happy	
	to take on the risk at practice level but the LMC continue to advise strongly that EMIS practices are ok to go, SystmOne	
	practices should not move forward until the appropriate assurance is received unless they have a gateway terminal in	
	place operating Windows 10.	
22/10	MINUTES OF THE LAST MEETING	
32/19	Agreed and signed off as correct	
33/19	Action Log Update	
00, 20	As per attached Action Log	
34/19	Matters Arising	
	6/19 – Clarification of response sent by the Sexual Health Service to be confirmed by GC with CHFT. To be discussed	GC
	with Public Health at a future CCG/LMC Exec meeting.	
	12/19 – Syrian Refugees, Awaiting response from CCG. Meeting to be held next week.	
	28/19 – RL to send correspondence and to include the need for a patient leaflet for all patients clarifying the process.	RL
	AGENDA	
35/19	Practice Managers	
	Issue raised over notification of death by Coroner to General Practice. Incorrect procedures are being followed and	
	there is an inaccuracy of information.	
	AB asked that any notifications from CHFT that are incorrect be sent directly to her. Any other examples to be sent to	
	RL who will be corresponding with the Coroners Office on this matter.	RL
	Issue raised regarding the requests for reports from CAB being made with a specific request for these to be free of	
	charge. LMC advice continue is to not accept this as a free service as this was agreed with CAB 3 years ago to be	
	charged at £30 and the LMC stance remains the same.	
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36/19	CHFT AB presented a draft document discussing proposed changes to the gastroenterology clinic assessment service. (SN expressed a conflict of interest on this item). A discussion concerning the change was discussed with a clear hope from CHFT that it will improve the treatment pathway for the patients referred into the service.	
37/19	Public Health No specific update for this meeting but the Social Prescriber role within the new Network DES was discussed with a view that clarification was provided in terms of the role funded by NHSe is to be seen as additional to any existing provision. CW confirmed that Staying Well had been funded by them for the next year and they are happy to work with the Networks to build on the social prescribing role.	
38/19	Follow Up to the Contract Walk Through Event A paper detailing the feedback and comments from the event was distributed. This should an overall positive response from attendees to the event. Discussion was held over the immediate processes required at locality level for network registration, this included the process for appointing the required Clinical Director for each network. Following discussion SN confirmed a clear view from the LMC on some matters, including: • The role of Clinical Director needs to be seen as an opportunity to develop leadership across the district. That individuals not currently in leadership roles should not feel they are not suitable for considering the post and this should be seen as an opportunity to develop succession planning. • The decision in terms of who the Clinical Director for a network is to be can only be a network decision. The LMC continues to offer its support in any election and selection process that may be required to ensure transparency and fairness of process. The LMC are also asking for localities to agree to invite LMC representation at both network hub meetings and local management meetings where these key decisions are being considered. To continue the support to localities from the LMC there will be a regular update sent by the LMC to all Practice Leads and Practice Managers that will include an outline of the support being offered and a 'Frequently Asked Questions' paper that will act as clarification.	МВ
39/19	Firearms Licensing The BMA have recently published new guidance and template letters for all GP's. These will be made available on the LMC website.	МВ

40/19	LMC AGM It was noted positively that nominations received indicated the agreed expansion to 12 members is filled without need for elections.	
41/19	Correspondence	
	Notification of death by Coroner discussed under item 35/19	
42/19	AOB	
	None recorded	
	DATE OF NEXT MEETING	
	Date of Next Meeting Wednesday 10 th April 2019 Learning & Development Centre, Calderdale Royal	
	Hospital, 7.45 pm	

Calderdale Local Medical Committee Meeting on Wednesday 13th March 2019

Action Log

Item	Agenda Item	Action Required	Lead	Status	Completion Date
441/18	Locala /S1 data sharing agreement	Further work to finalise agreement to be completed with CCG IG Lead	RL/DK	Ongoing	
469/18	MSK referral	NT to look into any changes to the pathway or referral form	NT	Ongoing	
6/19	Public Health – Sexual Health Services	Further discussion to be held between GC and AB at CHFT to agree final process and liaise with CW as Commissioners.	GC	Ongoing	
12/19	Correspondence – Syrian Refugees Request for additional funding from CCG by Plane Trees Practice.	No response yet received from CCG. To be followed up	DK	Ongoing	
24/19	YAS Key Concerns	Awaiting response from YORLMC clarifying any response from YAS following correspondence	МВ	Ongoing	

28/19	Private Consultations and Prescriptions Issue	Letter to be sent to the private providers to also include patient information leaflet	RL	Ongoing	
36/19	Possibility of a meeting between lead clinicians at CHFT and from Primary Care to look at new pathway developments and plan a way forward.	CHFT and CCG to arrange	NT/AB	New	
35/19	Notification of Death by the Coroner to General Practice	Correspondence from LMC to clarify procedure and importance of this being completed.	RL	New	
38/19	New GP Contract LMC Event	Frequently Asked Questions log to be developed and circulated including posting on web-site	МВ	New	
38/19	New GP Contract LMC Event	Communication to all Practice Leads and PM's to clarify LMC position and support option on the process for PCN Clinical Directors	МВ	New	
39/19	Firearms Licencing	New BMA Templates to be made available on the web-site	MB	New	