## CALDERDALE LOCAL MEDICAL COMMITTEE

## Minutes of the Meeting of the Calderdale Local Medical Committee held on Wednesday 10/4/19

Present							
LMC Members				Practice Managers			
Dr S Nagpau	ıl (Chair)	Spring Hall	(SN)	Bev McClean	Boulevard		(BMc)
Dr R Loh		Rosegarth	(RL)				
Dr D Kumar		Plane Trees	(DK)	<u>Liaison Officer</u>			
Dr G Chandı	rasekaran	Plane Trees	(GC)	Marcus Beacham	LMC		(MB)
Dr S Ganesh	namoorthy	Raistrick	(SG)				
Dr N Taylor		Hebden Bridge	(NT)	Observers/Guests			
Dr A Jagota		Queens Road	(AJ)				
Dr S Khan		Church Lane	(SK)				
Dr M Mensa	ah	Keighley Road	(MM)				
Dr J Ring		Stainland Road	(JR)				
Sessional GI	<u>P</u>						
Dr R Hussair	n		(RH)				
					<u>ACTION</u>		
	WELCOME and APOLOGIES	<u>.</u>					
43/19	Apologies were received from	om Dr E Gayle (EG) and Dr TI	R Lau (TL)				
44/19	<b>CONFIRMATION OF LMC O</b>	<del></del>					
	Following the nomination p	rocess held the following w	ere agreed as	s the new Committee for Calde	rdale LMC:		
	Dr G Chandrasekaran, Dr S	Gameshamoorthy, Dr E Gayl	le, Dr R Hussa	ain, Dr A Jagota, Dr S Khan, Dr I	PD Kumar, Dr R Loh,		
	Dr M Mensah, Dr S Nagpau	l, Dr J Ring, Dr N Taylor.					
	In addition Dr TR Lau will continue as the representative from VTS						
	The Committee wish to put on record appreciation for the Officers who have now left the LMC, for their hard work and commitment to the work of the group. Dr M Azeb, Dr S Chambers, Dr A Chaudhry, Dr A Siddiqui, Dr S Vivekananthan and Dr B Wyatt.						

45/19	ELECTION OF LMC EXECUTIVE	
	Following a process in the meeting of nomination, second and unanimous vote by all Officers for each role, the following were confirmed as the LMC Executive:	
	LMC Chair – Dr S Nagpaul	
	LMC Medical Secretary – Dr R Loh	
	LMC Treasurer – Dr J Ring	
	LMC Vice-Chair – Dr D Kumar	
46/19	DECLARATION OF INTERESTS	
·	All Officers were reminded of the need to declare any interests in regard to the items planned on the Agenda. None were declared.	
	All the Officers on the Committee were asked to complete a Register of Interests form, to be sent electronically to enable a register to be compiled and kept. Forms to be sent to the Liaison Officer by 24 <sup>th</sup> April.	All
	All Officers were also asked to send a short summary biog for use on the LMC website along with a photograph,	All
	additionally to also register a unique email address for the purpose of registration on the BMA list-server for LMC's. This additional information to be sent to the Liaison Officer by 24 <sup>th</sup> April.	
47/19	LEAD ROLES	
,	The importance of lead roles were also discussed so that all Officers will have the opportunity to share their interests and specialisms for the benefit of the committee.	
	At this stage there were four key areas agreed and accepted:	
	Information Governance and I.T – Dr D Kumar	
	Sessional and Locum doctors – Dr R Hussain	
	Community treatment and Hospital services – Dr G Chandrasekaran Well-being – Dr M Mensah	
48/19	MINUTES OF THE LAST MEETING	
. 5, 25	Agreed and signed off as correct following some minor adjustments.	
49/19	Action Log Update	
•	As per attached Action Log	

50/19	Matters Arising	
	30/19 Apex Insight Two items of correspondence were presented. A letter from Calderdale CCG following the response sent by the LMC after the committee correspondence in February and communication from Apex Insight regarding their assessment of risk.	
	A summary paper was presented and following discussion it was recognised the value and importance of being able to move forward with the planned installation whilst recognising there continues to be a very low risk for data breach on non-windows 10 systems during the upload period. It was agreed to communicate to all Practice Managers noting this low risk but advising that each practice would need to make a decision on its level of risk tolerance and that a view could be sought from the DPO if required.  MB will also seek to gain clarification on the schedule for Windows 10 installation for the Calderdale practices.  MB to also ask for the current status regarding DPO to be on the agenda for the next CCG/LMC meeting.	МВ
	38/19 PCN Update Feedback was given following the development session earlier in the day between CCG and LMC where PCN implementation was the theme. Generally the focus was on key areas required for the registration process. Firstly the election of Clinical Directors. Discussion was had with the CCG on their desire to see an agreed role profile established for the election process. LMC are happy to compile a profile based on sources available and the CCG input but are only agreeable to this profile coming from the LMC and to be sent to networks as a suggested profile. MB to collate and circulate. Secondly the boundaries of the five locality areas. These are agreed and supported by the LMC as the existing locality boundaries already established. Finally the issue of who receives payment for the DES and holds the funds. There are discussions at network level as to their preference with a number of options being considered, including the offer made to all networks by PGPA. The one issue that will impact on network decisions is whether VAT will apply if a Federation holds the funds. MB to collate the guidance and advice available in the system and will circulate this to networks. PGPA separately will be seeking advice from an experienced medical tax accountant.	МВ
	AGENDA	
51/19	Practice Managers  PM Development – An overview of support currently in place for PM's was given with an emphasis on how the LMC views the importance of developing an effective workforce across our practices and a desire to see this workforce supported as a critical element of our workforce. On May 23 <sup>rd</sup> will be the PM Team Building Event, an all day event provided by RedSky following an investment of £4k. MB managing the booking of places and will circulate an attendance list to date at the end of April with notification of any available places. All PM's /relevant member of	

	management team were strongly encouraged to attend so all practices are represented.  Starsteadt Urine Tubes – LMC unaware that the pilot had been re-introduced and old style bottles were now chargeable. Practices, on grounds of usability are reluctant to ask patients to use these bottles. LMC advise practices not to use the new bottles at present until the situation has been discussed and resolved with CHFT. MB to ask for this to be included on next interface agenda.  YAS Pathway – LMC will update following a meeting with the YAS Medical Director on the 24 <sup>th</sup> April. MB will be attending.  Falsified Medicines Directive – This is not an issue to have concerns about until our IT systems support this	МВ
	functionality.  Community Services Contract – The LMC had not been consulted on this new contract and will ask for this to be discussed at the next LMC/CCG Exec meeting  DATIX Reporting – LMC to raise the concerns expressed with CHFT at the next interface meeting.	МВ
52/19	GP Leadership Programme  Funding has been made available from the CCG for a second tranche of training following the success of the first course. An overview of the training was given and LMC will be working with the CCG on setting up this programme again. More information to follow.	SN
53/19	Collaborative LMC Working  A discussion was held following the request from Kirklees LMC to agree a collaboration working between Calderdale, Kirklees and Wakefied LMC's on shared key national strategies released by NHSe. The plan is to hold 6 meetings over the next 12 months, the cost of this to be met from networking funds held by Kirklees from GDPF. Updates will be shared with the LMC once established.	
54/19	Resilience and Retention Programme  An overview paper was discussed that covered the four key areas of development being implemented by NHSe and which form part of a regional collaboration, led by YORLMC and involving LMC's from Yorkshire and Humber. The four key activities, covered by an agreed MOU include:  • Peer Support – Having Better conversations, GP to GP support  • GP Resilience – Identifying GP burnout, offering support to address factors.  • GP Signposting – Ensuring GP's are aware of national and local support provision.  • International Recruitment Tier 2 Visa – Ensuring information regarding sponsorship is available.	
	GP Mentoring was also discussed, again this comes with a funding pot from NHSe. The mentoring programme will be delivered on a West Yorkshire wide basis and implemented once further information is clarified by YORLMC who will	

	administer the scheme.	
	The LMC also discussed the possibility of developing a Calderdale LMC Well-Being Strategy. It was agreed that MB would develop this working with the Lead for well-being MM.	
55/19	LMC Liaison Officer It was agreed by the Committee that the post of LMC Liaison Officer be made permanent. Marcus Beacham who has completed the three month probationary period ending 31 <sup>st</sup> March 2019 was appointed to the post.	
56/19		
	Sessional GP's RH shared information regarding the YORLMC conference in Harrogate on 3 <sup>rd</sup> July. Discussion was had regarding sessional/locum GP's accessing Safeguarding training from the CCG. MB to clarify criteria in place from the CCG.	МВ
57/19	Correspondence	
	None presented	
58/19	<u>AOB</u>	
	None recorded	
	DATE OF NEXT MEETING	
	Date of Next Meeting Wednesday 8 <sup>th</sup> May 2019 Learning & Development Centre, Calderdale Royal	
	Hospital, 7.45 pm	

## Calderdale Local Medical Committee Meeting on Wednesday 13<sup>th</sup> March 2019

## **Action Log**

Item	Agenda Item	Action Required	Lead	Status	Completion
					Date
441/18	Locala /S1 data sharing agreement	Locala staff aware of correct process and CCG to continue monitoring process.	RL/DK	Complete	10/4/19
469/18	MSK referral	Changes made and in place.	NT	Complete	10/4/19
6/19	Public Health – Sexual Health Services	GC awaiting email trail to confirm	GC	Ongoing	

		action and process in place			
12/19	Correspondence – Syrian Refugees Request for additional funding from CCG by Plane Trees Practice.	Funding from CCG unlikely awaiting further meeting. Correspondence to be sent stating LMC view supporting the Practice.	DK/RL	Ongoing	
24/19	YAS Key Concerns	Meeting to be held with Med Director of YAS and all local LMC's on Friday 26 April, MB to feedback to May LMC	MB	Ongoing	
28/19	Private Consultations and Prescriptions Issue	Final letter and Information Sheet to be available for May LMC	RL	Complete	10/4/19
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.	In place through the Outpatient Transformation Board	NT/AB	Complete	10/4/19
35/19	Notification of Death by the Coroner to General Practice	Correspondence from LMC to clarify procedure and importance of this being completed.	RL	Ongoing	
44/19	All LMC Officers to confirm a new email address for the LMC List server to Liaison Officer by 24 <sup>th</sup> April		All	New	
44/19	All new LMC Officers to send summary bio and photo to Liaison Officer by 24 <sup>th</sup> April for the website		All	New	
46/19	All LMC Officers to complete the Register of Interest forms electronically and send to Liaison Officer b 24 <sup>th</sup> April.		All	New	
50/19	30/19 Apex Insight Agreed position of advice to be sent to all PM's and clarification of the Windows 10 rolllout schedule to be sought.		MB	New	
50/19	LMC to raise position of CCG on the DPO at the next CCG/LMC meeting	To request agenda item	MB	New	
50/19	38/19 collate guidance and advice available on VAT issue	To circulate to PM's and networks	МВ	New	
50/19	38/19 To clarify wording in Network DES Specification from NHSe 'employed by CCG'	To search list server and other LMC communities	SN	New	

51/19	Starsteadt Tubes and DATIX reporting issue	To put on the agenda for the	MB	New	
		CCG/CHFT Interface meeting			
52/19	GP Leadership Programme, implementation of tranche 2	To discuss and arrange with the CCG	SN	New	
56/19	Safeguarding Training for Locum/Sessional GP's	To seek clarification on the criteria for training delivered by CCG	МВ	New	